

# Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim       Final

Date of Report    June 11, 2019

## Auditor Information

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| <b>Name:</b> Sharon R. Shaver                      | <b>Email:</b> sharonrshaver@gmail.com            |
| <b>Company Name:</b> SRS Professional Services LLC |  |
| <b>Mailing Address:</b> P.O. Box 1183              | <b>City, State, Zip:</b> Mableton, GA 30126      |
| <b>Telephone:</b> 478-454-7433                     | <b>Date of Facility Visit:</b> April 24-26, 2019 |

## Agency Information

|  |                                   |  |   |
|--|-----------------------------------|--|---|
| <b>Name of Agency:</b> Tennessee State Department of Corrections   |                                   | <b>Governing Authority or Parent Agency (If Applicable):</b> State of Tennessee                                      |   |
| <b>Physical Address:</b> Rachel Jackson Building   |                                   | <b>City, State, Zip:</b> Nashville, TN 37243   |   |
| <b>Mailing Address:</b> 320 Sixth Avenue North   |                                   | <b>City, State, Zip:</b> Nashville, TN 37243   |   |
| <b>Telephone:</b> 615-741-1000   |                                   | <b>Is Agency accredited by any organization?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |   |
| <b>The Agency Is:</b>  | <input type="checkbox"/> Military | <input type="checkbox"/> Private for Profit  | <input type="checkbox"/> Private not for Profit |
| <input type="checkbox"/> Municipal   | <input type="checkbox"/> County   | <input checked="" type="checkbox"/> State  | <input type="checkbox"/> Federal                |
| <b>Agency mission:</b> To operate safe and secure prisons and provide effective community supervision in order to enhance public safety.   |                                   |  |   |
| <b>Agency Website with PREA Information:</b> <a href="http://tn.gov/correction/article/prison-rape-elimination-act-of-2003">http://tn.gov/correction/article/prison-rape-elimination-act-of-2003</a> |                                   |  |   |

## Agency Chief Executive Officer

|                                    |                                |
|------------------------------------|--------------------------------|
| <b>Name:</b> Tony C. Parker        | <b>Title:</b> Commissioner     |
| <b>Email:</b> Tony.C.Parker@tn.gov | <b>Telephone:</b> 615-253-8129 |

## Agency-Wide PREA Coordinator

|                                      |                                       |
|--------------------------------------|---------------------------------------|
| <b>Name:</b> Blake Pollock           | <b>Title:</b> Acting PREA Coordinator |
| <b>Email:</b> Blake.H.Pollock@tn.gov | <b>Telephone:</b> 615-982-5398        |

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| <b>PREA Coordinator Reports to:</b><br>Kim Gulden | <b>Number of Compliance Managers who report to the PREA Coordinator</b> 10 |
|---|--|

### Facility Information

|   |   |   |   |
|---|---|---|---|
| <b>Name of Facility:</b>                          | Women's Therapeutic Residential Center  |   |   |
| <b>Physical Address:</b>                          | 480 Green Chapel Rd. Henning, Tennessee 38041   |   |   |
| <b>Mailing Address (if different than above):</b> | 480 Green Chapel Rd. Henning, Tennessee 38041   |   |   |
| <b>Telephone Number:</b>                          | 731-738-5044  |   |   |
| <b>The Facility Is:</b>                           | <input type="checkbox"/> Military   | <input type="checkbox"/> Private for profit | <input type="checkbox"/> Private not for profit |
| <input type="checkbox"/> Municipal                | <input type="checkbox"/> County   | <input checked="" type="checkbox"/> State   | <input type="checkbox"/> Federal                |
| <b>Facility Type:</b>                             | <input type="checkbox"/> Jail   | <input checked="" type="checkbox"/> Prison  |   |
| <b>Facility Mission:</b>                          | To provide a healthy, safe and secure environment within which we will provide gender responsive treatment, educational services, career development and reentry services that focus on changing criminal behavior. |   |   |
| <b>Facility Website with PREA Information:</b>    | no facility specific website exists   |   |   |

### Warden/Superintendent

|                                       |   |
|---------------------------------------|---|
| <b>Name:</b> Trinity D. Minter        | <b>Title:</b> Warden                    |
| <b>Email:</b> Trinity.D.Minter@tn.gov | <b>Telephone:</b> 731-738-5044 ext 2240 |

### Facility PREA Compliance Manager

|                                     |   |
|-------------------------------------|---|
| <b>Name:</b> Andrea M. Logan        | <b>Title:</b> PREA Compliance Manager   |
| <b>Email:</b> Andrea.M.Logan@tn.gov | <b>Telephone:</b> 731-738-5044 ext 3435 |

### Facility Health Service Administrator

|  |  |
|--|--|
| <b>Name:</b> Kelly Martin                | <b>Title:</b> Health Service Administrator |
| <b>Email:</b> kemartin@TeamCenturion.com | <b>Telephone:</b> 731-738-5044 ext 3294    |

### Facility Characteristics

|  |  |
|--|--|
| <b>Designated Facility Capacity:</b> 1536  | <b>Current Population of Facility:</b> 981                 |
| <b>Number of inmates admitted to facility during the past 12 months</b>  | 490  |
| <b>Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:</b>  | 490  |
| <b>Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:</b> | 490  |
| <b>Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:</b>                                      | 0  |
| <b>Age Range of Population:</b>  | <b>Youthful Inmates Under 18:</b> N/A <b>Adults:</b> 18-78 |

|   |   |                             |  |
|---|---|-----------------------------|--|
| Are youthful inmates housed separately from the adult population?   | <input type="checkbox"/> Yes            | <input type="checkbox"/> No | <input checked="" type="checkbox"/> NA |
| Number of youthful inmates housed at this facility during the past 12 months:   | 0                                       |                             |  |
| Average length of stay or time under supervision:   | 5 years                                 |                             |  |
| Facility security level/inmate custody levels:  | Minimum Trustee to Close                |                             |  |
| Number of staff currently employed by the facility who may have contact with inmates:   | 248                                     |                             |  |
| Number of staff hired by the facility during the past 12 months who may have contact with inmates:  | 103                                     |                             |  |
| Number of contracts in the past 12 months for services with contractors who may have contact with inmates:  | 3                                       |                             |  |
| <b>Physical Plant</b>   |   |                             |  |
| Number of Buildings: 18   | Number of Single Cell Housing Units: 0  |                             |  |
| Number of Multiple Occupancy Cell Housing Units:  | 6                                       |                             |  |
| Number of Open Bay/Dorm Housing Units:  | 0                                       |                             |  |
| Number of Segregation Cells (Administrative and Disciplinary):  | 41                                      |                             |  |
| Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.): Facility has 267 cameras located inside and outside of buildings throughout the facility for a total of 267. Video is able to be reviewed from OIC Offices, Central Controls, Warden, AWS, AWT, COS, Institutional Investigator, and STG Offices. Retention of video is 30 days. |   |                             |  |
| <b>Medical</b>  |   |                             |  |
| Type of Medical Facility:   | Infirmary Care Facility                 |                             |  |
| Forensic sexual assault medical exams are conducted at:   | Jackson Madison County General Hospital |                             |  |
| <b>Other</b>  |   |                             |  |
| Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:   | 535                                     |                             |  |
| Number of investigators the agency currently employs to investigate allegations of sexual abuse:  | 2                                       |                             |  |

# Audit Findings

## Audit Narrative

### INTRODUCTION:

The Prison Rape Elimination Act (PREA) audit of the Women's Therapeutic Residential Center (WTRC) was conducted on April 24-26, 2019. Women's Therapeutic Residential Center is located approximately sixty miles north of Memphis, Tennessee on a 6,500 acre tract of fertile Mississippi River soil in Lauderdale County. Women's Therapeutic Residential Center is co-located with West Tennessee State Penitentiary (WTSP) at this location. Previously, the audited structure was a part of the West Tennessee State Penitentiary complex, but in August 2016, the agency converted Site 1 to Women's Therapeutic Residential Center (WTRC). Women's Therapeutic Residential Center opened as a 1536 bed adult female facility, operating with a different mission separately from WTSP. Although both are located on the same grounds and operating under a single budget code, Women's Therapeutic Residential Center and West Tennessee State Penitentiary each have their own Warden, Associate Wardens, Chief of Security, Health Administrator, Chief Counselor, and Unit Teams. Other departments are shared between West Tennessee State Penitentiary and Women's Therapeutic Residential Center such as Fiscal, Human Resources, Training, Records, Compliance, Mailroom, Visitation, Warehouse, Commissary, Key Control, Armory, Maintenance, Sanitation, Tool Control, Disciplinary Board, Principal and Administrative Assignment officer. This Final Report covers the audit for Women's Therapeutic Residential Center/Site 1. The total inmate population on day one of the onsite audit was 981.

### PHASE ONE: PRE-ONSITE AUDIT

**Audit Planning and Logistics:** Auditor entered into contract with Tennessee Department of Corrections on 06/14/2018 to conduct the PREA compliance audit at West Tennessee State Penitentiary located in Henning, Tennessee at 480 Green Chapel Road, using the Adult Prisons and Jails Standards. Auditor reached out to Tennessee Department of Corrections PREA Coordinator by email on February 25, 2019 to begin audit planning and logistics and found that he had retired. Tennessee Department of Corrections' Director of Compliance responded and advised that an Interim PREA Coordinator had been appointed and would be the primary point of contact for the audit at Women's Therapeutic Residential Center. Auditor made contact with Interim State PREA Coordinator February 28, 2019 and began establishing audit goals and expectations, communicating key information on the audit process, and coordinating audit logistics. This audit was scheduled to be conducted as a back-to-back audit with West Tennessee State Penitentiary.

On March 1, 2019 the following documents were provided to Interim State PREA Coordinator by email: Audit Notices in English and Spanish, PREA Audits Process Map, Instructions for PREA Audit Tour, PREA Checklist of Audit Documentation, and a list of supplemental information and documentation auditor required to accompany the Pre Audit Questionnaire (PAQ). Regular and frequent contact was made between auditor and Interim State PREA Coordinator by phone and email during the next several weeks to exchange information in preparation for the onsite audit. The Women's Therapeutic Residential Center opened in August 2016 making this the first PREA Audit conducted for this facility.

**Posting Notice of the Audit:** The PREA Audit Notice in both English and Spanish was sent to Interim State PREA Coordinator Blake H. Pollock on March 1, 2019 with instructions to place in all housing units, cafeteria, recreation areas, and other common areas for staff and inmates, inmate work and programming areas, facility entry points, and visitation. The Notices included the appropriate confidentiality clause stating that all correspondence and disclosures with the auditor are confidential and will be kept confidential unless required by law to disclose. These exceptions include: 1) if the person is an immediate danger to herself/himself or others; 2) allegations of suspected child abuse, neglect or maltreatment; 3) legal proceedings where information has been subpoenaed. Interim State PREA Coordinator Pollock provided evidence by email that Notices had been posted on March 8, 2019. Notices were printed on 8 1/2" x 11 paper using Arial point 16 font. Auditor's observation during onsite audit found Notices to be legible and posted as instructed and in the appropriate locations.

**Reviewing Facility Policies, Procedures, and Supporting Documentation:** A web search was conducted to obtain any relevant information about Women's Therapeutic Residential Center with the result of no articles of relevance. Tennessee Department of Corrections dedicates a page on their public website to Prison Rape Elimination Act (PREA) where general information related to the Act is posted along with the Tennessee

Department of Corrections' PREA Policy Statement and Action Plan, Employee Awareness and Education, Offender Awareness and Training, Offender Classification and Housing, Response to Sexual Assault or Sexual Misconduct Allegations, Investigation of Sexual Assault and Sexual Misconduct. The agency posts Final Reports for their facility PREA audits, Tennessee Department of Corrections PREA Annual Reports, and Tennessee Department of Corrections Policies & Procedures to this web page. This page also includes related links to U.S. Department of Justice, American Correctional Association, U.S. Office of Justice Programs, National PREA Resource Center, and American Probation and Parole Association.

Auditor conducted a web search of the state's mandatory reporter laws and found them consistent with other states related to Elder Abuse and vulnerable adults and abuse of juveniles. Additional information on this law was provided by Director of Compliance related to Tennessee Department of Corrections' reporting requirements and is discussed in Standard 115.31 narrative. Auditor also placed a test call to the 3rd party call line, left a message, and was called back by Interim State PREA Coordinator within 24 hours. Auditor also made a successful test call to the Shelby County Rape Crisis Center hotline and the contracted outside hospital, Jackson Madison County General Hospital. Additional information on this is found in Standard 115.21 narrative.

Pre-Audit Questionnaire and Documentation Review: The completed Pre-Audit Questionnaire (PAQ) was received on a secure thumb drive on March 26, 2019 (shipped March 25, 2019 overnight). Auditor reviewed all the information provided on the PAQ including the supporting documentation and policies. A sampling of documents was provided for all questions on the PAQ. Various agency policies and directives related to the questions in the PAQ was included and highlighted to indicate the specific applicable section corresponding to standards. Other facility specific supporting documents were provided. The listing below includes documents reviewed during the pre-audit phase, although it may not be conclusive.

Agency Policies Reviewed by Auditor:

103.10.1, Title VI - Limited English Proficiency (LEP)  
107.01, Office of Investigations and Compliance Unit Authority, Responsibility, Personnel-Selection and Training  
108.01, Facility Construction, Renovation and Physical Plant Maintenance  
110.01, Pre-Service (Basic) Training Policy and Employee Orientation  
112.08, Personal Hygiene Resources for Inmates  
112.08.1, Personal Hygiene Resources for Inmates (WTRC)  
113.15, Inmate Co-Payment for Health Services  
113.30, Access to Healthcare  
113.37, Gender Dysphoria, Transgender, Transsexual, Intersex, and Gender Non-Conforming Conditions  
113.42, Communicable Diseases  
113.52, Release of Protected Healthcare Information  
113.90, Health Services for Females  
115.01, Standards for Volunteers and Coordination of Community Involvement  
115.14.2, Housing Youthful Offenders  
301.04, Job Requirements  
305.03, Employee/Offender Interaction  
404.05, Orientation Unit  
404.09, Protective Services  
501.01, Inmate Grievance Procedures  
502.06, Prison Rape Elimination Act (PREA) Implementation, Education, and Compliance  
502.06.1, Prison Rape Elimination Act (PREA) Screening, Classification, and Monitoring  
502.06.2, Prison Rape Elimination Act (PREA) Allegations, Investigations, and Sexual Abuse Response Teams (SART)  
502.06.2-1, PREA Allegations, Investigations, and Sexual Abuse Response Teams (SART) (WTRC)  
502.06.3, Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims  
506.06, Searches  
506.14, Housing Assignments  
506.14.2, Housing and Programming of Juvenile Offenders

Documents Reviewed

Population Reports for 12 months  
Facility Layout/Schematic  
Renovation Plan Documents  
Staffing Plan  
Annual Review of Staffing Plan  
Memorandum of Understanding with The Shelby County Rape Crisis Center  
Samples of Inmate Training Records  
Samples of Staff Training Records

PREA Lesson Plans/Curricula  
Inmate Rules and Regulations Handbook  
Facility Volunteer Services Training Manual  
Employee List and Positions  
Contracted Employee Lists and Positions  
Volunteer List  
Sexual Abuse and Sexual Harassment Allegations Log for last 12 months  
TDOC PREA Annual Report, 2016-2017  
TDOC PREA Final Reports (various)  
Risk Assessment Screening Instrument  
Retaliation Monitoring Form

**Outreach to Advocacy Organizations:** Auditor conducted research with Just Detention International (JDI) to inquire of any correspondence they may have received during the past 12 months from offenders at Women's Therapeutic Residential Center or from anyone about concerns at the facility. JDI responded they have received none. Auditor placed a phone call to Shelby Rape Crisis Center and found no reports of concern.

## **PHASE TWO: ONSITE AUDIT**

**Site Review:** Auditor began the official onsite audit at Women's Therapeutic Residential Center upon conclusion of the audit at West Tennessee State Penitentiary around 11:00 am on Wednesday, April 24, 2019. Executive staff had already been introduced earlier in the week and were convened to hear the closeout of the West Tennessee State Penitentiary audit. A short in-briefing was conducted with auditor, Warden, Associate Warden of Treatment, Health Services Administrator, Director of Compliance, Interim State PREA Coordinator. Plans for the day were reviewed and preparations were made for the site inspection.

The site inspection began at approximately 12:30 pm shortly after lunch at the facility. During the site inspection, auditor was accompanied by Associate Warden of Treatment, Health Services Administrator, Director of Compliance, State PREA Coordinator (Interim), PREA Compliance Manager, and Facility Compliance Manager. Based on auditor's review of the Diagram of Physical Plant for Women's Therapeutic Residential Center, all areas of the facility were toured. The tour included: Secure Entry Building/Visitor Checkpoint, Security and Visitation Building, Clinical Services, Food Service/Kitchen/Dining Room, Large Program Building, Recreational Services, Sallyport, Laundry, Inmate Intake Processing, Armory, Warehouse/Commissary, Program Buildings (2), Family Reunification Program building, and Buildings containing Housing Units 7, 8, 9, 10, 11, and 12.

The onsite tour and inspection were conducted by auditor using guidance from the Instructions for the PREA Audit Tour, Interview Protocols, Process Map, Auditor Compliance Tool, and the PREA Auditor Handbook obtained from the National PREA Resource Center. Audit Notices in English and Spanish were observed by auditor posted in every housing unit and in all common areas used by inmates and staff to include entry points and visitation area, medical section, recreation, program and education buildings, kitchen and dining room, work areas, and education. Notices posted on the bulletin boards had been placed on top of a colored border paper in a creative manner in each of the housing units. Any potential blind spots observed by auditor were covered either by mirrors or cameras throughout the facility; there were no concerns noted by the end of the tour. A complement of 267 strategically placed video cameras supplement staff supervision of the prison. Cameras supplement supervision in Units 7, 8, 9, 10, 11, and 12; exterior locations near housing units; Security Building; Clinic, Yard, and Medication Windows; Dining Room; Education, Library, and Yard; Gym; Child Visitation; Laundry; Intake; Yard and Sallyports. Program, education, industries, food service, counseling, library areas were equipped with windows and direct lines of sight to provide for clear visibility of activities. Security and non-security staff were observed throughout the grounds and in the buildings conducting daily work and interacting with the inmate population. Inmates have a good bit of freedom of movement within the prison grounds which was observed in an orderly fashion throughout the onsite visit. Interactions observed between inmates and staff appeared to be mutually respectful and later confirmed by auditor through interviews with both staff and inmates. Inmates were respectful and not apprehensive about talking with staff or with auditor. The facility structures and grounds were exceptionally clean and organized.

**Process Observations and Testing:** Auditor conducted test calls randomly throughout the housing unit tours and left a test call message. Auditor observed each of the test calls provided a direct notification to Interim State PREA Coordinator on his mobile phone who was accompanying the Auditor during the tour.

Intake of new arrivals (also called incoming chain) is normally conducted on Tuesdays and Thursdays. Auditor observed incoming chain on Thursday April 25, 2019 from the point of arrival, processing of property, searches, waiting in the holding area, and being interviewed by medical staff. The incoming chain consisted of 24 inmates (18 new arrivals and 6 returning). The intake area is designed with two separate holding areas to accommodate separation of inmates who have been searched from those waiting to be searched (each area has multiple dividers to allow for separation within the groups), a large open area with tables for property processing, and a large space with desks for interviewing and paperwork processing. Many processes were being conducted at once, but the process was observed by auditor as orderly and the area was adequately staffed to provide proper supervision. This provided auditor the opportunity to circulate and observe all the different elements of the incoming chain processing. Three medical personnel were available and conducting the medical screening while security staff searched property in another area. Communication and searches were conducted in a professional manner. Later that day auditor visited the housing unit where new arrivals were placed and observed the orientation being delivered by counseling which included the PREA notification the zero-tolerance policy, delivery of the brochure and handbook, and explanation of methods to report sexual abuse and sexual harassment and how to access advocacy center. PREA Risk Screening was conducted by the unit counselor with each inmate individually in private and auditor observed a sampling of these screenings.

**Conducting Interviews:** Various locations throughout the facility were used to conduct both staff and inmate interviews. Each building was equipped with a private office, generally the unit manager's or counselor's office, which auditor used for interviews. All interviews were conducted in a quiet/private area. Upon meeting each person, auditor explained the purpose of the interview and reason for their requested participation. Auditor explained the limitations to the confidentiality and that information discussed would not be shared with facility staff. Auditor found the inmates at Women's Therapeutic Residential Center to be very comfortable talking to auditor and all participated willingly. Staff were helpful, knowledgeable and forthcoming with information asked by auditor. Interviews were conducted over the course of all 2.5 days while conducting onsite audit.

Inmate interviews: On day one of the onsite audit, there were 981 female inmates assigned to Women's Therapeutic Residential Center. The number of inmates to be interviewed was based on requirements PREA Auditor Handbook page 50. Auditor selected inmates for interviews based on the roster of all inmates separated by housing assignment, a PREA Screening & Monitoring List, a list of inmates with limited English proficiency and the PREA investigation files. Auditor selected targeted inmates first, then selected random inmates based on a random number selector for each of the housing units to ensure inmates from every unit were included. Interviews were conducted using the interview protocols developed by the U.S. Department of Justice. Auditor used questions from protocols as a baseline for interviews and probed for additional information as necessary to obtain a comprehensive view of Women's Therapeutic Residential Center operations and culture. All inmates interviewed were selected by the auditor. Interviews were conducted one at a time, and in a private setting. All inmates were advised by this auditor prior to the interview that the information discussed would be kept private and confidential, with the exception of any disclosure that falls within the auditor's requirement to report. All inmates interviewed did so voluntarily with no refusals to participate.

A total of 36 inmates were interviewed by the auditor (Random/15 and Targeted/21). Due to individuals falling within multiple targeted populations, a total of 25 interview protocols were conducted for targeted population. The breakdown of the numbers of targeted inmate interviews is listed below (actual/required):

- Youthful Inmates (0/3)\*
- Inmates with a Physical Disability/Inmates who are Blind, Deaf, or Hard of Hearing (2/1)
- Inmates who are LEP (3/1)
- Inmates with a Cognitive Disability (1/1)
- Inmates who Identify as Lesbian, Gay, or Bisexual (7/1)
- Inmates who Identify as Transgender or Intersex (0/2)\*
- Inmates in Segregated Housing for High Risk of Sexual Victimization (0/1)\*
- Inmates Who Reported Sexual Abuse (5/3)
- Inmates Who Reported Sexual Victimization During Risk Screening (7/2)

\*Denotes categories where there were no or few inmates available for interview who met the targeted category. Women's Therapeutic Residential Center houses adult female offenders ages 18 -78. Housing and Programming of Juvenile Offenders, Policy 506.14.2 lists facilities that provide housing for these offenders and Women's Therapeutic Residential Center is not designated as a juvenile facility. A population report review revealed there

were two (2) youthful inmates who had been housed at Women's Therapeutic Residential Center for a very short and temporary time. These two juveniles were housed at Women's Therapeutic Residential Center as safekeepers to assist a local county jail that did not have housing available to keep these juveniles separate from the adult inmates. As this was a temporary and isolated event, 115.14 is still considered not applicable for this facility due to the mission and the fact that under normal circumstances TDOC will not assign anyone under the age of 18 to this facility. Because there are no youthful inmates assigned to this facility, no interviews were completed. There were no documented inmates housed at Women's Therapeutic Residential Center who identify as transgender, and none identified as intersex. No inmates have been housed in segregation for risk of victimization or for making a sexual abuse allegation over the past 12 months resulting in no inmates to interview in this targeted category. Other targeted category protocols were used to interview six (6) inmates to compensate for the (3) targeted categories where no inmates were available. Information from the targeted interviews will be conveyed generally within the related standards narratives to protect any potential identification of those inmates.

Based on auditor's analysis of the interviews with inmates combined with personal observations, the following conclusions were made: 1) Male staff regularly announce their presence when entering the housing areas; 2) Inmates are never naked in full view of male staff; 3) Inmates received information about the facility's rules against sexual abuse and harassment upon arrival at the facility; 4) inmates were told about their right to not be sexual abused or sexually harassed, how to report an incident, the right not to be punished for making a report within the first week of arrival to the facility by their unit counselor (inmates also referenced the training received at the reception center) and they also were clear about the prohibition of retaliation for making a report; 5) inmates recall being asked the PREA risk screening questions when they arrived this facility and at reception center as well as later during a counseling contact meeting; 6) inmates were able to clearly articulate several means for reporting and everyone said they knew at least one staff they could tell if they needed to make a report; 7) inmates understood they can make a report anonymously, in writing, and that someone from outside the facility can make a report on their behalf; 8) of the inmates who have made a report while at Women's Therapeutic Residential Center, all made their reports directly to a staff member; those interviewed reported to auditor that an investigator talked to them the same day they made the report, and that the problem they reported was resolved and that someone followed-up with them several times after the investigation was closed to ensure no retaliation had occurred; 9) inmates are generally aware there are services outside of the facility for dealing with sexual abuse and how to access services; 10) inmates were aware the information to access the advocacy services is posted on the wall by the phone and in their handbooks but none of the inmates interviewed had used the service. Inmates also know about accessing mental health services internally and several were on regular caseloads. Overall, inmate interviews conveyed to auditor that Women's Therapeutic Residential Center is a safe prison for inmates.

Staff Interviews: As noted in the introduction, West Tennessee State Penitentiary (WTSP) and Women's Therapeutic Residential Center (WTRC) are co-located on the same property and share some staffing positions. Due to a shared budget the staffing position allocations are included together. Women's Therapeutic Residential Center reports a total of 530 staff who may have contact with inmates, which is inclusive of West Tennessee State Penitentiary staff. Of the 530 employees, Women's Therapeutic Residential Center identified 248 who are assigned to this facility, with an additional 24 employees (administrative) shared with West Tennessee State Penitentiary and housed in an administrative building outside the main prison grounds; the additional 255 are assigned to West Tennessee State Penitentiary.

Tennessee Department of Corrections contracts for the following services at Women's Therapeutic Residential Center: Medical services are provided by Centurion (54); Behavioral/Mental Health services are provided by Corizon (17); TRICOR (prison industries) manages the Customer Service Call Center; Food Service operations are staffed by Aramark (19). Employees and contractors interviewed were selected by this auditor, based on random selection from the lists provided and based on his/her specific area of responsibility. A list of 229 approved volunteers was provided and auditor requested a schedule of volunteer services for the facility to identify those visitors who regularly bring services in. Volunteer interviews were selected based on the availability of volunteers who were holding services or programs during the onsite visit.

While touring the facility, random informal staff interviews were conducted which were not counted toward formal interview requirements. These informal conversations involved general information about PREA such as type of training received, awareness of responsibilities, procedures and responsibilities for reporting sexual abuse, sexual harassment, and/or retaliation along with general questions about their respective areas of responsibility. Everyone interviewed acknowledged receiving training related to their PREA responsibilities and awareness of



the zero-tolerance policy. Employees carry a Sexual Abuse Response Quick Reference Card that provides the steps necessary if they observe or receive a report of a sexual abuse incident. Interviews began on day one of the onsite audit and continued throughout the duration of the site visit. Interviews were conducted in different locations throughout the facility and in an area that provided adequate privacy for confidentiality.

Auditor conducted interviews with the following agency leadership (not counted in totals below): Director of Compliance, Designee for Commissioner, Agency Head; Warden; Interim Agency PREA Coordinator, Associate Warden of Treatment, Facility PREA Compliance Manager, Human Resources Analyst, Contracts Administrator. Auditor conducted the following number of staff interviews during the onsite phase of the audit:

- Random Staff (Total) = 15
- Specialized Staff\* (Total) = 17
- Total Staff Interviewed = 32 (not including leadership listed in prior paragraph)
- Total Specialized Protocols Used = 30

The breakdown of the specialized staff interviews follows:

- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment (3)
- Line staff who supervise youthful inmates (0) ▲
- Education staff who work with youthful inmates (0) ▲
- Program staff who work with youthful inmates (0) ▲
- Medical staff (2)
- Mental health staff (2)
- Non-Medical staff involved in cross-gender strip or visual searches (0) ▲
- SAFE and SANE staff (0) ▲
- Volunteers who have contact with inmates (3)
- Contractors who have contact with inmates (5)
- Investigative staff – Criminal investigations (agency level) (1)
- Investigative staff – Administrative investigations (facility level) (1)
- Staff who perform screening for risk of victimization and abusiveness (2)
- Staff who supervise inmates in segregated housing (1)
- Staff on the sexual abuse incident review team (2)
- Designated staff member charged with monitoring retaliation (2)
- First responders, security staff (1)
- First responders, non-security staff (4)
- Intake staff (1)

Total specialized staff interviews\* = 30

\*Note: Several specialized staff interviewed were responsible for more than one of the specialized staff duties; therefore, the number of specialized staff interviews presented in the table above exceeds the number of specialized staff interviewed.

Employees interviewed by auditor confirmed having received the required PREA training and were aware of the zero-tolerance policy. Those employees who were hired after August 2013 received training during Pre-Service Orientation; those who have been employed prior to PREA implementation recall receiving the initial roll-out training. All staff stated they receive a refresher PREA training in in-service every year. Staff had in their possession a Sexual Abuse Response Quick Reference Card, but only one referenced it when discussing First Responder Protocols. All other staff interviewed displayed extensive knowledge of their First Responder responsibilities and the coordinated response plan. In addition to all interviewed security staff having a comprehensive knowledge of their First Responder responsibilities, all interviewed non-security staff and volunteers were also able to explain the whole process as well. Specialized interviews revealed well trained staff in their areas of responsibility. Everyone conveyed a seriousness about sexual abuse and sexual harassment. Officers and supervisors explained that rounds was the key to keeping a safe and secure prison and stated they make frequent rounds throughout their shifts. Supervisors make unpredictable rounds and staff are required to not

call and announce these rounds are being made. Employees, volunteers and contractors were able to explain ways to avoid inappropriate relationships with inmates and were able to explain dynamics of prison rape and signs and symptoms of victims of abuse. Reports of sexual abuse or sexual harassment, or any suspicions are reported to the shift officer in charge (OIC) who will then initiate investigation and make notification to the Facility Investigator and Facility PREA Coordinator, along with other necessary parties. After triangulation of the collective interviews, observation of training and personnel records, review of agency policy, and personal observations, this auditor is convinced staff are knowledgeable, well-trained and promote an environment free from sexual abuse and sexual harassment and that Women's Therapeutic Residential Center has a well-established zero-tolerance culture. Staff conveyed genuine concern for the well-being of the inmates in their care.

▲ No youthful offenders are housed at Women's Therapeutic Residential Center and cross-gender strip searches or body cavity searches have not occurred during the audit period; therefore, some specialized staff interview categories were not applicable. SAFE/SANE services are not conducted by Women's Therapeutic Residential Center staff; however, medical and mental health staff were interviewed to confirm related protocols and practices, and handling of evidence protocols beyond the forensic examination.

Documents Evaluated by Auditor (non-exhaustive)

WTRC April 2019 Religious/Volunteer Activity Schedule  
Daily Population Transaction Report, 04/24/19  
Daily Shift Roster for current key, 04/24/19  
Prior Institutional Employer Release, received from prospective employer/response  
Prior Institutional Employer Release, sent to prior employer/response  
Verification of Criminal History Checks (36)  
Training Records for Volunteers (3)  
Training Records for Contractors (Corizon-4; Centurion-6; Aramark-3)  
Training Records for Employees (22)  
CR-3819 Self-Declaration of Sexual Abuse/Sexual Harassment Unescorted Contractor/Volunteer (16/3)  
CR-3819 Self-Declaration of Sexual Abuse/Sexual Harassment Employee (18)  
CR-3965 Employee PREA Training Acknowledgement Form (22)  
Training Rosters - PREA Basic and Specialized (various)  
Agency Organization Chart  
Facility Organization Chart  
Tennessee Department of Corrections Compliance Organization Chart  
Diagram of Physical Plant  
List of Allegations of Sexual Abuse and Sexual Harassment  
Tennessee Department of Corrections Volunteer Services Training Manual  
Training Rosters - Specialized (11)  
Shift Reports  
Logbook Entries of Rounds  
Training Records for Inmates  
Risk Screening Instruments Completed

Grievances: The Tennessee Department of Correction ensures every inmate the right to utilize the grievance procedure without fear of reprisal. All grievances will be processed in a fair and impartial manner, in accordance with TDOC Policy #501.01, and settled at the lowest possible level in the grievance procedure. The Women's Therapeutic Residential Center Grievance Committee is headed by a Chairperson, who is a staff member; two additional staff members and two inmate members are elected annually by inmates and staff. A grievance is a complaint concerning the substance or application of a written policy and behavior or action of any inmate or staff. If an inmate feels that she has a grievance which needs addressing, the Grievance Committee will work with her to help resolve it. The boxes are checked Monday through Friday for new grievances. Upon receipt of the grievance, the Chairperson will investigate the grievance and respond. Grievance committee hearings are held weekly.

Auditor interviewed Grievance Coordinator who is designated for both West Tennessee State Penitentiary and Women's Therapeutic Residential Center. She possesses a solid knowledge of these procedures and explained the grievance process as noted in Policy #501.01, Inmate Grievance Procedures. She advised there were two (2) grievances filed or concluded within the last 12 months related to sexual abuse/sexual harassment. A copy of

each grievance was provided to auditor. Auditor's review of these grievances observed they were processed in accordance with the agency policy, and according to the specified time frames. Additional information related to these processes can be found in the narrative of Standard 115.52.

Sexual Abuse/Sexual Harassment Investigation Files: During the past 12 months, there were twenty-three (23) total PREA allegations reported and investigated (23 administrative investigations/0 criminal investigations - 10 abuse/13 harassment). Of these, two (2) were inmate on inmate abuse, eight (8) staff on inmate abuse, five (5) inmate on inmate harassment, eight (8) staff on inmate harassment. Investigations were conducted on all allegations with dispositions of one (1) substantiated, six (6) unsubstantiated, and seventeen (16) unfounded. Auditor's conclusion after review of all investigation files is that Women's Therapeutic Residential Center demonstrated prompt, thorough, and unbiased investigations. Additional information related to investigations can be found in the narratives of Standards 115.21, 115.35, 115.71, 115.72.

Personnel Records: Auditor conducted the Human Resources interview with Human Resources Analyst 3. She made all personnel records available as needed and provided copies of all documents auditor requested. More information is discussed in narrative of Standard 115.17.

Training Records: The local training coordinator provided auditor with a combination of rosters, certificates, signed acknowledgements, and computer-based records, as requested, to complete analysis for determination of compliance with related standards. Additional information is discussed in narrative of Standards 115.31, 115.32, 115.34, 115.35.

The facility tour concluded around 3:30 pm on Wednesday. Upon return to the Administration building documentation review and staff interviews began including a visit to 2nd shift briefing. Over the next two days inmate and staff interviews were conducted and documentation reviews and gathering occurred. Additional visits were made to the housing units during the course of interviewing. Wednesday and Thursday auditor remained onsite until 8:00 pm, providing outbriefs to Warden Minter and executive staff at the conclusion of each workday, and concluded on Friday for a departure just before noon.

## Facility Characteristics

**The Women's Therapeutic Residential Center** is located at 480 Green Chapel Road, Henning, Tennessee on a 6,500-acre tract in Lauderdale County approximately 68 miles from Memphis International Airport and is co-located with West Tennessee State Penitentiary, as described in the introduction. From the outside Sites 1 and 2 appear to be one large facility, but as you approach and enter the main security entry point you will find two distinct secure points of entry. Entry to the left will access the Women's Therapeutic Residential Center and to the right is the West Tennessee State Penitentiary (WTSP). (The WTSP PREA audit was conducted immediately preceding this audit and has its own separate report published.) As outlined earlier in this report, both sites operate under a single budget code, but Women's Therapeutic Residential Center and West Tennessee State Penitentiary each have their own Warden, Associate Wardens, Chief of Security, Health Administrator, Chief Counselor, and Unit Teams.

Women's Therapeutic Residential Center is run by Warden Trinity Minter and her executive staff consisting of an executive secretary and two associate wardens. She shares administrative services staff with West Tennessee State Penitentiary's Warden Johnathan Lebo. As noted in the introduction, West Tennessee State Penitentiary (WTSP) and Women's Therapeutic Residential Center (WTRC) are co-located on the same property and share some staffing positions. Women's Therapeutic Residential Center reports a total of 530 staff who may have contact with inmates, which is inclusive of West Tennessee State Penitentiary staff. Of the 530 employees, Women's Therapeutic Residential Center identified 248 with an additional 24 employees (administrative) shared with Women's Therapeutic Residential Center and housed in an administrative building outside the main prison grounds and includes 1 fiscal director and 2 fiscal staff, 1 human resources manager and 4 staff, 1 training specialist and 2 administrative assistants, 1 administrative lieutenant, 2 administrative corporals, 1 compliance manager, 1 records administrative assistant, 2 clerks, 5 correctional officers, and 1 institutional investigator. The 248 staff include all levels of security (correctional officers, corporals, sergeants, lieutenants, captains), treatment staff (education, health services, chaplain, etc.). The additional 255 staff are assigned to West Tennessee State Penitentiary.

The Mission of the Women's Therapeutic Residential Center is "to provide a healthy, safe and secure environment within which we will provide gender responsive treatment, educational services, career development and reentry services that focus on changing criminal behavior". Women's Therapeutic Residential Center Vision Statement is: "To be recognized as a partner in our community with public and private agencies who are constantly improving our evolving criminal justice system in both our state and nation". Women's Therapeutic Residential Center guiding principles are: "We will not compromise the mission of our agency nor facility; understand our strength lies in our employees and seek to empower them; mandate the highest degree of ethical behavior and professional excellence with our staff; treat everyone with honesty and dignity".

Women's Therapeutic Residential Center operates under a four-phase behavioral therapeutic model that includes rehabilitative services and security. Staffing standards dictate staffing patterns which include the Warden, Associate Warden of Security and Associate Warden of Treatment. Each of these individuals has a distinct group of employees which they directly supervise. Warden's staff consists of an Executive Secretary, Associate Warden of Security, Associate Warden of Treatment, Compliance Manager, Facility Safety Officer, Human Resources Analyst III, Training Officer, Institutional Investigator, Sanitation Officer and Fiscal Director. The Associate Warden of Security's staff consists of Chief of Security, Unit Managers, Assignment Officer and Shift Captains. The Associate Warden of Treatment's staff consists of Secretary, Principal, Inmate Job Coordinator, Chaplain, Chief Counselor, Recreation Specialist, IPPO, Behavioral Services Coordinator and Health Services Coordinator. Chief Counselor supervises the Counselors and the Unit Manager supervisors the Unit Sergeants and Correctional Clerical Officers (CCO). Shift Captains are responsible for Core Security, and provide all support services such as Transportation, Mail Room, Property Room, Yard Officers and other Security Staff assigned to various program areas.

Shared departments between Women's Therapeutic Residential Center and West Tennessee State Penitentiary include Fiscal, Human Resources, Training, Records, Compliance, Mailroom, Visitation, Warehouse, Commissary, Key Control, Armory, Maintenance, Sanitation, Tool Control, Disciplinary Board, Principal and Administrative Assignment officer. Most of the administrative functions are housed in the Administrative Building outside the secure area and to the right side of the security entry point building. The Fiscal Director's staff includes Account Clerk/Payable, Procurement Officer, Account Technician, Storekeeper 2, Facility Manager, Food Service, and Trust Fund-Account Clerk. Training is on the same grounds but at an offsite structure. Because of the shared budget, many of the population and staff reports are combined making it difficult to precisely separate between the two. When reports are run includes the combined population, although it can be sorted by housing units to separate the males from the females. Yet, when statistical data is requested, the reports base averages (such as length of stay) across the board with the total population of all three sites.

Women's Therapeutic Residential Center/Site 1 and West Tennessee State Penitentiary/Site 2 share interior and exterior perimeter fences and an intrusion alarm system. The inner fence is equipped with a "shaker" security system along with a taut wire detection system approximately five feet inside the security fence. There is also a microwave detection system at key locations to work in conjunction with the taut wire system. The interior perimeter fence as one strand of razor wire located at the top of the fence. The exterior perimeter fence has three strategically placed strands of razor wire located at the bottom of the fence and two strands of razor wire located at the top of the fence.

The total inmate population for Women's Therapeutic Residential Center on day one of the onsite audit was 981. The number of inmates admitted to the facility during the past 12 months is 490, those whose length of stay in the facility was for 30 days or more is 490, and those whose length of stay in the facility was for 72 hours or more is 490. There are no inmates who were admitted to the facility prior to August 20, 2012 as this facility was not in operation at that time.

Women's Therapeutic Residential Center houses an adult female population (age range 18-78) prison with a total potential capacity of 1536, and custody levels ranging from Medium to Minimum. Building 12 is currently shut down due to staffing which reduces the total current bed capacity to 1280. Women's Therapeutic Residential Center was constructed in 1999, with renovations made in 2016. Average length of stay is five (5) years\* and average sentence length is seven (7) years\*. Population stratification by housing units is listed below:

- Unit 7 is a 256 bed Therapeutic Community/Supportive Living Unit
- Unit 8 is a 256 bed Segregation/Regression/Orientation Unit

- Unit 9 is a 256 bed General Population Unit
- Unit 10 is a 256 bed General Population Unit
- Unit 11 is a 256 bed General Population Unit
- Unit 12 is a 256 bed Unit CURRENTLY CLOSED DUE TO STAFFING

\*Based on the collective average of all 3 Sites (WTRC, WTSP, MTC).

The Classification Review Committee is governed by Tennessee Department of Corrections Policy #401.05. The policy provides for periodic hearings to be held for each inmate to assess the inmate's current circumstances and to recommend any suitable changes in the inmate's classification status. Classification at Women's Therapeutic Residential Center is a process of gathering information about each offender in order to make recommendations on an inmate's custody, supervision, and treatment programs while the inmate is incarcerated within the Tennessee Department of Correction. The classification process continues throughout the incarceration period. After the initial classification, a classification review is processed annually, except for special reclassifications which will be done in accordance with policy. The Classification Panel's function is to make appropriate placement and program recommendations based upon the inmate's risk and needs assessment process, supervision status in conjunction with institutional resources, and Board of Probation and Parole recommendations.

All inmates entering the institution are oriented to the rules of the institution, and housing units within 3 days from the time of their arrival and within 14 days specific to the functioning of the behavioral therapeutic community model and stages of change. Behavioral Therapeutic Community Phase and Track placement is determined by an assessment and review of the offender O'Net profile, risk and needs assessment, TABE, and review of institutional file and record to include program completions and offender behavior. Phase progression are assessed by the assigned Counselor in conjunction with the unit staff no less than every six months. Progression for phase participation is determined by compliance with the checklist for phase advancement. Phase regression can occur for non-compliance. A detailed orientation packet is issued to each inmate and orientation includes PREA information. All inmates are instructed to report sexual misconduct, sexual harassment, or sexual abuse by staff/inmate or other persons as defined in Policy #305.03. Inmates are told Sexual Assault of Inmates will not be tolerated at Women's Therapeutic Residential Center. All inmates are issued a brochure and orientated with the TDOC female inmate on inmate sexual assault handout. This is in conjunction with the Prison Rape Elimination Act (PREA).

The orientation information and handbook include the following message to inmates: *"If you are being intimidated or are in fear of sexual assault from another inmate or staff member immediately report this to a staff member or more than one staff member if necessary. If you are sexually assaulted, immediately report it to a prison staff member. Do not clean yourself, brush your teeth, wash your clothes or do anything else that could destroy the evidence of the assault. The sooner your report the assault the better the chances evidence can be obtained."*

*"If assistance is needed, contact any staff member. A hotline for reporting sexual assault is available by calling \*9222. To report incidents of sexual abuse to an outside resource, inmates may call \*9555. (The Shelby county Rape Crisis Center, 1750 Madison Avenue #102, Memphis, TN 38104). This call will be confidential, and Tennessee Department of Corrections will NOT record the call. The Shelby County Rape Crisis Center also offers victim advocacy services. Tennessee Department of Corrections is zero tolerance for incidences of sexual abuse and/or sexual harassment within its facilities. Women's Therapeutic Residential Center has zero tolerance for social relationships between staff and inmates. This activity is prohibited, including but not limited to emotional, sexual or romantic attachments. Sexual misconduct, sexual harassment or sexual abuse by any person, (volunteer, contract personnel, etc.) will not be tolerated and inmates are encouraged to report any incidents immediately to any staff member."*

Women's Therapeutic Residential Center offers a variety of work and program assignments. Procedures for job assignments and dismissals are governed by the Tennessee Department of Corrections Policy #505.07 and corresponding Women's Therapeutic Residential Center policy. Inmate pay is governed by Tennessee Department of Corrections Policy #504.04 and corresponding Women's Therapeutic Residential Center policies and contains schedules for skill levels and pay rates. A master job list containing all positions at Women's Therapeutic Residential Center as well as copies of the Tennessee Department of Corrections policies are located in both inmate libraries. Inmates who wish to be considered for placement in a position may submit their names and qualifications to the Job's Coordinator using Request for Placement on Job Register, Form CR-3051. Jobs coincide with Phase assignment. Inmate workers are utilized in many areas, including food services, recreation, and housing units. There are also various clerical and other inmate aide positions. All assignments

include career development. A verified High School Diploma or High School Equivalency Diploma and interview process is required for all skilled jobs. Inmate Job and pay rates are determined by the skill level of each job. Inmate job classifications include: Unskilled - career development work which requires little or no experience; Semi-skilled - work which requires some skill or experience; Skilled - work which requires specialized ability.

In an effort to reduce recidivism and promote public safety, the Women's Therapeutic Residential Center operates as a behavioral therapeutic community. Women's Therapeutic Residential Center is committed to providing services and programs to benefit the residents. Inmates are encouraged to spend their incarcerated time wisely by utilizing programs that will benefit them during their incarceration and as they re-enter society. Each housing unit at Women's Therapeutic Residential Center has a Unit Team. Each inmate is assigned to a Counselor based on the unit in which she resides. Inmates have access to personal contact with the counselor on routine request. Counselors assist inmates by making the necessary and appropriate referrals to available services. Each unit posts a schedule of the times inmates may be seen by the assigned unit counselor. Verified emergencies are handled immediately.

Rehabilitation Services include 1) Mental Health Programs: Case Management, Individual Therapy, Mental Health Group Therapy, Cognitive Behavior Therapy, Substance Abuse Treatment, Thinking for a Change, Supportive Living Unit; 2) Education/Vocational Programs: ABE, Career Management Success, Culinary Arts, Carpentry, Cosmetology, Computer Literacy; 3) Re-entry Programs: Life Skills, Parenting Classes, Victim's Impact, Domestic Violence, Conflict Resolution, Self-Esteem Building, Setting Boundaries, Character Building, Grief and Loss, Organized Recreational Activities, Anger Management.

Routine schedule for visitation includes Saturdays, Sundays and State holidays as designated by the Commissioner's office from 8:00 am to 10:30 am and 11:30 am to 3:00 pm. Visitation also occurs on Monday evenings each week from 6:00 pm to 8:00 pm to ensure visiting privileges for those inmates unable to visit on weekends. Hours of visits should not interfere with the inmate's work, education or vocational training schedule.

Women's Therapeutic Residential Center repurposed a program building (Z2) as a unique opportunity to use as an overnight child visitation area for children between 3 months and ten years of age. The extended visitation lasts from 5:00 pm on Friday and lasts through 3:30 pm on Sunday. This program offers a tremendous incentive for good behavior and helps offenders keep positive familial ties throughout their incarceration which also assists with family reunification. Eligible inmates must meet certain criteria to qualify for this privilege and complete an institutional sponsored parenting skills class.

Recreation and leisure time programs are provided for all inmates. This includes intramural competition in horseshoes, basketball, and volleyball. An arts and crafts shop is available for needlework and other approved crafts. Special events consist of concerts or other entertainment by volunteers from the community. There are a variety of inmate self-help groups at Women's Therapeutic Residential Center such as Alcoholics Anonymous and Narcotics Anonymous.

There are several religious organizations that meet regularly. An activity schedule is posted on the inmate bulletin board in each unit showing approved activities in which inmates may participate. Worship services and Bible classes are conducted by various religious groups. A schedule of these services is posted in each unit. Inmates may obtain Bibles, greeting cards, books or other religious publications from the Chaplain's office when available. The chaplain is available to provide counseling with inmates concerned about religious matters.

Volunteers are a significant and vital part of the correctional community. Volunteers can enhance all facility programs which include Mentoring, Bible Studies, Take One Program, Worship Services as well as Life Skills Classes. The volunteer time and resources are valuable and essential to the success of the institution as a whole by donations of items which is approved by the warden to prepare the residents for exiting the corrections community. The Chaplain is the Volunteer Coordinator and delivers training and supervises volunteers.

Inmates shall be permitted freedom in personal grooming and dress as long as their appearance does not conflict with the institution's requirements for safety, security, identification, and hygiene. Only indigent inmates are provided soap, deodorant, toothpaste, toothbrush, etc. All inmates are expected to practice good hygienic habits and will be given the opportunity to shower daily. All inmates are provided clothing which will be laundered on a weekly schedule which is posted on the unit bulletin boards. Inmates may request services from the cosmetology program and must cover the cost of services through an account withdrawal prior to being scheduled for service.

Inmates housed at Women's Therapeutic Residential Center are not be allowed to have cash in their possession. The Inmate Trust Fund is a non-cash system as required by the Tennessee Department of Corrections Policy #208.01 which allows money to be posted to an inmate's account when sent in through the designated vendor, and by the appropriate means for deposit. Inmates are afforded access to telephone and allowed up to 10 individuals on their authorized phone list. The mail room is open from 8:00 AM until 4:00 PM, Monday through Friday except holidays. Mail will be picked up from mailboxes located in the day room of each unit at approximately 7:30 am. All outgoing mail is checked for correct postage and for a return address. All incoming mail must be properly addressed with the committed inmate's name and Tennessee Department of Corrections number. All incoming mail will be checked for contraband and sealed with tape. Incoming legal mail will be opened in the presence of the inmate. Incoming correspondence, printed materials, or pictures that are enclosed with the correspondence shall be opened and inspected for contraband.

The Women's Therapeutic Residential Center Health Services personnel are on duty twenty-four (24) hours a day, seven (7) days a week, including holidays. The clinic is located in the Women's Therapeutic Residential Center Medical Building. All inmates must report to the clinic to receive routine health care and medications except for those inmates housed on segregation. All new inmate arrivals at Women's Therapeutic Residential Center are seen as soon as possible by nursing personnel. During the first visit, inmates are given a health screen and oriented to procedures for obtaining health services. When an inmate initiates medical, nursing, dental or any other health services function, they are charged a co-payment of \$3.00 for their encounter with the health services staff. Tennessee Department of Corrections does not assess a co-payment for an encounter required by policy, protocol, mental health, or for follow-up treatment initiated by health care personnel. Health care treatment is provided without regard to an inmate's ability to pay the copayment charge.

Sick call request forms are picked up Sunday-Thursday night. Medical, mental health, and dental services are all accessed through the sick call request forms. Once sick call request forms are picked up by nursing staff, a master call out schedule is made, and passes will be issued to inmates by housing units per security officer. In the event an inmate did not sign sick call and has an emergency they will be seen. Segregation sick call is run on 1st shift by trained nursing staff. Also, segregation rounds are conducted on each shift 24/7. Sick call is conducted by trained nursing staff, any issues that cannot be resolved by Tennessee Department of Corrections protocol will be referred to a Mid-level provider. The mid-level provider will make the referral to a Physician if needed. If the inmate has a mental health emergency at any time the nurse will evaluate and notify the appropriate provider. Medication call occurs at 6:00 am, 12:00 pm, and 6:00 pm.

Women's Therapeutic Residential Center provides a library that is physically accessible to all inmates except those in restrictive housing (Tennessee Department of Corrections Policy 509.03) as shown on the schedule. Library information is posted on the unit bulletin boards. No more than two (2) books may be checked out at a time. No legal or other reference books may leave the library except to go to the segregation unit. The library and segregation unit have a current set of Tennessee Department of Corrections policies and Women's Therapeutic Residential Center policies available for inmate use. For interlibrary loan service, inmates may request up to five (5) books by filling out the request form. Per the library schedule, the main library legal clerks are available for legal assistance in the facility library.

Kiosk Services are an incentive for those inmates who qualify. After purchase of a tablet, the inmate may participate in approved services such as: inmate email, programs and content, music, downloadable e-books and video visitation.

## Summary of Audit Findings

The PREA Audit of Women's Therapeutic Residential Center found 45 standards compliant with 5 of those exceeding the requirements of the standard.

**Number of Standards Exceeded:** 5

115.11, 115.31, 115.67, 115.73, 115.86.

**Number of Standards Met:** 45

115.11, 115.12, 115.13, 115.14, 115.15, 115.16, 115.17, 115.18, 115.21, 115.22, 115.31, 115.32, 115.33, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.87, 115.88, 115.89, 115.401, 115.403.

**Number of Standards Not Met:** 0

No standards were found not met.

### Summary of Corrective Action (if any)

**115.13:** Auditor’s review of the staffing plan provided by the facility did not initially include all the information required to respond to the standard. During the onsite visit auditor was provided additional documentation that provided evidence all the elements were observed in practice; however, this information was not compiled in a clearly documented plan. Auditor, Interim State PREA Coordinator, Facility PREA Coordinator/Associate Warden for Treatment, and Warden met to discuss the need to develop a more clearly documented plan. Auditor provided the “Developing and Implementing A PREA-Compliant Staffing Plan” publication developed by The Moss Group, Inc. and published to the PRC website as a guide for creating the document. An updated, comprehensive staffing plan was provided by the facility. Upon review of the information provided, auditor found the updated staffing plan to meet the requirements of Standard 115.13. No further corrective action is required.

## PREVENTION PLANNING

### Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

#### 115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?  Yes  No
- Does the written policy outline the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment?  Yes  No

#### 115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator?  Yes  No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy?  Yes  No
- 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  No

#### 115.11 (c)



- 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  No  NA
- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.11(a):** Policy #502.06, Prison Rape Elimination Act (PREA) Implementation, Education, and Compliance, directs, It is the policy of the Tennessee Department of Corrections to provide a safe, humane, and appropriately secure environment, free from threat of sexual abuse and sexual harassment for all inmates, by maintaining a program of prevention, detection, response, investigation, and tracking of all alleged and substantiated sexual assaults and sexual harassment. Tennessee Department of Corrections has a zero-tolerance for incidences of sexual abuse and sexual harassment within its facilities.

The Agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment is outlined in Policy #502.06-1, Prison Rape Elimination Act (PREA) Implementation and Compliance. This policy directs the warden to appoint a Sexual Abuse Response Team (SART) for the facility who will be responsible for developing and maintaining a program of prevention, detection, response, investigation, and tracking of sexual assaults and the persons involved. The PREA Coordinator and PREA Compliance Manager ensures monthly PREA walks, meetings, and reports are conducted in accordance with Tennessee Department of Corrections policy and inspection standards. Each inmate entering Women's Therapeutic Residential Center must receive verbal and written information concerning sexual abuse within 24 hours of arrival. All allegations of sexual assault and sexual harassment shall be investigated in accordance with Tennessee Department of Corrections policy. The facility must ensure staffing patterns, security equipment, and monitoring tools are at a level that provides for the best protection for inmates from sexual assault or sexual abuse. All Women's Therapeutic Residential Center staff, contract employees, and volunteers will be trained on PREA.

**115.11(b):** Tennessee Department of Corrections employs a full time PREA Coordinator (Correctional Program Director 2). This position reports to the Director of Compliance, who reports to the Director of Investigations & Compliance, who is a direct report to the Commissioner (Agency Head). Currently the PREA Coordinator position is vacant with duties being covered through an Interim PREA Coordinator.

**115.11(c):** Interview with agency Interim PREA Coordinator indicates that his full-time efforts are invested in developing, implementing, and overseeing the agency's efforts to comply with the PREA standards in all facilities and that he has enough time to manage his PREA related responsibilities. The current Interim State PREA Coordinator has been acting in this position since February 1, 2019, as appointed by the Office of Investigations and Compliance Director and possesses a comprehensive knowledge of the PREA Standards. It is evident that he has spent time with the facility staff and has a personal investment working with the facility for successful implementation of the PREA standards. The agency has 10 Facility PREA Coordinator/Associate Warden of Treatments/compliance managers who report to the agency PREA Coordinator; interactions are done by phone, in person, or by email, at least monthly. When providing oversight, if an issue is identified he immediately meets

with the facility's Warden, Facility PREA Coordinator, and PREA Compliance Manager to assess what may be the underlying factors. Once the issue is identified, a corrective action plan of action is created and implemented.

The Associate Warden of Treatment is the designated facility PREA Coordinator and the Treatment Secretary is the designated facility PREA Compliance Manager for Women's Therapeutic Residential Center, as designated by Warden Minter, on November 30, 2018 by memorandum. The PREA Coordinator reports directly to the Warden indicated by a review of the 2018 facility organizational chart and the PREA compliance manager reports to Associate Warden for Programs. Interview with the Facility PREA Coordinator indicates that she has sufficient time to manage her PREA related responsibilities. She has an established Sexual Abuse Response Team (SART) comprised of members from security, medical, mental health, counseling, and general line staff that assists with oversight of compliance issues through monthly PREA SART inspections followed by a meeting to review any new allegations. During this monthly meeting, the Sexual Abuse Incident Review Report is completed for any investigations that have been concluded in the past 30 days. Minutes are taken and reported to Warden at the conclusion of the meeting. Topics discussed include: 1) a review of the prior month's report and status of recommendations from that report; 2) areas toured during the unannounced inspection and any PREA issues identified; 3) names of staff who were quizzed on PREA related policy during the inspection; 4) review of cameras; 5) status check for inmates on the PREA review list. Auditor reviewed the Site #2 SART Inspection minutes and Inspection Review Worksheets for the past 12 months and found them to be thorough, complete and comprehensive.

Based on auditor's analysis of information collected from the review of agency policy, observation of local procedures, interviews with Facility PREA Coordinator/Associate Warden of Treatment, Interim State PREA Coordinator, Warden, and members of the SART, and review of the documentation noted in the above narrative, Women's Therapeutic Residential Center meets the requirements of this standard. Further, Women's Therapeutic Residential Center exceeds this standard due to implementation of the multi-disciplined SART and monthly meetings of this team, and completion of the comprehensive monthly inspections as described in the narrative. Also, this facility has both a Facility Coordinator and Compliance Manager where only a Compliance Manager is required by the standard.

## Standard 115.12: Contracting with other entities for the confinement of inmates

### 115.12 (a)

- 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  No  NA

### 115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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 OR the response to 115.12(a)-1 is "NO".)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.12(a)(b):** Tennessee Department of Corrections holds six (6) contracts for the confinement of inmates: CCA (2), Hardeman County, Tennessee (1), The Next Door, Inc. (1), Trousdale County (1), Haywood County Jail (1). Auditor's review of each contract confirms language that require contractors to adopt and comply with PREA standards.

Information related to contracts for confinement was confirmed through interviews with the Tennessee Department of Corrections Director of Contracts Administration and Compliance Director as the monitoring is a joint effort. If the contract is new or renewed Tennessee Department of Corrections asks the bidder to provide proof of PREA certification. Tennessee Department of Corrections will not renew a contract without proof provided. If it is a new facility, they are granted one year of operation to accumulate proofs for PREA Certification. Each privately managed prison is assigned a contract monitor who regularly monitors for contract compliance and submits reports of compliance/non-compliance to the Director of Compliance. In addition, each privately operated facility is audited in accordance with Standard 115.401, and PREA audit Final Reports have been published to the Tennessee Department of Corrections website.

All contract facilities have submitted their PREA compliance results during either the initial contract process or during their renewal. CoreCivic partners with Tennessee Department of Corrections to provide long term housing to Tennessee Department of Corrections offenders and these PREA final reports are posted on the Tennessee Department of Corrections website.

Auditor's analysis of the information obtained from review of agency contracts, viewing PREA final reports posted on the public website, and interviews with Agency Contract Administrator, Compliance Director, and Interim State PREA Coordinator finds Tennessee Department of Corrections and Women's Therapeutic Residential Center compliant with the provisions of this standard.

## Standard 115.13: Supervision and monitoring

### 115.13 (a)

- Does the agency ensure that each facility has developed and a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?  Yes  No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of

inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No

- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No  NA
- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No

#### 115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)  
 Yes  No  NA

#### 115.13 (c)

- 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  No
- 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  No

- 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  No

#### 115.13 (d)

- 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  No
- Is this policy and practice implemented for night shifts as well as day shifts?  Yes  No
- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.13(a):** In accordance with Tennessee Department of Corrections Policy #502.06, each facility shall develop a staffing pattern that provides for the adequate levels of staffing and monitoring to protect inmates against sexual abuse. By July 1st of each calendar year each facility shall assess, determine, and document whether adjustments are needed to the facility staffing plan. This review will follow the guidelines of PREA Standard 115.13 (a), (b), and (c). This review shall be completed on the PREA Annual Staffing Review, CR-3964. The plan considers generally accepted detention and correctional practices through ACA Accreditation, judicial findings of inadequacy, none are indicated; findings of inadequacy from Federal investigative agencies, none are indicated; findings of inadequacy from internal or external oversight bodies, ACA waivers granted; all components of the facilities physical plant; composition of the inmate population; number and placement of supervisory staff; institution programs occurring on a particular shift; state or local laws, regulations, or standards; prevalence of substantiated or unsubstantiated incidents of sexual abuse.

Auditor's review of the staffing plan provided did not initially include all of the information required to respond to the standard. While the auditor found that all the elements were observed in practice, it was not compiled in a clearly documented plan. Auditor, Interim State PREA Coordinator, Facility PREA Coordinator/Associate Warden of Treatment, and Warden collaborated to identify a plan to develop a more clearly documented plan. Auditor provided the "Developing and Implementing A PREA-Compliant Staffing Plan" publication developed by The Moss Group, Inc. and published to the PRC website as a guide for creating the document. As part of the post audit process, Women's Therapeutic Residential Center provided auditor with a comprehensive, clearly documented Staffing Plan that meets all requirements of this provision.

Auditor's observations during site tour found that any potential blind spots observed by auditor were covered either by mirrors or cameras (267) throughout the facility; there were no areas of concern noted by auditor at conclusion of tour.

**115.13(b):** Women's Therapeutic Residential Center reports that no posts were closed as a result of deviations from the staffing plan for the past 12 months; however, adjustments were made through callback and staff overtime to cover posts due to deviations required due to emergency incidents or staff callouts. These deviations and staffing adjustments were clearly documented on the daily shift rosters reviewed by auditor. The most common reasons for roster deviations is staff shortages and unexpected emergency situations.

**115.13(c):** The most recent staffing plan review was conducted by the, Chief of Security, Associate Warden of Security, PREA Coordinator - Associate Warden of Treatment, Tennessee Department of Corrections PREA Coordinator, and Warden in June 2018. The staffing review assessed, determined, and documented whether adjustments are needed to the staffing plan related to all elements from section (a) above. Consideration was given to deployment of video monitoring systems and other monitoring technologies and other resources the facility has available to commit to ensure adherence to the staffing plan.

Interview with agency and Facility PREA Coordinator/Associate Warden of Treatment and Warden indicate this process is well-implemented. Most elements required of the review are conducted monthly by the SART and documented in monthly minutes to the Warden. As confirmed through interviews, during the annual review these documents are considered as part of the review as well as the other elements stated in section (a) above. Based on interview with Interim State PREA Coordinator, he is consulted when the facility is assessing their staffing plan and notified when they need to make any adjustment; the staffing plan is reviewed on an annual basis unless the facility needs to make changes and then it will be reviewed before the changes are approved. Recommendations made by the SART monthly inspection are given serious consideration and implemented when warranted according to interview with Warden. The facility has a total of 267 cameras installed throughout the facility.

**115.13(d):** Tennessee Department of Corrections Policy #502.06, directs staff, security shift corporal and above, unit managers, and/or administration duty officer to conduct and document unannounced rounds to identify and deter sexual abuse and sexual harassment. The unit/program area logbook shall be annotated with *Unannounced PREA Inspection/Security Check* when signing into the unit/program area. This documentation shall be made in red ink only. Any staff member alerting other staff members that these unannounced rounds are occurring will be subject to appropriate disciplinary action.

Interviews with Facility PREA Coordinator/Associate Warden of Treatment and other upper level staff with responsibility of conducting rounds found that frequent unannounced and unpredictable rounds are made in all areas of the facility. Staff interviewed were able to articulate their methods and indicators for which they are observing in order to maintain a safe environment. Each person interviewed explained that they have no set tour pattern which prevents staff from alerting others of the rounds. Interviews with inmates and housing officers indicates regular rounds are made during the workday, evenings, holidays, and weekends. Auditor reviewed logbook entries in the post logbooks during the tour and found frequent documentation of unannounced rounds with no discernable pattern. Auditor requested, was provided, and reviewed logbook entries from the following dates: 05/28/18, 06/19/18, 07/01/18, 07/21/18, 08/07/18, 08/15/18, 08/23/18, 08/31/18, 09/09/18, 09/27/18, 10/04/18, 10/14/18, 11/07/18, 12/17/18, 12/24/18, 01/02/19, 01/21/19, 01/23/19, 02/02/19, 03/10/19, 03/22/19. Dates were chosen to include regular work hours, nights, weekends, and holidays. Multiple rounds were documented by various intermediate and/or higher-level supervisors on these dates. Inmates stated they see higher level staff frequently and are allowed to approach to have face to face contact.

In addition to the supervisory rounds, and as explained in 115.11, the facility has an established team (SART) comprised of members from security, medical, mental health, counseling, and general line staff that assists with oversight of compliance issues through monthly PREA SART inspections followed by a meeting to review any findings. During this monthly meeting, minutes are taken and reported to Warden at the conclusion. Topics discussed include: 1) a review of the prior month's report and status of any recommendations from that report; 2) areas toured during the unannounced inspection and any PREA issues identified; 3) names of staff who were quizzed on PREA related policy during the inspection; 4) review of cameras; 5) status check for inmates on the PREA review list.

Auditor's analysis of information collected from related agency policy review, review of daily shift rosters, logbook entries, interviews with shift supervisors, Facility PREA Coordinator/Deputy Warden for Programs, Interim State PREA Coordinator, and Warden along with interviews with inmates, finds Women's Therapeutic Residential Center meets provisions of this standard.

## Standard 115.14: Youthful inmates

### 115.14 (a)

- 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].)  Yes  No  NA

### 115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  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].)  Yes  No  NA

### 115.14 (c)

- 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].)  Yes  No  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].)  Yes  No  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].)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.14(a-c):** Tennessee Department of Corrections Policy #506.14.2, Housing and Programming of Juvenile Offenders, indicates the facilities where juvenile offenders are housed. Women's Therapeutic Residential Center is not a designated facility and therefore houses no youthful offenders.

Within the past 12 months the facility was contacted by Shelby County Jail requesting assistance regarding housing safekeeper inmates under the age of 18. The safe keepers were housed in separate cells in Unit 12. Unit 12 is a housing unit that is no longer utilized by Women's Therapeutic Residential Center. It is completely out of sight and sound from any adult inmates. Interviews with Warden, Compliance Director, Interim State PREA

Coordinator, and facility PREA Coordinator confirm that the housing of these offenders was temporary and during their confinement here they were kept separated from adult inmates for the duration of their stay. These youthful inmates were housed for a short period of time (#1: arrival 04/03/18, departure 05/16/18; and #2: 03/30/18, departure 05/23/18) and only due to extenuating circumstances; this condition is not a routine occurrence. According to the documentation provided, both inmates received the PREA orientation training and PREA risk screenings were conducted on the date of arrival. These inmates are no longer housed at this facility. During the short time Women's Therapeutic Residential Center housed these juvenile offenders they were found adhered to the requirements of this standard and the facility is found to be compliant.

Based on review of relevant agency policy, interviews with Warden, facility PREA Coordinator, Director of Compliance, and treatment staff, and analysis of population reports and inmate's records, auditor finds Women's Therapeutic Residential Center compliant with the provisions of this standard.

## Standard 115.15: Limits to cross-gender viewing and searches

### 115.15 (a)

- 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  No

### 115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.)  Yes  No  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 here for facilities with less than 50 inmates before August 20, 2017.)  Yes  No  NA

### 115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  Yes  No
- Does the facility document all cross-gender pat-down searches of female inmates?  
 Yes  No

### 115.15 (d)

- Does the facility implement a policy and practice 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  No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?  Yes  No

### 115.15 (e)



- 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  No
- 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  No

#### 115.15 (f)

- 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  No
- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.15(a):** Tennessee Department of Corrections Policy #506.06 establishes approved methods for Tennessee Department of Corrections staff to search inmates. 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. The facility reports no cross-gender strip or cross-gender visual body cavity searches of inmates in the past 12 months, with or without exigent circumstances. Officers and inmates interviewed confirmed that male officers are prohibited from searching female inmates and no one reported any incidents.

**115.15(b)** Tennessee Department of Corrections Policy #506.06 establishes approved methods for Tennessee Department of Corrections staff to search inmates. 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.

The facility reports no cross-gender strip or cross-gender visual body cavity searches of inmates in the past 12 months, with or without exigent circumstances. Interviews with Warden and Facility PREA Coordinator/Associate Warden of Programs, and staff (security and non-security) and health care staff support this policy is adhered to. Inmates interviewed by auditor confirmed that only female security staff conduct strip searches.

**115.15(c):** Tennessee Department of Corrections Policy #506.06 prohibits conducting of cross-gender strip searches and cross-gender visual body cavity searches. Strip/visual body cavity searches based on reasonable suspicion/probable cause require completion of Form CR-2156 to document the incident. Based on interviews, this practice is prohibited, therefore, there is no documentation to review.

**115.15(d):** Tennessee Department of Corrections Policy #112.08, Personal Hygiene Resources for Inmates, establishes policy that transgender and intersex inmates are afforded opportunity to shower separately from other inmates and requires development of local policies and procedures that enable inmates to shower, perform bodily function, and change clothing without non-medical staff of the opposite gender viewing breasts, genitalia, or buttocks. Local policy #112.08-1 establishes procedures that sufficient shower facilities in the housing/sleeping areas permit inmates in the general population to shower and maintain proper personal hygiene at least daily. All male staff members are required to announce their presence on housing units before entering to ensure inmates are able to shower, perform bodily function, and change clothing without non-medical staff of the opposite gender viewing breasts, genitalia, or buttocks except in emergency circumstances or when such viewing is incidental to routine cell checks. Policy specifically prohibits an officer from standing and look into inmate's cells while they are performing these functions. There will be instances where incidental viewing will happen, but staff members have to use good judgment in these instances. Tennessee Department of Corrections Policy #305.03 establishes the requirement for staff of the opposite gender to announce his/her presence when entering an inmate housing unit.

Interviews with Warden, Facility PREA Coordinator/Associate Warden of Treatment, security and counseling staff, and inmates confirm that all inmates are allowed to shower in private. During the walk-through of the facility housing units 7, 8, 9, 10, and 11 are equipped with only single person shower stalls with doors and curtains for privacy. Inmates are allowed to cover the windows to their cells temporarily while changing clothes or using the restroom. During interviews inmates in all housing units indicated the ability to shower, perform bodily functions, and change clothing without staff of the opposite gender viewing their breasts, buttocks, or genitalia.

**115.15(e):** Tennessee Department of Corrections Policy #502.06 and Policy #113.37 directs that no inmate shall be searched solely for the purpose of determining gender status or condition, such as intersex, transgender. Training curriculum Course Code: BCOT-1-07, Personal Searches (BCOT); includes instruction on prohibiting searches for purposes of determining an inmate's genital status. Staff interviews indicate this has not occurred at Women's Therapeutic Residential Center and staff are aware this practice is prohibited.

**115.15(f):** Tennessee Department of Corrections Policy #502.06, establishes the requirement for security staff to be trained on how to conduct cross-gender frisk searches and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Auditor reviewed training curriculum, Course Code: BCOT-1-07, *Personal Searches (BCOT)*, and found it to be inclusive of how to conduct cross-gender pat down searches, searches of transgender and intersex inmates, all in a professional and respectful manner, and in the least intrusive manner possible. Frequent reminders through the lesson plan stress the importance of preserving the dignity of inmate through the search process.

Personal Searches is taught in the basic training for all security staff. Auditor reviewed BCOT roster for 10 new officers from the most recent graduating class and found Personal Searches Training listed in week one for this class. Refreshers are conducted each year at in-service and routinely in shift briefings. In addition, training records were reviewed by auditor for 95 security staff between March 26-27, 2019 for a 30-minute refresher training on personal pat searches. Staff interviews confirmed training was conducted as stated and were able to demonstrate proper search protocols for auditor. Inmate interviews indicated staff are respectful and professional when conducting searches.

Auditor's analysis of training records, personal observations during tour, interviews with inmates, interviews with officers, interview with training manager, interview with Facility PREA Coordinator/Associate Warden of Treatment and Health Services Administrator, and related policy review provide evidence Women's Therapeutic Residential Center meets all provisions of this standard.

## **Standard 115.16: Inmates with disabilities and inmates who are limited English proficient**

### **115.16 (a)**

- 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  No

- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?  Yes  No
- 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  No
- 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 intellectual disabilities?  Yes  No
- 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  No
- 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  No

## 115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?  Yes  No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?  Yes  No

### 115.16 (c)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.16(a):** Tennessee Department of Corrections Policy #502.06, establishes procedures that during Inmate Orientation and Education, each facility takes 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.

Policy requires that facility staff shall ensure 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 skills, or who are blind or have low vision. Interviews with orientation staff and inmates indicate necessary action is taken to ensure the message is conveyed in a manner where it is understood.

Memorandum dated April 5, 2018 from Warden, establishes Jackson Center for Independent Living, Jackson, TN (731-664-3986), as provider for blind, deaf, mute, and hearing-impaired assistance. Auditor placed call to center and verified services are available and no services have been requested by the facility within the past year.

**115.16(b):** Tennessee Department of Corrections Policy #103.10.1, Title VI - Limited English Proficiency (LEP), establishes procedures for facilities to ensure that individuals who have Limited English Proficiency (LEP) to have access to programs and activities as required in Title VI of the Civil Rights Act of 1964. During the intake process, offenders requiring language or literacy assistance will be offered Language Identification ("I Speak) Guide to determine if the offender has a literacy or language deficiency. The names of those offenders requiring LEP services will be documented and reported to the LEP Coordinator immediately. PREA Screening, Orientation, and Education is a designated program covered in Policy #103.10.1. An interpreter will be provided through utilization of institutional staff, volunteers, or contract interpreters to determine the extent of their proficiency. Facility staff shall take reasonable steps to ensure meaningful access to all aspects of Tennessee Department of Corrections' efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

Tennessee Department of Corrections maintains an Interagency Agreement with Tennessee Foreign Language Institute for live language interpretation and written document translation. Auditor reviewed current contract (July

1, 2018-June 30, 2019) and found it meets delivery of service requirements as well as PREA contractor requirements. In addition, the facility maintains a list of approved staff interpreters (updated January 31, 2019) (1-Spanish). Memorandum from Warden dated April 5, 2018 provides contact information for an individual with University of Tennessee to assist with Spanish Interpretation. When an interpreter is used, a contact note is to be made in the Agency database, TOMIS conversation LCDG. If there is a need for languages other than Spanish and Deaf, the Associate Warden of Treatment is the designated person to arrange for services to be secured. Each Tennessee Department of Corrections has a designated LEP Coordinator who is issued an access code to access the contract interpretation service if a staff interpreter is not available.

Women's Therapeutic Residential Center has an established LEP Plan; dated May 15, 2018 and it Includes instructions for using Linguistica International, 866-908-5744 for Spanish interpretation along with the access code. Interviewed inmates with limited English proficiency were offered an interpreter and one accepted. Interpreter services were provided by the WTSP Associate Warden for Treatment who is the designated Spanish interpreter for Women's Therapeutic Residential Center.

**115.16(b):** Tennessee Department of Corrections Policy #103.10.1, Title VI - Limited English Proficiency (LEP), establishes procedures for facilities to ensure that individuals who have a Limited English Proficiency (LEP) to have access to programs and activities as required in Title VI of the Civil Rights Act of 1964. During the intake process, offenders requiring language or literacy assistance will be offered Language Identification ("I Speak) Guide to determine if the offender has a literacy or language deficiency. The names of those offenders requiring LEP services will be documented and reported to the LEP Coordinator immediately. An interpreter will be provided through utilization of institutional staff, volunteers, or contract interpreters to determine the extent of their proficiency. Facility staff shall take reasonable steps to ensure meaningful access to all aspects of Tennessee Department of Corrections' efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

Tennessee Department of Corrections maintains an Interagency Agreement with Tennessee Foreign Language Institute for live language interpretation and written document translation. Auditor reviewed current contract (July 1, 2018-June 30, 2019) and found it meets delivery of service requirements as well as PREA contractor requirements. In addition, the facility maintains a list of approved staff interpreters (updated January 31, 2019), and the WTSP Associated Warden for Treatment is identified as the Spanish interpreter. When an interpreter is used, a contact is to be made in the Agency database, TOMIS conversation LCDG. A list of inmate interpreters has been identified in this same memorandum, but only for routine matters. If there is a need for languages other than Spanish and Dear, the Associate Warden of Treatment is the designated person to arrange for services to be secured. Each Tennessee Department of Corrections has a designated LEP Coordinator who is issued an access code to access the contract interpretation service if a staff interpreter is not available.

**115.16(c):** Tennessee Department of Corrections Policy #103.10.1, Title VI-Limited English Proficiency (LEP) and the Tennessee Department of Corrections Policy #502.06 establishes procedures that prohibit staff from relying on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances such as when an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first responder duties, or the investigation of the inmate's allegation. Tennessee Correction Academy Program Curriculum, Course Code: GEN-4-18, Prison Rape Elimination Act (PREA) Inmate Sexual Abuse/Assault, is a two-hour course taught in Pre-Service and In-Service and it includes the prohibition for using inmate interpreters. The PREA acknowledgement states signed by all employees after receiving training acknowledges the employee's understanding of Tennessee Department of Corrections policy on not using inmate interpreters for PREA investigations. Interviews conducted with random staff and inmates confirm that inmates are not used as interpreters.

Auditor's analysis of collective information from review of training curriculum, review of signed acknowledgement statements, interviews with all levels of staff, interviews with inmates, and review of agency policy and MOU concludes Women's Therapeutic Residential Center has provided sufficient evidence to meet provisions of this standard.

## Standard 115.17: Hiring and promotion decisions

**115.17 (a)**

- 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  No
- 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  No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above?  Yes  No
- 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  No
- 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  No
- 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 question immediately above?  Yes  No

**115.17 (b)**

- Does the agency 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?  Yes  No

**115.17 (c)**

- Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check?  Yes  No
- 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  No

**115.17 (d)**

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?  Yes  No

#### 115.17 (e)

- 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  No

#### 115.17 (f)

- 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  No
- 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  No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?  Yes  No

#### 115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?  Yes  No

#### 115.17 (h)

- 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  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.17(a):** Tennessee Department of Corrections Policy #301.04 prohibits hiring or promoting anyone who may have contact with inmates and shall not enlist the services of any contractor who may have contact with inmates who has 1) engaged in sexual abuse/sexual harassment in a prison, jail, lockup, community confinement facility, juvenile facility or other institution; b) been convicted of engage in or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse, or; c) been civilly or administratively adjudicated to have engaged in the activity described. Policy review indicates policy complies with standard and interviews with Warden and Human Resources Analyst supports knowledge of policy and implementation of practice as outlined in policy.

**115.17(b):** DOC Policy #301.04 prohibits hiring or promoting anyone who may have contact with inmates and shall not enlist the services of any contractor who may have contact with inmates who has 1) engaged in sexual harassment in a prison, jail, lockup, community confinement facility, juvenile facility or other institution; b) been convicted of engage in or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse, or; c) been civilly or administratively adjudicated to have engaged in the activity described. Policy review indicates policy complies with standard and interviews with Warden and Human Resources supports knowledge of policy and implementation of practice as outlined in policy.

**115.17(c):** Tennessee Department of Corrections Policy #301.04 establishes procedures for criminal history record checks and fingerprinting to be conducted on all new and prospective departmental employees prior to employment. Consistent with Federal, State, and local law, the Tennessee Department of Corrections will 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. This information shall be documented on PREA Questionnaire for Prior Institutional Employers, CR-3962. Based on the interview with Human Resources Analyst, criminal history requests are conducted on every new hire and every employee annually. Upon receiving the background check results, any findings other than a clear report is reviewed by the Warden for further disposition. Employees are hired consistent with Tennessee Department of Corrections policy requirements.

Women's Therapeutic Residential Center reports 103 persons hired in the past 12 months who have had criminal background record checks. Auditor's interview with Human Resources Analyst found that no person may be hired to work at Women's Therapeutic Residential Center without evidence of a criminal background history. Auditor randomly selected 17 employees for file review and found evidence that criminal background checks had been conducted prior to hire, and every year during birth month.

Auditor reviewed CR-3962, Questionnaire for Prior Institutional Employers, and found it contains sufficient inquiry from a prior institutional employer to obtain information on any prior investigations of sexual abuse and any substantiated allegations, or resignation during an investigation. Auditor's interview with Human Resources indicated a CR-3962 is completed on all prospective employees with prior institutional experience and sent to the prior employer at the local Human Resources office. Auditor reviewed the completed Form CR-3962 for one employee who reported prior institutional experience and found information was requested and received from the prior employer indicating no incidents. This process was completed prior to hiring employees. Auditor's analysis of the personnel file documents, interview with Human Resources employee, and interview with warden indicates processes as indicated in referenced policies are well established.

**115.17(d):** Tennessee Department of Corrections Policy #301.04 establishes procedures for criminal history record checks and fingerprinting to be conducted on all new and prospective contract and TRICOR employees prior to employment. Women's Therapeutic Residential Center reports three (3) contracts for services were in place during the past 12 months where criminal background record checks were conducted on all staff covered in the contract. These three (3) contracts include Corizon (mental/behavioral health staff), Centurion (medical staff), and Aramark (food service). Auditor reviewed a total of sixteen (12) contract employee files selected at random and determined criminal background checks were conducted for each of the contract employees prior to employment. Criminal background checks are also performed on volunteers concurrent with their certification and renewal. Auditor reviewed files for (3) three volunteers and found evidence to support this action.

**115.17(e):** Pursuant to Tennessee Department of Corrections Policy #301.04, annual background checks for current employees will be conducted in conjunction with the employee's birth month and by the end of the month during which the employee's birth date occurs. The local Human Resource Office at the facility is responsible for compiling a monthly list of employees. Current contract employees employed for at least one year will have their annual background checks completed each July. Auditor's review of personnel files indicates this is well established at Women's Therapeutic Residential Center. Auditor randomly selected twenty-two (22) employees and fifteen (12) contractors and review of their personnel files provided evidence a criminal background has been conducted in accordance with the policy.

**115.17(f):** Pursuant to Tennessee Department of Corrections Policy #301.04, Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819, shall be completed as part of the annual background check for employees and contractors. Auditor found during interview with Human Resources Analyst, the Self-Declaration



Questionnaire is completed by all employees and contractors prior to hire and again annually. Auditor randomly selected a total of thirty-seven (34) personnel records including twenty-two (22) state employee and fifteen (12) contractor employee files (3-Aramark, 4-Corizon, 5-Centurion) for review and found they each have a current signed Self-Disclosure Employee Annual Questionnaire and record of criminal background check on file in accordance with this standard. Of the 22 state employee files, four (4) were randomly selected by the auditor from a list of thirty-three (33) employees who had been promoted in the past 12 months and these employees were found to have an updated for CR-3819 on corresponding to the date of their promotion.

**115.17(g):** Pursuant to Tennessee Department of Corrections Policy #301.04, Material omissions regarding misconduct described in subset (a) above or the provision of materially false information are grounds for termination.

**115.17(h):** Pursuant to Tennessee Department of Corrections Policy #301.04, unless prohibited by law, the Tennessee Department of Corrections provides 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. Human Resources Analyst indicated that when a former employee applies for work at another institution and upon request from that institution for information on substantiated allegations of sexual abuse or harassment involving the former employee, the local Human Resources office completes any specific personnel information required, then the form is forwarded to internal investigations to obtain any information related to prior allegations and subsequent investigations. Investigations Division is responsible for return the completed form to the requesting prospective employer. Auditor reviewed two documents provided by Women's Therapeutic Residential Center received from prospective employers requesting PREA related employment information on Women's Therapeutic Residential Center prior employees. Forms were completed with the requested information by facility investigator and returned to prospective employers.

Auditor's analysis of information obtained from personnel file reviews for employees and contract employees, review of hiring documentation, information obtained from interviews with Warden, Human Resources Analyst, Facility PREA Coordinator/Associate Warden of Treatment, Internal Investigations, and Interim State PREA Coordinator concludes there is sufficient evidence that Women's Therapeutic Residential Center meets the provisions of this standard and exceeds this standard in that criminal background checks are performed on volunteers when that is not required by standard, and they are conducted on contractors and state employees annually when the standard only requires it to be done every five years.

## Standard 115.18: Upgrades to facilities and technologies

### 115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)  
 Yes    No    NA

### 115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)  
 Yes    No    NA

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.18(a):** In accordance with Tennessee Department of Corrections Policy #108.01, Facility Construction, Renovation and Physical Plant Maintenance, the facility management and maintenance director shall develop a *Facility Construction, Renovation and Physical Plant Maintenance Manual*. The facility management and maintenance director shall ensure that whenever the Department is designing or acquiring any new facility, it considers the effect of the design, acquisition, expansion, or modification upon its ability to protect inmates from sexual abuse. The Women's Therapeutic Residential Center reopened under a new mission in August 2016, and certain modifications were made to accommodate the facility for the new mission. Interview with Facility Maintenance Manager indicated that facility leadership was instrumental in considering the effect of the design and modification upon their ability to protect inmates from sexual abuse. These efforts provided by documentation include: enactment of protocols in main sallyport for no contamination of gender; installation of segregation gate at checkpoint for no contamination of staff or visitors; installation of cameras and mirrors in stairways to eliminate potential blind spots; built segregation recreation yard for Unit 7; built child VG for inmate mother visitation; hand holds and ladders were installed to top bunks in all cells; curtains installed in shower stalls; new paint and LED lighting throughout for better visibility; installation of stools in ADA showers; construct of new recreational yards.

**115.18(b):** Interview with Warden and Facility PREA Coordinator and Interim State PREA Coordinator indicated that the facility management was very strategic in considering how technology would enhance the agency's ability to protect inmates from sexual abuse when they were updating the video monitoring system at Women's Therapeutic Residential Center. A total of 267 were installed and/or updated prior to reopening in August 2016. Auditor's review of the list of cameras and their placement along with personal observation of equipment during facility tour provided evidence Women's Therapeutic Residential Center meets the requirements of this provision.

Auditor's analysis of information provided through documentation, interviews, and through personal observation during tour indicates Women's Therapeutic Residential Center meets provisions of this standard.

## RESPONSIVE PLANNING

### Standard 115.21: Evidence protocol and forensic medical examinations

#### 115.21 (a)

- 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    No    NA

#### 115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  Yes    No    NA

- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  Yes  No  NA

#### 115.21 (c)

- 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  No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?  Yes  No
- 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  No
- Has the agency documented its efforts to provide SAFEs or SANEs?  Yes  No

#### 115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  Yes  No
- 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?  Yes  No
- Has the agency documented its efforts to secure services from rape crisis centers?  Yes  No

#### 115.21 (e)

- 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  No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?  Yes  No

#### 115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)  Yes  No  NA

### 115.21 (g)

- Auditor is not required to audit this provision.

### 115.21 (h)

- 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 attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.]  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.21(a):** Tennessee Department of Corrections Policy #107.01 and Tenn. Code Ann. § 4-3-609, establish the Office of Investigations and Compliance as the authorized body to conduct investigations for the agency. In accordance with Tennessee Department of Corrections Policy #107.01, Office of Investigations and Compliance Unit Authority, Responsibility, Personnel-Selection and Training, the Office of Investigations and Compliance conducts administrative and criminal investigations for the Tennessee Department of Corrections. Tennessee Department of Corrections Office of Investigations and Compliance Operation Protocols #005 Evidence Storage and Control, and #008, Alleged Sexual Abuse govern the procedures and establish a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The agency follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Interview with Office of Investigations and Compliance Special Agent in Charge further verified compliance with this provision.

**115.21(b):** Review of procedures outlined in Tennessee Department of Corrections Policy #502.06.2 and Policy #502.06.3, Tennessee Department of Corrections Office of Investigations and Compliance Operation Protocols #005 Evidence Storage and Control, and #008, Alleged Sexual Abuse which govern the procedures and establish a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions, and interview with Office of Investigations and Compliance Special Agent in Charge auditor concludes the Tennessee Department of Corrections investigative protocols in place that are based on the U.S. Department of Justice's Office on Violence Against Women publication referenced in section (b) of this standard.

**115.21(c):** In accordance with Tennessee Department of Corrections Policy #502.06.3, Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims, forensic examinations are conducted at no cost to the victim. Tennessee Department of Corrections Policy #113.15, Inmate Co-Payment for Health Services lists sexual assault examinations, including mental health services necessary to treat the offender as non-chargeable services. Interview with Health Services Administrator indicates no inmate will be charged for a forensic examination. Forensic examinations will be provided at an offsite facility, Jackson-Madison County General Hospital, 620 Skyline Drive, Jackson, TN 38301, 731-541-5000 by a Sexual Assault Nurse Examiner (SANE). Auditor placed a call to the hospital and spoke with one of the Sexual Assault Nurse Examiners. She said the hospital is currently in transition, and has limited SANE coverage, scheduling 60 shifts per month which are generally schedule those at night. She said there was no record of a contract or MOU with Women's Therapeutic Residential Center but if an inmate is transported to the facility, he/she will be treated medically and

the forensic exam will be conducted by a SANE, if available. If a SANE is not available, then medical practitioners on site will conduct the forensic exam and they are adequately trained to do so.

Auditor's interviews conducted with Warden, Facility PREA Coordinator/Associate Warden of Treatment, and Health Services Administrator indicates there have been incidents requiring forensic medical exams be conducted during the past 12 months, by SANES/SAFEs, qualified medical practitioners, or otherwise, within the audit period. SANE interviewed verified that there have been no forensic exams conducted in the past 12 months that have occurred at Women's Therapeutic Residential Center.

**115.21(d):** In accordance with Tennessee Department of Corrections Policy #502.06.3, 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. Tennessee Department of Corrections and Shelby County Rape Crisis Center entered into a Memorandum of Understanding (MOU) on September 9, 2015 for victim advocacy services to be provided at Women's Therapeutic Residential Center. Auditor contacted Shelby County Rape Crisis Center and spoke with an advocate and verified the lines works and they are available to take calls from inmates at Women's Therapeutic Residential Center and to provide advocacy services counseling by phone or in person according to the MOU.

The facility has also identified a staff Correctional Counselor as an on-site Victim Advocate who has been trained as a victim advocate and who will be available to support an alleged victim/inmate during the forensic examination, as requested, and during the investigation of an alleged sexual assault in the event an outside advocate is not available. Training records were provided and reviewed by auditor where this Correctional Counselor attended the Sexual Assault Advocacy training on January 26, 2018. This training was conducted by a representative from Wo/Men's Rape and Resource Assistance Program (WRAP), and included topics of: What is Sexual Violence?, Intimate Partner Violence, Consent, Childhood Sexual Abuse, Myth v. Fact, Gender Socialization and the Sexual Violence Continuum, Male Sexual Assault, SANE, Neurobiology of Trauma and the Brain, Advocacy, Physical and Psychological Impact of Rape, Post Traumatic Stress Disorder, Common Feelings & Concerns of Survivors, and Recovery.

As there have been no qualifying incidents reported in the past 12 months, there are no documented records to review. Auditor's finding of compliance is based on review of training records and curriculum, conversations with counselors, and Interview with Facility PREA Coordinator/Associate Warden for Programs, and the Facility Investigator and Investigations Unit Special Agency in Charge.

**115.21(e):** Tennessee Department of Corrections Policy #502.06.03 directs that 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. Women's Therapeutic Residential Center has put necessary systems in place to provide for this requirement and is explained in section (d) narrative above.

**115.21(f):** This standard is not applicable to Women's Therapeutic Residential Center. The agency is responsible for investigating allegations of sexual abuse. Also refer to section (d) above.

**115.21(h):** This standard is not applicable to Women's Therapeutic Residential Center as an MOU is secured with Shelby Rape Crisis Center. Also, see provision (d) above for related information.

Auditor's analysis of information collected from related policy review, interviews with Facility PREA Coordinator/Associate Warden of Treatment, Office of Investigations and Compliance Special Agent in Charge, facility investigator, outside victim advocate, Health Services Administrator, review of related training documents, and MOU with Shelby Rape Crisis Center finds Women's Therapeutic Residential Center meets the provisions of this standard.

## **Standard 115.22: Policies to ensure referrals of allegations for investigations**

### **115.22 (a)**

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?  Yes  No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?  Yes  No

#### 115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?  Yes  No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  Yes  No
- Does the agency document all such referrals?  Yes  No

#### 115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).]  Yes  No  NA

#### 115.22 (d)

- Auditor is not required to audit this provision.

#### 115.22 (e)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.22(a):** In accordance with Tennessee Department of Corrections Policy #502.06, the agency will investigate all PREA sexual abuse and sexual harassment allegations in a timely, efficient, and confidential manner and in accordance with federal guidelines. Tennessee Department of Corrections defines Administrative Investigations as those that include an effort to determine whether staff actions or failures to act facilitated the abuse; these investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative findings. Criminal Investigations shall be documented in a written report which contains a thorough description of physical, testimonial, and documentary evidence; copies of all documentary evidence shall be attached where feasible.

In addition to Agency policy, Women's Therapeutic Residential Center Policy #502.06.2-1, establishes policy 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). Women's Therapeutic Residential Center reports 23 sexual abuse and sexual harassment allegations were received. Of these, twenty (23) resulted in an administrative investigation and zero (0) resulted in a referral for criminal investigation.

**115.22(b):** As noted in 115.21, and in accordance with Tennessee Department of Corrections Policy #107.01, Office of Investigations and Compliance: Unit Authority, Responsibility, Personnel-Selection and Training, the Office of Investigations and Compliance is the designated body to conduct administrative and criminal investigations for the Tennessee Department of Corrections. Pursuant to Tennessee Department of Corrections Policy #502.06.2, Investigations Unit Special Agents shall be contacted immediately when circumstances warrant further actions pursuant to criminal findings. Investigations Unit 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 department's policy on Response to Sexual Assault or Sexual Misconduct Allegations and Investigation of Sexual Assault and Sexual Misconduct can be found on the Tennessee Department of Corrections public website at: <https://www.tn.gov/correction/sp/prison-rape-elimination-act.html>.

Interviews conducted with facility investigator, Facility PREA Coordinator/Associate Warden of Treatment, and Office of Investigations and Compliance Special Agent in Charge (Special Agent in Charge) support that all allegations of sexual abuse and sexual harassment are referred for investigation. The Office of Investigations and Compliance Special Agent in Charge makes a determination based on preliminary information provided if the allegation involves potentially criminal behavior, at which time the case will be assigned to an Office of Investigations and Compliance Special Agent. Auditor reviewed the files of all 23 allegations received the past year and they were well-documented.

**115.22(c):** A separate entity is not responsible for conducting investigation therefore this element of the standard is Not Applicable.

Auditor's analysis of information collected from policy review, investigative files review, allegations logs, interviews with facility investigator, Facility PREA Coordinator/Associate Warden of Treatment, Interim State PREA Coordinator, and the Office of Investigations and Compliance Special Agent in Charge and personal observations indicate Women's Therapeutic Residential Center meets all provisions of this standard.

## TRAINING AND EDUCATION

### Standard 115.31: Employee training

#### 115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?  Yes  No
- 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  No
- 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  No?

- 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  No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  Yes  No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?  Yes  No
- 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  No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?  Yes  No
- 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  No
- 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  No

#### 115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility?  Yes  No
- 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  No

#### 115.31 (c)

- Have all current employees who may have contact with inmates received such training?  Yes  No
- 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  No
- 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  No

#### 115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?  Yes  No

### Auditor Overall Compliance Determination



- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.31(a):** In accordance with Tennessee Department of Corrections Policy #502.06, the Agency charges the Tennessee Correction Academy (TCA) with responsibility for development and distribution of the course lesson plans for PREA annually. Lesson plans or materials utilized for pre-service and in-service training on inmate sexual abuse and sexual harassment shall be approved by Tennessee Department of Corrections PREA Coordinator and Tennessee Department of Corrections General Counsel. The training covers: 1) Tennessee Department of Corrections policy on zero tolerance for sexual abuse and/or sexual harassment; 2) staff responsibilities under Tennessee Department of Corrections policies on sexual abuse and sexual harassment, prevention, detention, reporting, and response; 3) inmates' rights to be free from sexual abuse and sexual harassment; d) the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; e) the dynamics of sexual abuse and sexual harassment in confinement; f) the common reactions of sexual abuse and sexual harassment victims; g) how to detect and respond to signs of threatened, suspected, or reported sexual abuse; h) how to avoid inappropriate relationships with inmates; i) how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; j) how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Auditor's review of the TCA Program Curriculum, GEN-4-18, Prison Rape Elimination Act (PREA) Inmate Sexual Abuse/Assault, Revision Date 26 March 2018, concludes all elements outlined in the above paragraph, and in accordance with Tennessee Department of Corrections Policy #502.06, are present. Auditor found all staff interviewed to be knowledgeable about their responsibilities with PREA and they were able to explain the different elements about the zero-tolerance policy.

**115.31(b):** Tennessee Department of Corrections Policy #502.06 requires training be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses female inmates, or vice versa. The general training is general for both male and female populations, additional training is provided for working at female facilities. Staff assigned to work at a female facility receive additional training, Gender Specific Trauma Informed Approach, during pre-service and in-service. Because of the unique logistics of West Tennessee State Penitentiary and Women's Therapeutic Residential Center being so closely situated and organizationally sharing positions all staff receive this training. Auditor reviewed the Lesson Plan and finds that it adequately covers gender specific issues related to sexual abuse.

**115.31(c):** Auditor reviewed the training records of eleven (11) newly hired officers and found they received PREA training while in Basic Correctional Officer Training prior to assuming their assigned duties at the facility. The facility reports 490 employees, including contract employees, who may have contact with inmates, who were trained or re-trained on the PREA requirements. This number is inclusive of Women's Therapeutic Residential Center and West Tennessee State Penitentiary and the estimated number of employees exclusive to this facility is 248. Auditor's review a large sampling of training rosters randomly selected between the dates of May 1, 2018 and April 30, 2019 that was inclusive of training records for employees and contractors from both sites. Employees and contract employees received day one in-service that includes the PREA refresher training.

Tennessee Department of Corrections Policy #502.06 requires the training be delivered annually and employee records indicate they receive the refresher annually rather than every two years as required by this provision which exceeds the requirement. Interviews with staff indicated they received the in-service training every year and that it includes a PREA refresher.

**115.31(d):** This training is documented through employee signature using Employee PREA Training Acknowledgement Form, CR-3965 PREA Acknowledgement Statement to indicate understanding of the training received and through signature on training rosters to account for training hours. Auditor requested training records for 22 randomly selected employees (to include those interviewed) and found sufficient evidence through training

rosters, signed CR-3965 Forms, and staff interviews that the PREA training at Women's Therapeutic Residential Center is delivered effectively and within the guidelines required by agency policy and this standards.

Auditor's analysis of information obtained during interviews with Training Coordinator, Warden, and Facility PREA Coordinator/Associate Warden for Programs, interviews with random staff, review of training rosters, employee training records, and signed acknowledgement forms, finds Women's Therapeutic Residential Center meets the provisions of this standard. In addition, Women's Therapeutic Residential Center exceeds by providing refresher training to employees every year, which is above and beyond the every two-year requirement.

## Standard 115.32: Volunteer and contractor training

### 115.32 (a)

- 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  No

### 115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?  Yes  No

### 115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.32(a):** In accordance with Tennessee Department of Corrections Policy #502.06, each facility is responsible for ensuring that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under Tennessee Department of Corrections' sexual abuse and sexual harassment prevention, detection and response policies and procedures. Volunteers shall receive their PREA training in accordance with Policy #115.01. The facility reports a total of 535 individual contractors and volunteers who have contact with inmates who have been trained in agency policies and procedures regarding sexual abuse/harassment prevention, detection, and response. The facility provided a list of more than 400 approved volunteers and lists of all individual contract employees including 17 Corizon, 19 Aramark employees, 54 Centurion employees. Auditor selected training records for twelve (12) randomly selected contract employees (6 Centurion, 3 Aramark, 4 Corizon).

Interviews with Training Coordinator and PREA Coordinator indicated that healthcare, and food service staff are required to attend the same annual in-service as Tennessee Department of Corrections employees which is

consistent with the agency policy. Training rosters and signed acknowledgement statements were provided for all 15 contract employees providing evidence of these contract employees attended the in-service training, day one Core. Auditor interviewed five (5) contract staff and found them to be knowledgeable about PREA and indicated they had been trained on the zero-tolerance policy, definitions, confidentiality, reporting procedures, commitment to investigate, how to avoid inappropriate relationships with inmates, how to professionally communicate with LGBTI inmates, First Responder duties, opposite gender announcements, and how to detect and respond to signs of threatened and actual sexual abuse.

Auditor interviewed the Volunteer Coordinator and determined that all volunteers are screened and trained on PREA prior to being allowed to bring services into facility. Auditor selected three (3) volunteers for interview from the Volunteer Schedule for April and approved volunteer list and found them to be knowledgeable about their responsibilities as First Responders and how to maintain professional boundaries, as well as other elements of the training. All volunteers interviewed stated they get training every year. Volunteers are recertified every three years, but according to the Volunteer Coordinator, receive refresher trainings on PREA annually. During orientation, volunteers receive training on: Standards for Volunteer Staff; Sexual Misconduct, Workplace Discrimination, and Harassment; Employee/Offender Interaction; Prison Rape Elimination Act Implementation and Compliance; and PREA Allegations, Investigations, and Sexual Abuse Response Teams.

**115.32(b):** Per Tennessee Department of Corrections Policy #502.06, volunteers and contractors are notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and information on how to report such incidents. Auditor's review of the PREA training packet for volunteers indicates volunteers are notified of the agency's zero-tolerance policy and instruction on how to report sexual abuse and sexual harassment. Interviews conducted with contract staff volunteers confirm they have received notification of the zero-tolerance policy and received training.

**115.32(c):** The Agency maintains documentation confirming that volunteers and contractors understand the training they have received by signature on acknowledgement form CR-3965 (contractors) and CR-2935 (volunteers). Auditor's review of training records for contract staff and volunteers found compliance with all provisions of this standard. Auditor reviewed CR-3965 Forms for the 15 contract employees referenced in section (a), providing evidence the employee understands the training received. Auditor reviewed CR-2935 Forms for four (4) randomly selected volunteers providing evidence the employee received and understands the training.

After analysis of the information collected during interviews, review of training records and rosters, and review of related agency policy, and the information collected from interviews with Training Coordinator, Facility PREA Coordinator, and contract employees and volunteers, auditor finds Women's Therapeutic Residential Center compliant with the provisions of this standard.

## Standard 115.33: Inmate education

### 115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?  Yes  No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?  Yes  No

### 115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?  Yes  No

- 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  No
- 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  No

### 115.33 (c)

- Have all inmates received such education?  Yes  No
- 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  No

### 115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?  Yes  No

### 115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions?  Yes  No

### 115.33 (f)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

**Does Not Meet Standard** (*Requires Corrective Action*)

**115.33(a):** As per Tennessee Department of Corrections Policy #502.06, all inmates entering the Tennessee Department of Corrections system shall receive verbal and written information concerning sexual abuse within 24 hours of intake at the diagnostic centers. The inmate handbooks state a detailed orientation packet will be issued, and orientation will include PREA information and that all inmates will be issued a brochure and orientated with the Tennessee Department of Corrections inmate on inmate sexual assault handout. The facility reports 490 inmates were admitted during the past 12 months who were given information at intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or harassment. Auditor concludes that all inmates receive information explaining the agency's zero tolerance policy regarding sexual abuse and sexual harassment and how report incidents based primarily on interviews with inmates. All inmates interviewed admitted to receiving this information at the reception center and when they arrived Women's Therapeutic Residential Center and were able to articulate the information provided. In addition, interviews with staff and review of related policies and inmate file documentation provides additional evidence.

**115.33(b):** As per Tennessee Department of Corrections Policy #502.06, all inmates received comprehensive education on PREA within 30 days of arrival at the diagnostic prison. This is administered through video, staff review of agency policy regarding zero-tolerance, and through issuance of the inmate handbook and PREA brochure which reinforces the information provided in the training. The facility reports that 490 inmates received comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake. Auditor reviewed a sampling of inmate records to confirm this practice is consistently performed and documented and found it is properly in place. Inmate file documentation supports compliance that inmates receive this comprehensive training within 30 days of arrival in intake. In addition, Women's Therapeutic Residential Center provides a refresher viewing of the video, and the PREA brochure and a handbook for Women's Therapeutic Residential Center which provides inmates with specific facility information about reporting allegations at the facility.

**115.33(c):** Tennessee Department of Corrections requires all inmates, upon transfer receive education on the zero-tolerance policy and how to make a report of sexual abuse or sexual assault at the receiving facility. Auditor observed the processing of the incoming chain on 04/25/2019 consisting of 24 inmates, which included eighteen (18) new arrivals and six (6) returning inmates. During intake inmates were screened by medical then taken to their housing unit. Upon their arrival to the housing unit, the unit counselor met with them collectively and delivered the PREA training along with some additional new arrival training. Each inmate was provided a PREA brochure, a packet on sexual safety, and the facility handbook. Once the training was completed the counselor took each inmate individually into the counselor's office and conducted the PREA risk screening.

**115.33(d):** Tennessee Department of Corrections Policy #502.06 directs facilities to take appropriate steps to ensure that inmates with disabilities (including, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Facility staff is responsible for ensuring 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 skills, or who are blind or have low vision. Interviews with counselors indicate they make provisions, to include securing the appropriate interpreter, to ensure the orientation material and screening is communicated effectively and meaningfully.

**115.33(e):** The agency maintains documentation of inmate participation in PREA educational sessions through signature on form CR-2110, Orientation Acknowledgement Form and through signature on the Sexual Assault Awareness Handbook Receipt. Auditor reviewed a sampling of these forms and found Women's Therapeutic Residential Center has a well-implemented system of capturing inmate's participation in these training events.

**115.33(f):** In addition to providing the above discussed education, the agency ensures that key information is continuously and readily available or visible to inmates through the inmate handbook, posters throughout the facility and during monitoring visits for those inmates who are deemed high risk for victimization or perpetration of

sexual abuse. Auditor observed posters on bulletins boards throughout facility, in common areas and on every housing unit and inmates confirmed during interviews they are allowed to keep their facility handbooks which contains PREA educational material.

Inmates were well versed on the zero-tolerance policy and knew how to make a report. Inmates were able to explain their right to be free from sexual abuse and sexual harassment, and their right to be free from retaliation for making a report. Inmates were aware they could make a report on behalf of another offender and were aware that a report could be made on their behalf by someone else. Inmates interviewed expressed feeling safe at Women's Therapeutic Residential Center. All inmates interviewed said they knew about the outside advocacy services and referenced the posters by the telephones that they can call. No inmate interviewed admitted to having placed a call to the service.

Auditor reviewed 31 inmate files and found each received PREA training at the initial intake facility and then again upon arrival at Women's Therapeutic Residential Center. The training was delivered within 72 hours and usually within 24 hours. An acknowledgement form was signed acknowledgement the training was received, receipt of the PREA brochure, and receipt of the Inmate Handbook.

Auditor's analysis of information obtained from related agency policy review, inmate file records, completed acknowledgement forms, personal observation of posters throughout facility, personal observation of the facility orientation process, interviews with inmates, interviews with intake and orientation personnel, interviews with Facility PREA Coordinator and Interim State PREA Coordinator, and Warden conclude that Women's Therapeutic Residential Center meets the provisions of this standard.

## Standard 115.34: Specialized training: Investigations

### 115.34 (a)

- 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 have received 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  No  NA

### 115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  Yes  No  NA
- Does this specialized training include proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  Yes  No  NA
- 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  No  NA
- 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  No  NA

### 115.34 (c)

- 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    No    NA

### 115.34 (d)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.34(a):** In accordance with Tennessee Department of Corrections Policy #107.01, all newly selected Investigative Unit Special Agents will attend and successfully complete at a minimum, an accredited law enforcement academy. Tennessee Department of Corrections Policy #502.06.02 designates Investigations Unit Special Agents who are specifically trained to perform criminal investigations and respond to information provided by SART members which may warrant additional investigation pursuant to potential criminal activity. SART team members/investigators who investigate allegations of sexual abuse and harassment also receive special training in conducting sexual abuse investigations in confinement settings. Both the Investigations Unit and SART Investigators are required to take the National Institute of Corrections' Investigating Sexual Abuse in a Confinement Setting Course.

Investigators interviewed stated they received PREA training, and then annual refreshers during in-service as well as specialized training. Training records were provided for three (3) investigators (2-facility/1-Office of Investigations and Compliance) finding sufficient evidence of their attendance to the annual PREA in-service and certificates of completion were provided for the facility investigator and facility back-up investigator and for the two (2) Office of Investigations and Compliance Special Agents in Charge.

**115.34(b):** Auditor's review of the specialized training curricula National Institute of Corrections' Investigating Sexual Abuse in a Confinement Setting Course observes instruction for 1) conducting sexual abuse investigations in confinement settings; 2) techniques for interviewing sexual abuse victims; 3) proper use of Miranda and Garrity warnings; 4) sexual abuse evidence collection in confinement settings; 5) criteria and evidence required to substantiate a case for administrative action or prosecution referral. consistent with requirements of this standard. Auditor found the investigators interviewed were able to explain each of these training elements proficiently.

**115.34(c):** The National Institute of Corrections' Investigating Sexual Abuse in a Confinement Setting Course is a web-based training. A certificate is provided to the employee once the training course is completed. As noted in (a) above, training records are maintained by each facility/department and entered into the agency's training database by designated training staff.

Based on analysis of information obtained from interviews, training curriculum, investigator's training records and certifications, and policy review, Women's Therapeutic Residential Center meets all provisions of this standard.

## Standard 115.35: Specialized training: Medical and mental health care

### 115.35 (a)

- 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?  Yes  No
- 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?  Yes  No
- 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?  Yes  No
- 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 suspicions of sexual abuse and sexual harassment?  Yes  No

### 115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.)  Yes  No  NA

### 115.35 (c)

- 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?  Yes  No

### 115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31?  Yes  No
- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)



**115.35(a):** According to the Tennessee Department of Corrections Policy #502.06, All full and part-time medical and mental health care practitioners who work regularly in the facility shall be trained in 1) how to detect and assess signs of sexual abuse and sexual harassment; b) how to preserve physical evidence of sexual abuse; c) how to respond effectively and professionally to victims of sexual abuse and sexual harassment; d) how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Auditor reviewed lesson plans and conducted interviews with healthcare staff and found sufficient evidence this training has occurred, and contract employees are knowledgeable about the requirements.

**115.35(b):** Forensic examinations are not conducted by agency employed medical staff; therefore, this provision is not applicable.

**115.35(c):** Specialized training for medical and mental health staff is documented on the Tennessee Department of Corrections Training Roster, CR-2245, and copies are provided to the facility training specialist. This specialized training is required only once. A sampling of training rosters was reviewed from the file for the past 12 months and auditor found a total of 59 healthcare employees have attended specialized training this past year. The facility reports 71 medical and mental health care practitioners. Interview with HSA revealed that the specialized training occurs for every employee upon hire and during their orientation in addition to other facility and job specific training.

**115.35(d):** In accordance with Tennessee Department of Corrections Policy #502.06, each facility is responsible for ensuring that all employees, volunteers and contractors who have contact with inmates have been trained on their responsibilities under Tennessee Department of Corrections' sexual abuse and sexual harassment prevention, detection and response policies and procedures annually. These rosters and training records were reviewed and verified as noted in 115.32. Interview with HSA revealed that all healthcare staff are required to take Day One Core each year for annual in-service which, according to 2018/2019 training itinerary, includes PREA refresher. Rosters and acknowledgement statements were reviewed by auditor finding this procedure in place. Records for five (5) randomly selected health care staff were triangulated revealing evidence of the in-service training and specialized training according to requirements.

Based on auditor's analysis of the training records provided, review of related agency policy, review of training curriculum, and interviews with Health Services Administrator, Facility PREA Coordinator/Associate Warden for Programs, and mental health and medical practitioners, auditor finds Women's Therapeutic Residential Center meets the provisions of this standard.

## **SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS**

### **Standard 115.41: Screening for risk of victimization and abusiveness**

#### **115.41 (a)**

- 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  No
- 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  No

#### **115.41 (b)**

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?  
 Yes  No

#### **115.41 (c)**

- Are all PREA screening assessments conducted using an objective screening instrument?  
 Yes  No

#### 115.41 (d)

- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?  Yes  No

#### 115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?  Yes  No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?  Yes  No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?  Yes  No

#### 115.41 (f)

- 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  No

#### 115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a: Request?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?  Yes  No

#### 115.41 (h)

- 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  No

#### 115.41 (i)

- 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 information is not exploited to the inmate's detriment by staff or other inmates?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

**Does Not Meet Standard** *(Requires Corrective Action)*

**115.41(a):** In accordance with Tennessee Department of Corrections Policy #502.06.1, all inmates are screened using the PREA Screening Application upon arrival at a facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.

The facility reports 490 inmates entered the facility within the past 12 months were screened for risk of sexual victimization or risk of sexually abusing other inmates.

**115.41(b):** In accordance with Tennessee Department of Corrections Policy #502.06.1, this screening shall ordinarily take place within 72 hours of arrival at the facility. The facility reports that 490 inmates entered the facility within the past 12 months were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours.

Auditor observed the processing of the incoming chain on 04/25/2019 consisting of 24 inmates, which included eighteen (18) new arrivals and six (6) returning inmates. During intake inmates were screened by medical then taken to their housing unit. Upon their arrival to the housing unit, the unit counselor met with them collectively and delivered the PREA training along with some additional new arrival training. Each inmate was provided a PREA brochure, a packet on sexual safety, and the facility handbook. Once the training was completed the counselor took each inmate individually into the counselor's office and conducted the PREA risk screening. This screening was conducted in a private setting and each question was asked and answers were noted accordingly. According to auditor's interview with counselor, this screening is most always conducted the same day of inmate's arrival, and screening documentation reviewed by auditor indicated this to be correct. Between January 8, 2019 and March 28, 2019 Women's Therapeutic Residential Center received 128 new arrivals on incoming chain. Auditor's review of records found that of these 120, 128 were screened within 24 hours of arrival. Auditor also reviewed 12 inmate records randomly selected and found the risk screening was conducted on all within 72 hours of arrival as required.

**115.41(c):** In accordance with Tennessee Department of Corrections Policy #502.06.1, this screening is conducted using the PREA Screening System Application located on the Tennessee Department of Corrections intranet. Auditor's review of the instrument finds it to be objective. Auditor observed the screening process as the counselor entered and/or verified information provided by the inmate was computer-based system. Auditor questioned how screenings are conducted if the system is down and found that they will be conducted on paper then once system is restored information is entered then paper is shredded.

**115.41(d):** The Tennessee Department of Corrections' PREA Screening System Application includes questions for all criteria found in 1-9 of the elements stated in this provision of the standard to be considered during screening. Element 10 is not assessed because Tennessee Department of Corrections does not hold inmates solely for civil immigration purposes, although this is captured on each risk screening instrument.

**115.41(e):** The Tennessee Department of Corrections' PREA Screening System Application includes questions for a) history of institutional sexual aggressive behavior; b) current or prior rape convictions; c) history of sexual abuse/sexual assault toward others; d) history of physical abuse toward others; e) history of domestic violence toward others; f) confirmed gang affiliation.

**115.41(f):** In accordance with Tennessee Department of Corrections Policy #502.06.1, within 30 days of arrival, the inmate will be rescreened with the PREA Screening Application based upon any additional relevant information received by the facility since the intake screening. The facility reports that 490 inmates entered the facility within the past 12 months were rescreened for risk of sexual victimization or risk of sexually abusing within 30 days. Auditors review of the screening log including 128 new arrivals between January 8, 2019 and March 28, 2019 Women's Therapeutic Residential Center found all 128 received a screening within 24 hours and 96 received a rescreening within 30 days and 3 inmates had released or transferred prior to the 30 days (the remaining 21 were still within the 30 days of arrival period).

**115.41(g):** In accordance with Tennessee Department of Corrections Policy #502.06.1, inmates will be screened using the PREA Screening System Application located on the Tennessee Department of Corrections intranet

upon triggering events or referrals that occur based upon observation from staff, upon each occurrence of a guilty finding for a disciplinary of a sexual nature, or upon each substantiated finding of sexual abusiveness of sexual victimization; or upon receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Auditor's review of records indicates no reassessments have occurred in the past 12 months as a result of a referral, a request, or receipt of additional information. Auditor observed documentation where inmates have been rescreened as a result of a PREA allegation.

**115.41(h):** In accordance with Tennessee Department of Corrections Policy #502.06.1, inmates refusing to answer particular questions or not disclosing complete information shall not be disciplined. These questions are: a) whether or not the inmate has a mental, physical, or developmental disability; b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; c) whether or not the inmate has previously experienced sexual victimization; and d) the inmate's own perception of vulnerability. Interviews with counselors who conduct screening confirm that an inmate is never disciplined for non-disclosure of the screening questions. No inmates have been disciplined for refusing to answer screening questions.

**115.41(i):** In accordance with Tennessee Department of Corrections Policy #502.06.1, user security access to this system is requested by the Associate Warden of Treatment/Deputy Superintendent to the Tennessee Department of Corrections PREA Coordinator. During auditor's interview with Interim State PREA Coordinator, auditor confirmed that no access is granted to the inmate risk assessments module without approval from both the Facility PREA Coordinator/Associate Warden of Treatment and the Interim State PREA Coordinator.

A PREA Screening and Monitoring Report is used to monitor inmates who are designated as at risk for sexual victimization or at risk for sexual aggression. The inmate may petition to be removed from monitoring after 12 consecutive months of having no problems and with the approval of the Facility PREA Coordinator. The Interim State PREA Coordinator has implemented a PREA Screening Audit Tool that each PREA Compliance Manager must complete for each incoming chain to ensure that screenings are conducted on all inmates who arrive and within 24 hours. Auditor reviewed both of these reports and find them to be a helpful tool for the facility and the Interim State PREA Coordinator to track timeliness of screenings and for the overall effectiveness of maintaining safety.

Auditor's analysis of the information collected from interviews conducted with inmates, with interviews conducted with counselors, Facility PREA Coordinator/Associate Warden for Programs, Interim State PREA Coordinator, intake officers, and review of related policy and risk screening documentation concludes Women's Therapeutic Residential Center has demonstrated compliance with all provisions of this standard.

## Standard 115.42: Use of screening information

### 115.42 (a)

- 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  No
- 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  No
- 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  No

- 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  No
- 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  No

#### 115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate?  Yes  No

#### 115.42 (c)

- 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  No
- 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 present management or security problems?  
 Yes  No

#### 115.42 (d)

- 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  No

#### 115.42 (e)

- 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  No

#### 115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates?  Yes  No

#### 115.42 (g)

- 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?  Yes  No

- 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?  Yes  No
- 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?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.42(a):** All inmate housing assignments are governed by the Tennessee Department of Corrections Policy #506.14, to include PREA status as a factor that is taken into consideration prior to assignment inmates to a housing unit. In accordance with Tennessee Department of Corrections Policy #502.06.1, decisions concerning individual housing assignments and group activities for inmates who enter Tennessee Department of Corrections and are identified as sexual aggressors or sexual victims are the responsibility of the unit management team. This information is shared on a strictly need-to-know basis 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. Auditor's interviews with Warden, Facility PREA Coordinator/Associate Warden for Programs, counselors, and security staff conclude that the PREA Screening and Monitoring tool is utilized when making decisions for housing assignments, bed assignments, work assignments, education assignments and program assignments. This tool identifies inmates who are to be kept separate, as well as any monitoring required for high risk behaviors. An inmate is automatically added to this list as a result of the screening instrument updates.

**115.42(b):** In accordance with Tennessee Department of Corrections Policy #502,06.1, facility and housing assignments shall be made on a case-by-case basis, considering the inmate's health and safety, as well as, potential management and security concerns. An inmate's own views regarding safety shall be given serious consideration. Auditor's interviews with Warden, Facility PREA Coordinator/Associate Warden for Programs, counselors, and security staff conclude that each inmate's health and safety is always the primary concern when evaluating housing assignments.

**115.42(c):** In accordance with Tennessee Department of Corrections Policy #502,06.1, facility and housing assignments shall be made on a case-by-case basis, considering the inmate's health and safety, as well as, potential management and security concerns. An inmate's own views regarding safety shall be given serious consideration. Facility and housing assignments shall be made on a case-by-case basis and documented on pages 1 and 2 of the PREA Housing and Programs Review, CR-2086, considering the patient's health and safety, as well as, potential management and security concerns. An inmate's own views regarding safety shall be solicited and considered. The Accommodation Review Committee will evaluate and make decisions for appropriate housing and other care based on the criteria found in Tennessee Department of Corrections Policy #113.37 and in accordance with this same policy, behavioral health staff are required to monitor the inmate at least once every six months to assess his or her mental health status and determine treatment needs and medical staff will provide a detailed physical examination every six months.

**115.42(d/e):** In accordance with Tennessee Department of Corrections Policy #502,06.1, placement and programming assignments shall be reassessed at least every six months at a reclassification hearing to review any threats to safety experienced by the inmate. Tennessee Department of Corrections Policy #113.37 provides additional guidance to the monitoring of and care provided to transgender and intersex inmates, which is to be carried out by the assigned multidisciplinary team at the inmate's assigned facility. Currently Women's Therapeutic Residential Center has no documented transgender or intersex inmate housed at this facility.

**115.42(f):** In accordance with Tennessee Department of Corrections Policy #502,06.1, inmates taking cross-gender hormones or with secondary sex characteristics of the desired gender (e.g., biological males with breast development) shall be showered separately from other inmates upon order by the physician or APN. Health Services shall complete Clinical Restrictions and Limited Activity Notice, CR-2893, to convey special accommodations. Inmates with a gender dysphoria diagnosis but without secondary sex characteristics of the desired gender shall be given an opportunity to shower separately if they communicate a request to Health Services. In addition, Health Service Administrator shall: a) ensure a signed physician's orders are translated into memo form; b) ensure a memo is sent to shift commander. Women's Therapeutic Residential Center facility structure has only individual showers by design and doors and shower curtains are installed on each. There are no inmates housed at Women's Therapeutic Residential Center at this time who identify as Transgender or Intersex.

**115.42(g):** Auditors conducted an analysis of the housing assignments of all inmates identified as being lesbian, gay, bisexual, transgender, or intersex and concluded that Women's Therapeutic Residential Center has no dedicated unit or wing for housing inmates with this identification or status. Inmates of all SOGI are housed in a variety of units and wings throughout the facility. Interview with Interim State PREA Coordinator confirms that housing these offenders in dedicated housing is a violation of agency policy and does not occur. Auditor's review of the stratification of inmates housed at Women's Therapeutic Residential Center showed no significant pattern for housing inmates who identify as being lesbian, gay, bisexual, transgender, or intersex.

Based on auditor's analysis of the information obtained from personal interviews with staff and inmates, personal observation of housing assignments, personal observations of inmate/staff interactions, review of related policy, review of screening documentation and case notes from inmate's files, Women's Therapeutic Residential Center has sufficiently demonstrated compliance with all provisions of this standard.

## Standard 115.43: Protective Custody

### 115.43 (a)

- 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  No
- 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  No

### 115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?  Yes  No
- 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  No



- 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  No
- 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  No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?  Yes  No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?  Yes  No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?  Yes  No

#### 115.43 (c)

- 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  No
- Does such an assignment not ordinarily exceed a period of 30 days?  Yes  No

#### 115.43 (d)

- 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  No
- 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  No

#### 115.43 (e)

- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.43(a):** As directed by Tennessee Department of Corrections Policy #502.06.2, any use of restrictive housing to protect an inmate who is alleged to have suffered sexual abuse shall be coordinated by the unit management

team; inmates at high risk for victimization may be placed in restrictive housing only after an assessment of all available alternatives has been made, and then only until an alternative means of separation from likely alleged abuser(s) can be arranged. Assessments will normally be conducted within 24 hours.

**115.43(b):** As directed by Tennessee Department of Corrections Policy #502.06.2, inmates placed in restrictive housing for being at high risk for victimization 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 on the LCDG Contact Notes what opportunities have been limited, the duration of limitation, and the reasons for such limitations.

**115.43(c):** Restrictive Housing assignments for inmates at high risk for sexual victimization shall not ordinarily exceed a period of 30 days in accordance with Tennessee Department of Corrections Policy #502.06.2.

**115.43(d):** As per Tennessee Department of Corrections Policy #502.06.2, if an extension is necessary, the SART member(s) shall clearly document in the PREA Allegation System application: 1) the basis for concern for the inmate's safety; 2) the reason why no alternative means of separation can be arranged; 3) the need for emotion support services for inmates or staff who fear retaliation for reporting sexual abuse, or sexual harassment, or for cooperation with investigations.

**115.43(e):** In accordance with Tennessee Department of Corrections Policy #502.06.2, every 30 days a review will be conducted by facility staff for inmates placed in restrictive housing for being at high risk for victimization to determine whether there is a continuing need for separation from the general population.

The facility reports no inmates were assigned to involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment and that no inmates were placed on Sexual Victimization Involuntary Protective Custody status for the past 12 months. Interview with Warden revealed that inmates have not been placed in involuntary restrictive housing for risk of sexual victimization and all efforts are made to find suitable housing in general population for all inmates to feel safe. Interviews with shift supervisors, counselors, and security staff that work segregated housing indicate no incidents in the past year where an inmate has been in segregation because of sexual victimization or risk. Auditor's review of PREA investigation files indicate no inmate was placed in involuntary segregation after reporting the allegation.

Auditor's analysis of information collected from relevant policy review, PREA allegation files, and interviews with Warden and staff conclude Women's Therapeutic Residential Center meets all the provisions of this standard.

## REPORTING

### Standard 115.51: Inmate reporting

#### 115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?  Yes  No
- 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  No
- 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  No

#### 115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?  Yes  No

- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  Yes  No
- Does that private entity or office allow the inmate to remain anonymous upon request?  Yes  No
- 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?  Yes  No

#### 115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?  Yes  No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  Yes  No

#### 115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.51(a):** As per Tennessee Department of Corrections Policy #502.06.2, 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. These include a) reporting directly to staff; b) facility PREA tip line; c) third-party reporting; d) written communication.

The offender handbook, given to each inmate upon arrival Women's Therapeutic Residential Center provides the following information on page 8: *All inmates shall report sexual misconduct, sexual harassment, or sexual abuse by staff/inmates or other persons. If you are being intimidated or are in fear of sexual assault from another inmate or staff member, immediately report this to a staff member or more than one staff member if necessary. If you are sexually assaulted, immediately report it to a prison staff member. If assistance is needed, contact any staff member. A hotline for reporting sexual assault is available by calling \*9222. The Tennessee Department of Corrections has zero tolerance for incidences of sexual abuse and/or sexual harassment within its facilities.*

Random staff and random inmate interviews provided evidence to auditor that the multiple methods to make a report of an incident of sexual abuse or sexual harassment have been conveyed properly and are well known by staff and inmates. Based on auditor's review of the investigative files, inmates are comfortable reporting directly to a staff member as this was the most common method used.

**115.51(b):** As per Tennessee Department of Corrections Policy #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. This information shall be made available through the Inmate Handbook. The offender handbook, given to each inmate upon arrival Women's Therapeutic Residential Center provides the following information on page 8: *To report incident of sexual abuse to an outside resource, you may call \*9555. This call will be confidential, and Tennessee Department of Corrections will not record the call. This call will be answered by Shelby County Rape Crisis Center, 1750 Madison Avenue #102, Memphis, TN 38104. The Shelby County Rape Crisis Center also offers victim advocacy services.* This is posted and provided in both English and Spanish.

Auditor's review of the Memorandum of Understanding between the Tennessee Department of Correction and The Shelby County Rape Crisis Center entered into on September 9th, 2015 finds counseling services will be provided for inmates either by phone or with a scheduled onsite visit and will accept reports of sexual abuse. An inmate may remain anonymous when calling the hotline. If the Center receives a report of sexual abuse, they are to immediately notify the State PREA Coordinator's office. Auditor confirmed this information by review of the MOU, conversation with Shelby County Rape Crisis Center counselor, and State PREA Coordinator. Inmates interviewed who had reported an incident at the facility did so by direct report to staff and none indicated they had used the hotline nor the Rape Crisis Center hotline. Tennessee Department of Corrections does not house inmates solely for immigration purposes.

**115.51(c):** In accordance with Tennessee Department of Corrections Policy #502.06.02, staff shall accept reports made verbally, in writing, anonymously, and from third parties. All allegations shall be documented within 24 hours of receiving the allegation in the PREA Allegation System. Tennessee Department of Corrections has a PREA Tip Line for persons outside of the institution to use to report a PREA incident. These calls are voice recorded and checked by the Statewide PREA Coordinator daily. Once retrieved, the information will be forwarded to the appropriate institution for investigation and response. Auditor placed a test call to this line and left a message.

**115.51(d):** In accordance with Tennessee Department of Corrections Policy #502.06.02, staff may privately report sexual abuse and sexual harassment of inmates to the Central Office PREA Tip Line, 615-253-8178. Auditor's review of employee PREA lesson plan confirmed this information is included.

Auditor's analysis of the information collected from review of MOU, review of related agency policy, review of inmate handbook and personal observation of posters and test calls to Center, interview with State PREA Coordinator, interview with Shelby County Rape Crisis Center counselor, and interviews with random staff, concludes Women's Therapeutic Residential Center meets provisions of this standard.

## Standard 115.52: Exhaustion of administrative remedies

### 115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.  Yes  No  NA

### 115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)  Yes  No  NA

- 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  No  NA

#### 115.52 (c)

- 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 this standard.)  Yes  No  NA
- 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  No  NA

#### 115.52 (d)

- 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  No  NA
- 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  No  NA
- 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  No  NA

#### 115.52 (e)

- 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  No  NA
- 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  No  NA
- 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  No  NA

#### 115.52 (f)

- 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  No  NA
- 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  No  NA
- 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  No  NA
- 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  No  NA
- 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  No  NA
- 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  No  NA
- 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  No  NA
- 

#### 115.52 (g)

- 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  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.52(a):** Tennessee Department of Corrections is not exempt from this standard and establishes Agency procedures through Policy #501.01.

**115.52(b):** In accordance with Tennessee Department of Corrections Policy #501.01, 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 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.

**115.52(c):** In accordance with Tennessee Department of Corrections Policy #501.01, 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.

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

**115.52(e):** In accordance with Tennessee Department of Corrections Policy #501.01, third parties (including fellow inmates, staff members, family members, attorneys, and outside advocates) 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 inmates. If a third-party file such a grievance on behalf of an inmate, that inmate shall agree to have the grievance filed on his/her behalf and document such on the Inmate Grievance, CR-1394. The inmate shall be required to personally pursue any subsequent steps in the grievance process. If the inmate declines to have the grievance processed on his/her behalf, the inmate's decision shall be documented on the original Inmate Grievance, CR-1394, and signed by the inmate.

**115.52(f):** In accordance with Tennessee Department of Corrections Policy #501.01, after receiving an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse, the grievance chairperson shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to the AT/DS so that any required immediate corrective action may be taken. The grievance chairperson shall provide an initial response within 48 hours and shall issue a final decision with five calendar days. The initial response and final decision provided within the PREA Allegation System 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. A final decision on the merits of any portion of a grievance alleging sexual abuse shall be issued by the Associate Warden of Treatment (AWT) and Deputy Superintendent (DS) within 90 days of the initial filing of the grievance. Computation of the 90-day time period shall not include time used by inmates in preparing the grievance. Tennessee Department of Corrections may claim an extension of time to respond, up to 70 days, if the normal time period for response is insufficient to make an appropriate decision.

**115.52(g):** In accordance with Tennessee Department of Corrections Policy #501.01, 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.

Auditor interviewed Grievance Coordinator who is the designee for both West Tennessee State Penitentiary and Women's Therapeutic Residential Center. She explained the grievance process as noted in Policy #501.01, Inmate Grievance Procedures and produced her grievance records for auditor's review. She advised there were two (2) grievances filed and concluded within the last 12 months related to sexual abuse/sexual harassment. A copy of each grievance was provided to auditor. Auditor's review of these grievances observed they were processed in accordance with the agency policy, and according to the specified time frames. Both grievances were immediately forwarded to the facility investigator and were subsequently unfounded following an investigation. Both grievances were processed according to established procedures, including the inmate's appeal, and a final decision was reached within 90 days after being filed. The facility reports there were no grievances filed where the agency requested an extension of the 90-day period to respond. Women's Therapeutic Residential Center reports there were no grievances alleging sexual abuse filed by inmate in the past 12 months in which the inmate declined third-party assistance. Women's Therapeutic Residential Center reports there were no emergency grievances filed in the past 12 months alleging sexual abuse. Inmates interviewed were aware of how to access the grievance process and know they can report sexual abuse and sexual harassment through this process. There are no documented incidents where an inmate has filed a grievance in bad faith and was disciplined.

Auditor's analysis of the information collected from the inmate interviews, interview with Grievance Coordinator, related policy review and grievance files review concludes Women's Therapeutic Residential Center grievances are processed procedurally accurate and is compliant with the provisions of this standard.

## Standard 115.53: Inmate access to outside confidential support services

### 115.53 (a)

- 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  No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?  Yes  No
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?  Yes  No

### 115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?  Yes  No

### 115.53 (c)

- 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  No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.53(a):** In accordance with Tennessee Department of Corrections Policy #502.06.3, the name and contact information of the facility's Inmate PREA Victim Advocate shall be posted to each housing unit bulletin board. The facility shall ensure that inmates are provided access to outside victim advocates for emotional support services related to sexual abuse by giving inmates the mailing address and telephone numbers, including toll-free hotline numbers, where available, of local, state, or national victim advocacy or rape crisis organizations and, for persons



detained solely for civil immigration purposes, immigrant service agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential manner as possible.

**115.53(b):** In accordance with Tennessee Department of Corrections Policy #502.06.3, the Facility PREA Coordinator/Associate Warden of Treatment 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. This is demonstrated through posting of the Shelby County Rape Crisis Center access information on each bulletin board in living units, and on page 17 in the *Women's Therapeutic Residential Center Inmate Rules and Regulations Handbook* that is distributed to each inmate upon arrival to the facility.

Inmates are allowed confidential correspondence with Shelby County Rape Crisis Center. Outgoing mail is allowed to be sent sealed and is not opened and read. Auditor interviewed mailroom supervisor and two mailroom officers and observed mailroom processes during the facility tour. Facility PREA Coordinator also confirmed mail procedures. Any mail that requires opening and inspection for suspicion is documented in the designated logbook and no incoming or outgoing mail related to Shelby County Rape Crisis Center was documented as processed in the past 12 months.

**115.53(c):** The Tennessee Department of Corrections shall attain memoranda of understanding or other agreements with community services providers that are able to provide inmates with confidential emotional support services related to sexual abuse. Memoranda of Understanding are to be approved by the Tennessee Department of Corrections General Counsel. Tennessee Department of Corrections and Shelby County Rape Crisis Center entered into a Memorandum of Understanding on September 9, 2015 for victim advocacy services to be provided at West Tennessee State Penitentiary which extends to Women's Therapeutic Residential Center. The offender handbook, given to each inmate upon arrival Women's Therapeutic Residential Center provides the following information on page 8: *To report incident of sexual abuse to an outside resource, you may call \*9555. This call will be confidential, and Tennessee Department of Corrections will not record the call. This call will be answered by Shelby County Rape Crisis Center, 1750 Madison Avenue #102, Memphis, TN 38104. The Shelby County Rape Crisis Center also offers victim advocacy services.* This is printed and provided in both English and Spanish. Inmates interviewed indicated they are aware of the advocacy services available and how to access the services.

Auditor's analysis of information gathered through conversation with Shelby County Rape Crisis Center, interviews with Facility PREA Coordinator/Associate Warden of Treatment and Interim State PREA Coordinator, interviews with inmates, and review of agency policy and the MOU between Tennessee Department of Corrections and Shelby County Rape Crisis Center finds Women's Therapeutic Residential Center meets provisions of this standard.

## Standard 115.54: Third-party reporting

### 115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?  Yes  No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

**Does Not Meet Standard** *(Requires Corrective Action)*

**115.54(a):** In accordance with Tennessee Department of Corrections Policy 502.06.2 third party reports of sexual abuse and sexual harassment will be reported and investigated as previously described in 115.51(c). Tennessee Department of Corrections has established a TIP line for third party reporting of sexual abuse and sexual assault at (615) 253-8178. This information is available to the public on the Agency's public website at <https://www.tn.gov/correction/sp/prison-rape-elimination-act.html>. Auditor's analysis of agency policy, interviews with staff and investigators, and review of information posted on website finds Women's Therapeutic Residential Center has demonstrated compliance with the provisions of this standard.

## OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

### Standard 115.61: Staff and agency reporting duties

#### 115.61 (a)

- 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  No
- 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  No
- 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 abuse or sexual harassment or retaliation?  Yes  No

#### 115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?  Yes  No

#### 115.61 (c)

- 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  No
- 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  No

#### 115.61 (d)

- 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  No

### 115.61 (e)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.61(a):** in accordance with Tennessee Department of Corrections Policy #502.06.2, 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 Tennessee Department of Corrections, 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.

**115.61(b):** In accordance with Tennessee Department of Corrections Policy #502.06.2, 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. Interviews with staff indicated a thorough knowledge of the confidentiality required with sexual abuse allegations and understanding that they should be discussed only on a need to know basis and as dictated by Tennessee Department of Corrections policy

**115.61(c):** In accordance with Tennessee Department of Corrections Policy #502.06.2, unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse as outlined in subsection 115.61(a) above, and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. Interviews with medical and mental health staff indicate understanding they are required to report sexual abuse and that informed consent is obtained from the inmate explaining limits to confidentiality at time of treatment. This requirement is also governed by the Tennessee Department of Corrections Policy #113.52, Release of Protected Health Information. Auditor concluded this practice is in place based on information obtained during interviews with mental health and medical practitioners. When needed, this written consent is obtained on form CR-1885, *Authorization for Release of Health Services Information*.

**115.61(d):** Elderly/Vulnerable Abuse is regulated by Tennessee Code Title 71 - Welfare, Chapter 6 - Programs and Services for Abused Persons, Part 1 - Adult Protection. Interview with Interim State PREA Coordinator indicates Tennessee Department of Corrections is exempt from mandatory reporting of allegations involving vulnerable adults by the Department of Human Services. Email correspondence received from General Counsel for the Tennessee Department of Human Services states: " It has been the opinion of DHS that prisons are exempt from Tenn. Code Ann 71-6-103 because a prison would not be considered a "caretaker" under the statutory definition (not responsible for care by contract or agreement, and not a relative). The facility does not house juvenile offenders. This procedure was confirmed through review of referenced code and interview with Warden and Interim State PREA Coordinator.

**115.61(e):** In accordance with Tennessee Department of Corrections Policy #502.06.2, staff are directed to report all allegations of sexual abuse and sexual harassment to the facilities designated investigators. This includes third-party, and anonymous reports as further discussed in 115.51(c) and 115.54(a).

Auditor's analysis of information obtained through policy review, interviews with mental health and medical staff, and random staff interviews, and interviews with Facility PREA Coordinator/Associate Warden of Treatment, Warden and Interim State PREA Coordinator finds Women's Therapeutic Residential Center has demonstrated compliance with the provisions of this standard.

## Standard 115.62: Agency protection duties

### 115.62 (a)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.62(a):** In accordance with Tennessee Department of Corrections Policy #502.06.2, staff are directed to take immediate action to protect an inmate when information is received that an inmate is subject to a substantial risk of imminent sexual abuse. In the past 12 months, the number of times the facility determined that an inmate was subject to a substantial risk of imminent sexual abuse is zero (0), as reported by Women's Therapeutic Residential Center. An inmate who reports that they are in imminent danger will be placed in protective custody while the allegation is investigated. If the report of imminent danger involved fear of sexual abuse the investigation would be included on the PREA allegation log. When an inmate is placed on protective custody it is noted on the shift report; shift reports during the audit cycle reflected no placements in protective custody for imminent danger of sexual abuse.

Interview with Warden and, Designee for Agency Head, indicated that Tennessee Department of Corrections has an immediate response system in place for responding to reports of imminent sexual abuse and that sexual safety is taken seriously by the agency. The first step is to separate the at-risk individual from the potential risk and protect them from harm. There are specific areas of the facility that are designated as protective custody. 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 general population.

Auditor's analysis of information obtained from review of related policy and interviews with random staff, Warden, Facility PREA Coordinator/Associate Warden of Treatment, Interim State PREA Coordinator, and Agency Head Designee finds Women's Therapeutic Residential Center meets provisions of this standard.

## Standard 115.63: Reporting to other confinement facilities

### 115.63 (a)

- 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  No

### 115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?  Yes  No

### 115.63 (c)

- Does the agency document that it has provided such notification?  Yes  No

### 115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.63(a-c):** In accordance with Tennessee Department of Corrections Policy #502.06.2, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Warden/Superintendent of the facility that received the allegation shall notify the head of the facility where the alleged abuse occurred. This notification shall be made as soon as possible, but no later than 72 hours after receiving the allegation. The facility shall document that it has provided such notification. Women's Therapeutic Residential Center reports receiving no allegations in the past 12 months that an inmate was abused while confined at another facility.

**115.63(d):** In accordance with Tennessee Department of Corrections Policy #502.06.2, the Warden/Superintendent who receives a notification alleging an inmate was sexually abused while confined at his/her facility shall ensure that the allegation is investigated in accordance with Tennessee Department of Corrections policy. Women's Therapeutic Residential Center reports receiving no allegations in the past 12 months from another facility that an inmate was abused while confined at this facility.

Auditor's analysis of information obtained through relevant policy review, interviews with Warden, Facility PREA Coordinator, Investigators, and review of PREA allegation files concludes Women's Therapeutic Residential Center is compliant with the provisions of this Standard.

## Standard 115.64: Staff first responder duties

### 115.64 (a)

- 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  No
- 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  No
- 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  No

- 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  No

#### 115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.64(a):** In accordance with Tennessee Department of Corrections Policy #502.06.2, the first security staff responder shall instruct the alleged victim and abuse not to wash their hands, shower, brush teeth, change clothes, urinate, defecate, drink or eat. Security shall separate the alleged victim and abuser and preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. Security staff shall notify SART of the alleged incident. If the incident occurred within a 72-hour time period of reporting, the security shift supervisor who is notified of the allegation shall initiate the Sexual Abuse Incident Check Sheet, CR-3776.

In the past 12 months, Women's Therapeutic Residential Center reports 10 allegations that an inmate was sexually abused were reported. Security staff was the first to respond in all 10 cases. None of the abuse cases were of a nature that allowed for collection of physical evidence.

**115.64(b):** In accordance with Tennessee Department of Corrections Policy #502.06.2, 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. No abuse allegations were responded to by non-security staff during the audit period. Interviews with non-security staff indicate they are well trained in providing the appropriate response.

Random and specialized (security and non-security) staff interviews revealed a comprehensive knowledge of all first responder duties. All staff are trained on the same steps and that protection of the alleged victim is top priority. Auditor's analysis of information obtained from interviews with staff, interviews with investigators, review of sexual abuse investigation files and agency policy finds Women's Therapeutic Residential Center compliant with provisions of this standard.

#### Standard 115.65: Coordinated response

##### 115.65 (a)

- 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 response to an incident of sexual abuse?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.65(a):** In accordance with Tennessee Department of Corrections policy 502.06.2, Women's Therapeutic Residential Center has developed a written institutional plan to coordinate actions among staff and first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse and published in a local facility Policy #502.06.2-1. and dated August 1, 2018. This document combined with the PREA Allegation Documentation Checklist provides for a sufficient coordinated response plan.

Auditor's analysis of information obtained from review of documents referenced in the above paragraph combined with interviews conducted with medical and mental health staff, Facility PREA Coordinator/Associate Warden for Treatment, Investigators, Warden, and security staff and supervisors find Women's Therapeutic Residential Center compliant with the provisions of this standard.

### Standard 115.66: Preservation of ability to protect inmates from contact with abusers

#### 115.66 (a)

- 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 limits 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  No

#### 115.66 (b)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

As per Tennessee Code Annotated 50-1-207. Prohibition against requiring any employer or employee to waive their rights under the National Labor Relations Act or requiring acceptance or agreement to any provisions that are mandatory or non-mandatory subjects of collective bargaining under federal labor laws. No law, regulation, or ordinance shall require, in whole or in part, an employer or multi-employer association to accept or otherwise agree to any provisions that are mandatory or non-mandatory subjects of collective bargaining under federal labor laws, including but not limited to, any limitations on an employer or multi-employer association's right to engage in collective bargaining with a labor organization, to lock out employees, or to operate during a work stoppage, provided that this subsection shall not invalidate or otherwise restrict the state from requiring the use of project labor agreements to the extent permissible under federal labor laws.

No language exists that prohibits the agency's ability to remove alleged staff sexual abusers from contact with any inmate pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Based on review of this law, auditor concludes Tennessee Department of Corrections and Women's Therapeutic Residential Center are compliant with the provisions of this standard.

## Standard 115.67: Agency protection against retaliation

### 115.67 (a)

- 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  No
- Has the agency designated which staff members or departments are charged with monitoring retaliation?  Yes  No

### 115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?  Yes  No

### 115.67 (c)

- 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 residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?  Yes  No
- 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  No
- 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: Act promptly to remedy any such retaliation?  Yes  No



- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?  Yes  No

#### 115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?  
 Yes  No

#### 115.67 (e)

- 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  No

#### 115.67 (f)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.67(a):** The agency has 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 through Tennessee Department of Corrections Policy #502.06.2. 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 (Inmate) for inmates, CR-3963, and PREA Retaliation Review (Staff), CR-3092, for staff.

Warden designated the following members to the SART effective January 31, 2019: Associate Warden Treatment (Facility PREA Coordinator), Chief Counselor - Victim Advocate. PREA Compliance Manager, Chief of Security, Investigator, Mental Health Administrator, Health Services.

**115.67(b):** In accordance with Tennessee Department of Corrections Policy #502.06.2, Women's Therapeutic Residential Center 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.

**115.67(c)(d):** In accordance with Tennessee Department of Corrections Policy #502.06.2, 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. SART members shall act promptly to remedy any such retaliation. Monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. Items to be monitored include but are not limited to the following: 1) inmate disciplinary reports; b) inmate housing or programming changes; 3) negative performance reviews or reassignment of staff. The Department's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.

**115.67(e):** In accordance with Tennessee Department of Corrections Policy #502.06.2, if any other individual who cooperates with an investigation expresses a fear of retaliation, the Department shall take appropriate measures to protect that individual against retaliation.

Auditor's review of the *PREA Retaliation Review (Inmate)*, CR-3963, and *PREA Retaliation Review (Staff)*, CR-3092, form find them to be very comprehensive and to address each of the elements for review required by this standard. Victim Assessment and Interview section provides opportunity for monitor to document related status check notes. Auditor interviewed members of the SART and Facility PREA Coordinator/Associate Warden of Treatment and found that the team meets on a monthly basis to ensure protocols are in place for monitoring inmate victims and any other persons who report an allegation or participates with an investigation for retaliation and in accordance with the procedures indicated above in (a-e). Auditor's review of related documentation found these meetings are well-documented and *PREA Retaliation Review* forms are completed for each substantiated and unsubstantiated abuse case. Above and beyond the requirements of this standard, Women's Therapeutic Residential Center monitors retaliation of the aggressor in cases where abuse cases are substantiated.

A review of the case files found of the ten (10) abuse allegations filed in the past 12 months, one (1) was substantiated, three (3) were unsubstantiated, six (6) were unfounded. For the substantiated case, retaliation monitoring was initiated for the victim and continued for 90 days; third party reporter was monitored initially but discontinued after the perpetrator was terminated and per reporter's request. Of the unsubstantiated cases, the alleged victim was monitored for retaliation for 90 day at which time it was deemed no longer necessary. In addition, the facility monitors victims and perpetrators of reported sexual harassment when found substantiated or unsubstantiated. Of the three (3) unsubstantiated harassment cases, retaliation monitoring evidence was provided for both alleged victim and perpetrator. Facility reports there have been no incidents of retaliation in the past 12 months and documentation supported this assertion. Interviews with the two alleged victims were not conducted due to them no longer being housed at Women's Therapeutic Residential Center. Of the inmates available at the facility for interview, auditor found that they were aware of the monitoring and felt this showed concern for their safety.

Auditor's analysis of the information obtained from related document review noted in the above narrative, agency policy review, interviews with SART members, and Facility PREA Coordinator/Associate Warden of Treatment and Warden, and inmate interviews finds Women's Therapeutic Residential Center meets all requirements of this standard and exceeds by providing retaliation monitoring for known perpetrators and for monitoring harassment allegations as well as those for abuse which is not a requirement.

## Standard 115.68: Post-allegation protective custody

### 115.68 (a)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.68(a):** As per Tennessee Department of Corrections Policy #502.06.2, any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse is subject to the requirements of 115.43. 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 then only until an alternative means of separation from likely alleged abuser(s) can be arranged. This housing assignment shall not ordinarily exceed a period of 30 days. The facility reports there has been no inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment, nor for longer than 30 days while awaiting alternative placement.

Based on auditor's analysis of information obtained from file review, related policy review and interviews with Facility PREA Coordinator/Associate Warden of Treatment, Warden, segregated housing staff, and security supervisors finds Women's Therapeutic Residential Center meets this standard.

## INVESTIGATIONS

## Standard 115.71: Criminal and administrative agency investigations

### 115.71 (a)

- When the agency conducts its own investigations into allegations 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).]  Yes  No  NA
- 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  No  NA

### 115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?  Yes  No

#### 115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?  Yes  No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?  
 Yes  No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?  Yes  No

#### 115.71 (d)

- 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  No

#### 115.71 (e)

- 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  No
- 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  No

#### 115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?  Yes  No
- 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  No

#### 115.71 (g)

- 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  No

#### 115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?  
 Yes  No

#### 115.71 (i)

- 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  No

#### 115.71 (j)

- 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  No

#### 115.71 (k)

- Auditor is not required to audit this provision.

#### 115.71 (l)

- 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).)  Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.71(a):** Tennessee Department of Corrections Policy #107.01 and Tenn. Code Ann. § 4-3-609, establish the Office of Investigations and Compliance as the authorized body to conduct investigations for the agency. In accordance with Tennessee Department of Corrections Policy #502.06.2, SART investigations shall be conducted within 72 hours of receiving the allegation. All allegations, including third party and anonymous reports shall be investigated promptly, thoroughly, and objectively. The facility Policy #502.06.2-1 establishes policy that Women's Therapeutic Residential Center will investigate all PREA sexual abuse and sexual harassment allegations in a timely, efficient, and confidential manner in accordance with federal guidelines. Interview with Interim State PREA Coordinator and Investigations Unit Special Agent in Charge determined that it is normal practice that all allegations are responded to within 24 hours of being reported. Policy is written to allow time if an allegation takes place over the weekend and to allow for a specially trained investigator to handle the investigation. Auditor's review of the investigative files revealed that investigations for all allegations began within 24 hours.

A total of 23 (10 abuse/13 harassment) allegations were received at Women's Therapeutic Residential Center in the past 12 months; investigations resulted in the following dispositions: 1-Substantiated, 5-Unsubstantiated, and 17-Unfounded. Auditor's review of the case files for the past 12 months indicates investigations appear to be conducted promptly, thoroughly, and objectively.

**115.71(b):** In accordance with Tennessee Department of Corrections Policy #502.06.2, all allegations, including third party and anonymous reports shall be investigated by specially trained facility investigators. Auditor's review of investigative files indicates investigations are conducted by specially trained investigators, as also discussed in Standard 115.34.

**115.71(c):** In accordance with Tennessee Department of Corrections Policy #502.06.2, SART investigators shall contact Investigations Unit Special Agents immediately when circumstances warrant further actions pursuant to criminal findings. Investigations Unit 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. Women's Therapeutic Residential Center Facility Policy #502.06.2-1 establishes that the crime scene will be preserved and protected until appropriate steps can be taken to collect any evidence, or until the Investigations Unit Special Agents arrive to gather evidence. Interviews with Facility investigator and Investigations Unit Special Agent in Charge and review of investigative files confirms witness statements are collected and video monitoring is reviewed, where available.

**115.71(d):** In accordance with Tennessee Department of Corrections Policy #502.06.2, 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. Interview with Investigations Unit Special Agent in Charge revealed he has not had a case for Women's Therapeutic Residential Center where required to conduct a compelled interview; he maintains a positive relationship and consults regularly with the DA and ADA for moving cases forward. All cases of sexual abuse of a criminal nature will be presented to the DA for prosecution by the investigator.

**115.71(e):** 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. Interview with Investigations Unit investigator revealed polygraph examinations are never used as a condition for proceeding with a sexual abuse investigation and credibility of a victim, suspect, or witness is not based on their status as inmate or staff. Auditor's review of the case files indicate that the investigations appear to be conducted with impartiality.

**115.71(f):** In accordance with Tennessee Department of Corrections Policy #502.06.2 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. For allegations referred to the Tennessee Department of Corrections Investigative Unit, the Warden/Superintendent shall convene a PREA review within 48 to 72 hours after the incident. The reviewers shall consist of Warden/Superintendent, Associate Warden of Treatment/Assistant Warden of Programs/Deputy Superintendent, facility investigator, Investigations Unit investigator, and the State PREA Coordinator. Sexual Abuse Incident Check Sheet, CR-3776, shall be utilized to document this review.

Auditor's interview with Facility PREA Coordinator/Associate Warden of Treatment, Warden, Interim State PREA Coordinator, and facility investigator concluded staff actions are reviewed for each abuse case to determine any contributing factors and if determined, will be preceded by a separate and documented investigation into these actions. Of the abuse cases reviewed, no staff actions or inactions were noted to have contributed to the incidents. Investigative findings are documented along with a description of the evidence and basis for disposition into the agency's database by the facility investigator. Auditor's review of the investigative summaries finds investigations that appear to be free of bias when making determinations.

**115.71(g):** In accordance with Tennessee Department of Corrections Policy #502.06.2, Criminal Investigations shall be documented in a written report which contains a thorough description of physical, testimonial, and documentary evidence. Copies of all documentary evidence shall be attached where feasible. Auditor's review of case files determined that the investigative findings are documented along with a description of the evidence and basis for disposition into the TOMIS database by the facility investigator.

**115.71(h):** In accordance with Tennessee Department of Corrections Policy #502.06.2, substantiated allegations of conduct that appear to be criminal shall be referred for prosecution. None of the 23 cases reported in the past 12 months were criminal in nature, therefore no case was referred for prosecution.

**115.71(i):** In accordance with Tennessee Department of Corrections Policy #502.06.2, criminal investigative records shall be retained for as long as the alleged abuser is incarcerated or employed by the Department, plus five additional years.

**115.71(j):** In accordance with Tennessee Department of Corrections Policy #502.06.2, 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.

**115.71(l):** This standard is not applicable since the Agency is responsible for investigating and outside agency investigators are not used.

Auditor interviewed the facility investigator and the Office of Investigations and Compliance Investigations Unit Special Agent in Charge. Based on the information collected from both interviews, auditor finds that these two investigators work well and closely together to ensure complete, accurate, timely, and objective investigations are conducted on every sexual abuse or sexual harassment allegations. The Facility PREA Coordinator/Associate Warden of Treatment and Interim State PREA Coordinator also engage with the investigators to assist when/where necessary. Women's Therapeutic Residential Center reports there were no substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit which was supported by information obtained during Special Agent in Charge interview and auditor's review of case files.

Analysis of the totality of information obtained by auditor as discussed in the above narrative concludes Women's Therapeutic Residential Center meets all provisions of this standard.

## Standard 115.72: Evidentiary standard for administrative investigations

### 115.72 (a)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

**115.72(a):** In accordance with Tennessee Department of Corrections Policy #502.06.2, the Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse are substantiated. Based on interviews with the facility investigator and Investigations Unit investigator along with information obtained from auditor's review of the 14 case files and subsequent investigations, auditor concludes Women's Therapeutic Residential Center has sufficiently demonstrated preponderance of evidence is the standard used to substantiate allegations.

## Standard 115.73: Reporting to inmates

### 115.73 (a)

- 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  No

#### 115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  Yes  No  NA

#### 115.73 (c)

- 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 posted within the inmate's unit?  Yes  No
- 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  No
- 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  No
- 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  No

#### 115.73 (d)

- 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  No
- 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 convicted on a charge related to sexual abuse within the facility?  Yes  No

#### 115.73 (e)

- Does the agency document all such notifications or attempted notifications?  Yes  No



## 115.73 (f)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.73 (a):** In accordance with Tennessee Department of Corrections Policy #502.06.2, 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: 1) as to whether the allegation has been determined to be substantiated or unsubstantiated or unfounded. Auditor's review of the case files indicated the victim/alleged victim was notified in writing of the disposition of the case at the conclusion of the investigation in all 17 cases (both abuse and harassment) using form CR-3984 by the SART and a signature is obtained from the inmate.

**115.73(b):** This subparagraph to this standard is not applicable to Women's Therapeutic Residential Center as all cases of sexual abuse would be investigated by the Agency, therefore possessing all relevant information needed to inform the inmate.

**115.73(c):** In accordance with Tennessee Department of Corrections Policy #502.06.2, following an inmate's allegation that a staff member has committed sexual abuse, the Department shall subsequently inform the inmate in writing whenever: 1) the staff member is no longer posted within the inmate's unit; 2) the staff member is no longer employed at the facility; 3) the staff member has been indicted on a charge related to sexual abuse within the facility; 4) the staff member has been convicted on a charge related to sexual abuse within the facility. The facility had one substantiated case against staff and the inmate was notified when the perpetrator was terminated.

**115.73(d):** In accordance with Tennessee Department of Corrections Policy #502.06.2, 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: 1) whenever the facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; 2) when the alleged abuser has been convicted on a charge related to sexual abuse within the facility. According to auditor's case file review, no allegations warranted charges, therefore no documentation exists to review.

**115.73(e):** In accordance with Tennessee Department of Corrections Policy #502.06.2, all notifications referenced in subsections (a)-(d) above 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, two staff members shall sign and date that the inmate has refused to acknowledge notification. Auditor's review of the case files found the victim/alleged victim was notified in writing of the disposition of the case at the conclusion of the investigation in all 17 cases using form CR-3984 by the SART and a signature is obtained from the inmate.

Auditor interviews with inmates who had filed a report at the facility indicated they were notified in writing of the disposition of the case as well as for any action taken toward the alleged perpetrator, even in unsubstantiated cases which is not required. The facility reports ten (10) allegations of sexual abuse in the past 12 months, of which all were investigated. The number of inmates who were notified in writing of the results of the investigation was 10 of 10. Beyond requirements of this standard, the facility notifies inmates who allege sexual harassment of the disposition of the investigation and for the seven (7) harassment allegations, auditor found all to have disposition notifications.

Auditor's analysis of the information obtained from related policy review, case file review including forms identified in narrative, and from interviews with investigative staff, SART members, Facility PREA Coordinator/Associate Warden of Treatment, inmates who filed a report, and Warden concluded Women's Therapeutic Residential Center meets and exceeds provisions of this standard.

## DISCIPLINE

### Standard 115.76: Disciplinary sanctions for staff

#### 115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?  Yes  No

#### 115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?  Yes  No

#### 115.76 (c)

- 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  No

#### 115.76 (d)

- 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  No
- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.76(a):** In accordance with Tennessee Department of Corrections Policy #502.06.2, staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse, sexual harassment, or PREA policies.

**115.76(a):** Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual touching only after conclusion of investigation. In the substantiated abuse case against a staff member, an investigation was conducted, and employee was terminated at the conclusion of the investigation.

**115.76(c):** In accordance with Tennessee Department of Corrections Policy #502.06.2, sanctions for staff determined to have violated agency sexual abuse, sexual harassment, or PREA policies, 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. There were no substantiated allegations against inmates in the files reviewed for the past 12 months.

**115.76(d):** In accordance with Tennessee Department of Corrections Policy #502.06.2, 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. The facility reports one (1) staff from the facility violated agency sexual abuse or sexual harassment policies in the past 12 months; investigator's consultation with DA revealed that based on the type of contact and the evidence available there was not sufficient evidence to bring charges against the employee.

Interviews with agency and facility leadership conclude that the department's stance toward staff abuse on inmates is taken very seriously and will not be tolerated and this is supported by the swift termination of employees who are found to be having inappropriate dealings and relationships with inmates, to include sexual abuse and sexual harassment. Auditor concludes Women's Therapeutic Residential Center has demonstrated compliance with the provisions of this standard based on information obtained from interviews indicated in narrative, facility's adherence to zero-tolerance policy efforts, review of case files, and the swiftness that reports of sexual abuse and harassment are reported to investigations.

## Standard 115.77: Corrective action for contractors and volunteers

### 115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?  Yes  No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  Yes  No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?  Yes  No

### 115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.77(a):** In accordance with Tennessee Department of Corrections Policy #502.06.2, any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmate and shall be reported to the law enforcement agencies, unless the activity was clearly non-criminal, and to any relevant licensing bodies.

**115.77(b):** In accordance with Tennessee Department of Corrections Policy #502.06.2, any contractor or volunteer who has engaged in sexual abuse/sexual harassment of an inmate shall be prohibited from further contact with inmates.

Interviews conducted with Agency Head Designee, Interim State PREA Coordinator, Warden, Investigations Unit Investigator, and Human Resources indicate there have been no actionable contractor/volunteer incidents of sexual abuse within the past 12 months. Auditor's case file review confirms that there were no allegations involving contract staff or volunteers. Interviews further indicate that the department's stance toward contractor/volunteer abuse on inmates is taken very seriously and will not be tolerated.

Auditor concludes Women's Therapeutic Residential Center has demonstrated compliance with the provisions of this standard based on information from interviews indicated in narrative, the facility's adherence to zero-tolerance policy efforts, review of case files, and the swiftness that reports of sexual abuse and harassment are reported to investigations.

## Standard 115.78: Disciplinary sanctions for inmates

### 115.78 (a)

- 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  No

### 115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?  Yes  No

### 115.78 (c)

- 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  No

### 115.78 (d)

- 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  No

### 115.78 (e)

- 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  No

### 115.78 (f)

- 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 evidence sufficient to substantiate the allegation?  Yes  No

### 115.78 (g)

- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

**115.78(a):** In accordance with Tennessee Department of Corrections Policy #502.06.2, inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate on inmate sexual abuse or following a criminal finding of guilt for inmate on inmate sexual abuse. The facility reports no administrative finding of inmate on inmate sexual abuse that has occurred at the facility within the past 12 months. The facility reports no criminal findings of guilt for inmate on inmate sexual abuse that has occurred at the facility in the past 12 months. No inmates received sanctions for sexual abuse as a result.

**115.78(b):** In accordance with Tennessee Department of Corrections Policy #502.06.2, sanctions for inmates who have been found to have engaged in inmate on inmate sexual abuse 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.

**115.78(c):** In accordance with Tennessee Department of Corrections Policy #502.06.2, for inmates who have been found to have engaged in inmate on inmate sexual abuse, the disciplinary process shall consider whether an inmate's behavioral disabilities or behavioral illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

**115.78(d):** In accordance with Tennessee Department of Corrections Policy #502.06.2, 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 when an inmate has been identified as having committed inmate on inmate sexual abuse. Inmates who are known to be aggressors or be at high risk for perpetrating sexual abuse and offered counseling and are monitored by the SART as documented in the risk screening instruments and inmate's records.

**115.78(e):** In accordance with Tennessee Department of Corrections Policy #502.06.2, an inmate may be disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such contact. No inmate has been disciplined for sexual contact with staff in the past 12 months. In the substantiated abuse

case against the employee, the inmate's disciplinary record was reviewed, and auditor found that the victim did not receive disciplinary action for this incident.

**115.78(f):** In accordance with Tennessee Department of Corrections Policy #502.06.2, for purposes of disciplinary action, a report of 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 an investigation does not establish evidence sufficient to substantiate the allegation. No disciplinary action has been taken toward inmates for false reporting in the past 12 months.

**115.78(g):** In accordance with Tennessee Department of Corrections Policy #502.06.2, any prohibition on inmate on inmate sexual activity shall not consider consensual sexual activity to constitute sexual abuse. Interview with Facility PREA Coordinator and Facility Investigator reveals that inmates who participate in consensual sexual activity will be disciplined according to agency rules and regulations, and after an investigation reveals that no party was coerced or forced.

Auditor's analysis of information collected from review of case files, related agency policy, and interviews with investigative staff, disciplinary hearing officer, Facility PREA Coordinator/Associate Warden of Treatment, Interim State PREA Coordinator, and SART members conclude Women's Therapeutic Residential Center meets provisions of this standard.

## MEDICAL AND MENTAL CARE

### Standard 115.81: Medical and mental health screenings; history of sexual abuse

#### 115.81 (a)

- 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  No  NA

#### 115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)  Yes  No  NA

#### 115.81 (c)

- 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?  Yes  No

#### 115.81 (d)

- 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  No

#### 115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.81(a):** In accordance with Tennessee Department of Corrections Policy #502.06.3, if the screening process indicates that an inmate has experienced prior sexual victimization, 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.

**115.81(b):** In accordance with Tennessee Department of Corrections Policy #502.06.3, if the screening process indicates that an inmate 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. A review of the PREA Screening Audit Tool indicates of the 128 inmates who arrived at the facility between 01/08/2019 and 03/28/19, one screened as an aggressor and was referred to mental health for evaluation.

**115.81(c):** In accordance with Tennessee Department of Corrections Policy #502.06.3, if the screening process indicates that any inmate has experienced prior sexual victimization, 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. Women's Therapeutic Residential Center does not receive inmates directly from jails, only internal system transfers.

**115.81(d):** In accordance with Tennessee Department of Corrections Policy #502.06.3, 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 program assignments, or as otherwise required by Federal, State, and local law. Information obtained during interviews with medical and mental health practitioners provided evidence that information obtained of this nature is closely guarded and protected, only being shared when necessary as indicated in policy exceptions noted above.

**115.81(e):** In accordance with Tennessee Department of Corrections Policy #502.06.3, any information obtained by medical and behavioral health providers related to sexual victimization or abusiveness that occurred not in an institutional setting will only be reported after obtaining informed consent from the inmate. This requirement is also governed by the Tennessee Department of Corrections Policy #113.52, Release of Protected Health Information. Auditor concluded this practice is in place based on information obtained during interviews with mental health and medical practitioners. When needed, this written consent is obtained on form CR-1885, *Authorization for Release of Health Services Information*.

The facility reports that all inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner in the past 12 months. The facility reports that all inmates who have previously perpetrated sexual abuse, as indicated during screening were offered a follow-up meeting with a medical or mental health practitioner in the past 12 months. Auditor reviewed sample documents for inmates who reported victimization during screening and found that referral was made in all cases reviewed. In addition, each inmate record is documented that all incoming arrivals are screened by medical personnel on the day of arrival at every transfer. Mental health referrals can and are made where necessary by this source as well.

Auditor's analysis of information obtained from inmate file review, completed screenings, interviews with inmates, interviews with staff who conduct screenings, interviews with Facility PREA Coordinator and State PREA Coordinator, interviews with mental health and medical practitioners along with relevant agency policy, conclude Women's Therapeutic Residential Center meets the provisions of this Standard. .

## Standard 115.82: Access to emergency medical and mental health services

### 115.82 (a)

- 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  No

### 115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?  Yes  No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  Yes  No

### 115.82 (c)

- 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  No

### 115.82 (d)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)



**Does Not Meet Standard** (*Requires Corrective Action*)

**115.82(a):** Access to healthcare is governed by Tennessee Department of Corrections Policy #113.30, and states inmates within the physical custody of the Tennessee Department of Corrections shall have timely access to the appropriate level of health care on a 24 hour a day basis. In accordance with Tennessee Department of Corrections Policy #502.06.3, 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 providers, according to their professional judgement, in accordance. Auditor's review of case files indicates inmates who report sexual abuse are immediately taken to medical for assessment.

**115.82(b):** In accordance with Tennessee Department of Corrections Policy #502.06.3, if no qualified medical or behavioral health providers are on duty at the time a report of 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. Women's Therapeutic Residential Center had no qualifying incidents to review as all inmates who reported sexual abuse were taken to medical immediately.

**115.82(c):** As per Tennessee Department of Corrections Policy #502.06.3, 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, as medically appropriate in accordance with Policy #113.42, Communicable Diseases. Auditor's case file review indicated no qualifying incidents in the past 12 months.

**115.82(d):** As per Tennessee Department of Corrections Policy #502.06.3, treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with investigations. Tennessee Department of Corrections Policy #113.15, Inmate Co-Payment for Health Services lists sexual assault examinations, including mental health services necessary to treat the offender as non-chargeable services. Interview with Health Services Administrator indicates no inmate will be charged for healthcare resulting from a sexual assault incident. Auditor's review of inmate financial accounts found that medical visits resulting from a PREA allegation report were not assessed a copay for treatment related to incident.

Auditor's analysis of the information collected from interviews with Health Services Administrator, Facility PREA Coordinator/Associate Warden of Treatment, Interim State PREA Coordinator, and shift supervisors, and review of case files and related agency policy find Women's Therapeutic Residential Center demonstrates compliance with all provisions of this standard.

## **Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers**

### **115.83 (a)**

- 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  No

### **115.83 (b)**

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?  Yes  No

### **115.83 (c)**

- Does the facility provide such victims with medical and mental health services consistent with the community level of care?  Yes  No

#### 115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)  Yes  No  NA

#### 115.83 (e)

- 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.)  Yes  No  NA

#### 115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?  Yes  No

#### 115.83 (g)

- 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  No

#### 115.83 (h)

- 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  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.83(a):** Access to healthcare is governed by Tennessee Department of Corrections Policy #113.30, and states inmates within the physical custody of the Tennessee Department of Corrections shall have timely access to the appropriate level of health care on a 24 hour a day basis. In accordance with Tennessee Department of Corrections Policy #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. Auditor's review of case files indicates inmates who report sexual abuse are immediately taken to medical for a physical and mental health assessment. Interview with Health Services Administrator confirms this is standard

practice and that any inmate will receive appropriate services, regardless of where the victimization occurred. See related discussion in 115.82 and 115.21 narratives.

**115.83(b):** In accordance with Tennessee Department of Corrections Policy #502.06.3, the evaluation and treatment of victims of sexual abuse 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. Interview with Health Services Administrator indicate all inmates under medical or mental health treatment plan will receive continuum of services upon transfer to another facility. Inmates who are released from custody are provided arrangements for community follow-up medical/mental health care in accordance with Tennessee Department of Corrections Policy #113.80 and shall be issued any needed medications in accordance with Tennessee Department of Corrections Policy #113.70.

**115.83(c):** In accordance with Tennessee Department of Corrections Policy #502.06.3, the facility shall provide victims of sexual abuse with medical and behavioral health services consistent with the community level of care. Auditor concluded Women's Therapeutic Residential Center provides all inmates services consistent with at least a community level of care based on interviews with Health Services Administrator and other medical and mental health staff.

**115.83(d)(e):** In accordance with Tennessee Department of Corrections Policy #502.06.3 and Policy #113.90, inmate victims of sexual abusive vaginal penetration while incarcerated shall be offered pregnancy tests and timely information about, and access to, all pregnancy-related medical services that are lawful in the community. See policy #113.90. Auditor's review of case files indicate there are no cases within audit period that qualify for this provision.

**115.83(f):** In accordance with Tennessee Department of Corrections Policy #502.06.3, 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, as medically appropriate in accordance with Policy #113.42 and as further discussed in 115.82(c).

**115.83(g):** As per Tennessee Department of Corrections Policy #502.06.3, treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with investigations. Tennessee Department of Corrections Policy #113.15, Inmate Co-Payment for Health Services lists sexual assault examinations, including mental health services necessary to treat the offender as non-chargeable services. See further discussion as noted in 115.82(d) and 115.21(c).

**115.83(h):** As per Tennessee Department of Corrections Policy #502.06.3, 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 and offer treatment when deemed appropriate by behavioral health providers. Interview with Facility PREA Coordinator/Associate Warden of Treatment, Health Services Administrator, and mental health practitioners confirm that inmates with a history of prior sexual abuse or those identified while housed at Women's Therapeutic Residential Center are referred to mental health for assessment and opportunity to receive counseling. Case file review indicated identified perpetrators are referred to mental health and offered services.

Auditor's analysis of information obtained during interviews with Facility PREA Coordinator/Associate Warden of Treatment, Health Services Administrator, mental health and medical practitioners, Interim State PREA Coordinator, and inmates who reported prior sexual abuse during screening, and review of related agency policy and case files conclude Women's Therapeutic Residential Center meets provisions of this standard.

## DATA COLLECTION AND REVIEW

### Standard 115.86: Sexual abuse incident reviews

#### 115.86 (a)

- 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  No

#### 115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation?  Yes  No

#### 115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?  Yes  No

#### 115.86 (d)

- 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  No
- 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  No
- 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  No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  Yes  No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  Yes  No
- 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  No

#### 115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.86(a):** In accordance with Tennessee Department of Corrections Policy #502.06.2, 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 substantiated, unless the allegation has been determined to be unfounded.

**115.86(b):** In accordance with Tennessee Department of Corrections Policy #502.06.2, the facility shall conduct a Sexual Abuse Incident Review Report, CR-3985 within 30 days of the conclusion of the investigation.

**115.86(c):** In accordance with Tennessee Department of Corrections Policy #502.06.2, the Sexual Abuse Incident Review Team shall include the Warden/Superintendent/designee, facility and Investigations Unit investigators, line supervisor(s), and medical/mental health professionals.

**115.86(d):** In accordance with Tennessee Department of Corrections Policy #502.06.2, the review team shall: 1) consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; 2) consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; 3) examine the area within the facility or facility grounds where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; 4) assess the adequacy of staffing levels in that area during different shifts; 5) assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; 6) prepare a report of its findings, including but not limited to, determinations made in accordance with (1)-(3) above and any recommendations for improvements and submit such report to the Warden/Superintendent.

Above and beyond the requirements of this standard, the Women's Therapeutic Residential Center SART conducts a monthly inspection and review of the facility and all PREA incidents from the prior 30 days. This meeting comprises of a thorough inspection of a specific facility area, which changes each month, and discussion of any findings with documented recommendations. All team members who participate are identified in the report. The team briefs any area supervisor and talks with other staff in the area which is documented in the report. Assessments are made for video surveillance enhancements and any cameras not working. The team reviews any previous month's findings and assesses if the corrections were made. PREA Drills are also conducted and documented. This review is documented on the for CR-3821, Inspection Team Worksheet and this form submitted to the Warden and is copied to the State PREA Coordinator. The consistent monthly exercise of conducting this review and inspection merges the activities of standards 115.11, 115.13 and 115.86 into a focused and intentional team approach at maintaining high quality standards for PREA compliance efforts at the facility.

**115.86(e):** In accordance with Tennessee Department of Corrections Policy #502.06.2, the facility shall implement the recommendations for improvement, or shall document the reason for not doing so. A copy of the incident review shall be scanned and electronically forwarded to the Tennessee Department of Corrections PREA Coordinator. Auditor's review of the two documented incident reviews indicated no recommendations for improvement were necessary.

Auditor's review of the allegation log found ten (10) abuse cases reported within the past 12 months. Of these cases, two (2) were inmate on inmate and eight (8) were staff on inmate. All cases were closed, and dispositions were indicated as follows: a) 0-Inmate on Inmate/Substantiated; b) 2-Inmate on Inmate/Unsubstantiated; c) 0-Inmate on Inmate/ Unfounded; d) 1-Staff on Inmate/Substantiated; e) 0-Staff on Inmate/Unsubstantiated; f) 7-Staff on Inmate/Unfounded. All investigations, except for those found unfounded, were followed by a sexual abuse incident review within 30 days. Interviews with SART members indicate substantial knowledge of their responsibilities on the SART and with conducting sexual abuse incident reviews.

Auditor's evaluation of the evidence collected from document review as noted in the above narrative and related policy review, and during interviews with SART members, Facility PREA Coordinator/Associate Warden of Treatment, Warden, and Interim State PREA Coordinator finds Women's Therapeutic Residential Center meets all the provisions of this standard. Based on narrative found in section (d) above related to the monthly SART meeting/inspection and subsequent documentation of the *Inspection Team Worksheet*, auditor finds Women's Therapeutic Residential Center exceeds requirements of this standard.

## Standard 115.87: Data collection

### 115.87 (a)

- 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  No

### 115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually?  Yes  No

### 115.87 (c)

- 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  No

### 115.87 (d)

- 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  No

### 115.87 (e)

- 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  No  NA

### 115.87 (f)

- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.87(a):** As directed by Tennessee Department of Corrections Policy #502.06, staff shall collect accurate uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions.

**115.87(b):** As directed by Tennessee Department of Corrections Policy #502.06, Tennessee Department of Corrections shall aggregate the incident-based sexual abuse data at least annually. This report shall be prepared by the Decision Support: Research and Planning staff.

**115.87(c):** As directed by Tennessee Department of Corrections Policy #502.06, aggregated incident-based sexual abuse data reports shall be prepared utilizing the Department of Justice annual reporting format.

**115.87(d):** As directed by Tennessee Department of Corrections Policy #502.06, Tennessee Department of Corrections shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident review.

**115.87(e):** As directed by Tennessee Department of Corrections Policy #502.06, Tennessee Department of Corrections shall collect incident00based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

**115.87(f):** SSV submission form for 2016 and 2017 was reviewed by auditor; 2018SSV is not yet due.

Based on analysis of information collected from review of policies and reports identified in the above narrative, and interviews with Commissioner's Designee and Interim State PREA Coordinator, auditor finds Women's Therapeutic Residential Center meets the provisions of this standard.

As directed by Tennessee Department of Corrections Policy #502.06, staff shall collect accurate uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions.

**115.87(b):** As directed by Tennessee Department of Corrections Policy #502.06, Tennessee Department of Corrections shall aggregate the incident-based sexual abuse data at least annually. This report shall be prepared by the Decision Support: Research and Planning staff.

**115.87(c):** As directed by Tennessee Department of Corrections Policy #502.06, aggregated incident-based sexual abuse data reports shall be prepared utilizing the Department of Justice annual reporting format.

**115.87(d):** As directed by Tennessee Department of Corrections Policy #502.06, Tennessee Department of Corrections shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident review.

**115.87(e):** As directed by Tennessee Department of Corrections Policy #502.06, Tennessee Department of Corrections shall collect incident00based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

**115.87(f):** SSV submission form for 2016 and 2017 was reviewed by auditor; 2018SSV is not yet due.

Based on analysis of information collected from review of policies and reports identified in the above narrative, and interviews with Commissioner's Designee and Interim State PREA Coordinator, auditor finds Women's Therapeutic Residential Center meets the provisions of this standard.

## Standard 115.88: Data review for corrective action

### 115.88 (a)

- 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  No
- 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  No
- 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: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?  Yes  No

#### 115.88 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse  Yes  No

#### 115.88 (c)

- 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  No

#### 115.88 (d)

- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.88(a):** In accordance with Tennessee Department of Corrections Policy #502.06, the Tennessee Department of Corrections 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, including: 1) identifying problem area; 2) taking corrective action on an ongoing basis; 3) preparing an annual report of its findings and corrective action for Tennessee Department of Corrections.

Interview with Interim State PREA Coordinator, the data collected is used to identify problem areas and evaluates for improvements in training efforts. Corrective action is initiated immediately upon identification. Monthly PREA inspections are conducted at each facility to identify problems and corrections are made on the spot. Site visits are conducted by the Interim State PREA Coordinator in addition to the monthly inspections conducted by the local facility SART.

Tennessee Department of Corrections PREA FY 2017-2018 Annual Report and FY 2016-2017 Annual Report were reviewed and was found to contain a review of the data collected and aggregated with the intent of assessing and improving the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The report includes identification of problem areas, efforts of ongoing corrective action, and findings and corrective actions for each facility, as well as the agency as a whole.

**115.88(b):** In accordance with Tennessee Department of Corrections Policy #502.06, the annual report shall include a comparison of the current year's data and corrective actions with those from the prior year and shall provide an assessment of Tennessee Department of Corrections' progress in addressing sexual abuse.

**115.88(c):** In accordance with Tennessee Department of Corrections Policy #502.06, the annual report shall be approved by the Commissioner and made readily available to the public through the Department's website. The



Tennessee Department of Corrections PREA FY2017-2018 Annual Report can be found on Agency public website at <https://www.tn.gov/correction/sp/prison-rape-elimination-act.html>.

**115.88(d):** In accordance with Tennessee Department of Corrections Policy #502.06, personal identifiers shall be removed prior to the data being made publicly available. Based on interview with Interim State PREA Coordinator, no confidential information is listed in the Annual Report, therefore nothing is redacted prior to publishing on the website.

Based on auditor's review of the related documents noted above, review of the annual report published to the public website, and interviews with the Commissioner's Designee and Interim State PREA Coordinator, Tennessee Department of Corrections and Women's Therapeutic Residential Center demonstrates provisions of this standard.

## Standard 115.89: Data storage, publication, and destruction

### 115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?  
 Yes  No

### 115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?  Yes  No

### 115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?  Yes  No

### 115.89 (d)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.89(a):** In accordance with Tennessee Department of Corrections Policy #502.06, the Tennessee Department of Corrections PREA Coordinator shall ensure that PREA data collected is securely retained. Interview with Interim State PREA Coordinator indicates the Agency uses a secure drive to save the PREA data collected and that only the State PREA Coordinator and Compliance Director can access this drive.

**115.89(b):** In accordance with Tennessee Department of Corrections Policy #502.06, the Agency shall make all aggregated sexual abuse data from the Tennessee Department of Corrections facilities and private facilities with which its contracts, readily available to the public at least annually through the Tennessee Department of Corrections website. This data is made available through publishing the Tennessee Department of Corrections PREA Annual Report and can be viewed at <https://www.tn.gov/correction/sp/prison-rape-elimination-act.html>.

**115.89(c):** In accordance with Tennessee Department of Corrections Policy #502.06, personal identifiers shall be removed from PREA data collected prior to the data being made publicly available.

**115.89(d):** In accordance with Tennessee Department of Corrections Policy #502.06, the Tennessee Department of Corrections PREA Coordinator shall maintain sexual abuse data collected for at least ten years after the date of the initial collection unless federal, state, or local law require otherwise.

Auditor's evaluation of information obtained from review of related policy noted in the above narrative and reports observed on public website combined with interviews with Commissioner's Designee/Compliance Director and Interim State PREA Coordinator Women's Therapeutic Residential Center meets the requirements of this standard.

## AUDITING AND CORRECTIVE ACTION

### Standard 115.401: Frequency and scope of audits

#### 115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, 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? (N/A before August 20, 2016.)  
 Yes  No  NA

#### 115.401 (b)

- During each one-year period starting on August 20, 2013, 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?  Yes  No

#### 115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility?  
 Yes  No

#### 115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?  Yes  No

#### 115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  
 Yes  No

## 115.401 (n)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

**115.401(a):** Tennessee Department of Corrections ensured that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once. Interim State PREA Coordinator provided auditor with a scheduled of audits that indicates thirteen (13) audits (12 Prisons/1 Community Confinement) were conducted the first cycle. Of these facilities audited, 10 were agency operated and 3 were operated by a private organization on behalf of the agency. The agency has acquired two additional operations since the first cycle and these audits have both been audited within cycle 2.

**115.401(b):** Auditor reviewed the Tennessee Department of Corrections website at <https://www.tn.gov/correction/sp/prison-rape-elimination-act.html> and found a total of 14 facility audit final reports completed for the agency. According to the PREA Certification and Assurance Certification Worksheet provided to auditor by Interim State PREA Coordinator, in Cycle 2 and of the prisons operated by the agency: 2 were audited in Year 1, 6 were audited in Year 2, and 4 were audited/scheduled for audit in Year 3. According to schedule, the audits were not audited on a schedule of one-third each year, yet each year the agency had a portion of their facilities audited each year and they are all now completed for this second cycle.

**115.401(h):** Auditor was allowed to observe and to have full access to all areas of Women's Therapeutic Residential Center, including operations outside of the immediate secure perimeter. Escorts were provided and readily available whenever requested and auditor experienced no obstacles to facility access or observing the full scope of operations.

**115.401(i):** Auditor was permitted to request and receive copies of relevant documents (including electronically stored information). Some documents were locally obtained, others provided as a follow-up post site visit. All documents requested were provided either in printed or electronic format.

**115.401(m):** Auditor was provided appropriate and private areas to conduct all interviews with both inmates and staff.

**115.401(n):** Audit notifications posted throughout the facility included auditor's name and mailing address providing opportunity for inmates to send confidential letters to the auditor prior to the audit, although none were received. Interview with mailroom supervisor indicated that correspondence with auditor would be unmonitored and letters may be mailed unopened. Inmate interviews indicated they have an expectation they are allowed to seal outgoing mail and have the expectation that it will be processed unopened/unread. Interviews with mailroom supervisor, mailroom officers, and Facility PREA Coordinator/Associate Warden of Treatment along with review of related policy indicated outgoing mail is sent unopened.

Auditor's analysis of information obtained from agency website, audit schedule documents, and interviews with Interim State PREA Coordinator, Facility PREA Coordinator/Associate Warden of Treatment, mailroom staff and inmates conclude Women's Therapeutic Residential Center meets all requirements of this standard.

## Standard 115.403: Audit contents and findings

### 115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. 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 that there has never been a Final Audit Report issued.)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Auditor reviewed the Tennessee Department of Corrections website at <https://www.tn.gov/correction/sp/prison-rape-elimination-act.html> and found a total of 14 facility audit final reports completed for the agency. Final reports are published to the agency website within 90 days of issuance. Auditor finds Women's Therapeutic Residential Center meets this standard based on analysis of information observed on agency website, review of audit reports, and interview with Interim State PREA Coordinator.

## AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

*Sharon R. Shaver* \_\_\_\_\_

**Auditor Signature**

June 11, 2019 \_\_\_\_\_

**Date**