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

Final Report

Date of Report: September 16, 2020

Auditor Information

Name: Brian D. Bivens	**Email:** briandbivens@gmail.com
Company Name: Brian D. Bivens and Associates	
Mailing Address: P.O. Box 51787	**City, State, Zip:** Knoxville, TN 37950
Telephone: 865-789-1037	**Date of Facility Visit:** June 1-4, 2020

Agency Information

Name of Agency: CoreCivic		**Governing Authority or Parent Agency** *(If Applicable)*: N/A	
Physical Address: 5501 Virginia Way, Suite 110		**City, State, Zip:** Brentwood, Tennessee 37027	
Mailing Address: Same		**City, State, Zip:** Same	
The Agency Is:	Military	X Private for Profit	Private not for Profit
Municipal	County	State	Federal
Agency Website with PREA Information: https.//www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea			

Agency Warden Executive Officer

Name: Damon T. Hininger, President and Warden Executive Officer	
Email: damon.hininger@corecivic.com	**Telephone:** 615-263-3000

Agency-Wide PREA Coordinator

Name: Eric S. Pierson, Senior Director, PREA Compliance and Programs	
Email: eric.pierson@corecivic.com	**Telephone:** 615-263-6915
PREA Coordinator Reports to: Steven Conry, Vice President, Operations Administration	**Number of Compliance Managers who report to the PREA Coordinator** 67 (Indirect)

Facility Information			
Name of Facility: Whiteville Correctional Facility			
Physical Address: 1440 Union Springs Road		**City, State, Zip:** Whiteville, Tennessee 38075	
Mailing Address (if different from above): Same as above		**City, State, Zip:** Same as above	
The Facility Is:	Military	X Private for Profit	Private not for Profit
Municipal	County	State	Federal
Facility Type:	X Prison	Jail	
Facility Website with PREA Information: https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea			
Has the facility been accredited within the past 3 years? ☒ Yes ☐ No			
If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years): X ACA X NCCHC CALEA Other (please name or describe) N/A			
If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:			
Warden/Warden/Sheriff/Director			
Name: Samuel Rogers			
Email: Samuel.rogers@corecivic.com		**Telephone:** 731-254-0801	
Facility PREA Compliance Manager			
Name: Eric Bryant			
Email: eric.bryant@corecivic.com		**Telephone:** 731-254-0803	
Facility Health Service Administrator ☐ N/A			
Name: Tiffany Taylor			
Email: tiffany.taylor@corecivic.com		**Telephone:** 731-254-0829	

Facility Characteristics	
Designated Facility Capacity:	1536
Current Population of Facility:	1484
Average daily population for the past 12 months:	1407
Has the facility been over capacity at any point in the past 12 months?	Yes X No
Which population(s) does the facility hold?	Females X Males Both Females and Males
Age range of population:	19-71
Average length of stay or time under supervision:	1.76 years
Facility security levels/inmate custody levels:	Minimum and Medium
Number of inmates admitted to facility during the past 12 months:	1779
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for *72 hours or more*:	1779
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for *30 days or more:*	1779
Does the facility hold youthful inmates?	Yes X No
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	N/A
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	Yes X No
Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):	Federal Bureau of Prisons U.S. Marshals Service U.S. Immigration and Customs Enforcement Bureau of Indian Affairs U.S. Military branch X State or Territorial correctional agency County correctional or detention agency Judicial district correctional or detention facility City or municipal correctional or detention facility Private corrections or detention provider Other - please name or describe: Click or tap here to enter text. N/A

Number of staff currently employed by the facility who may have contact with inmates:	297
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	181
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	2
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	16
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	46
Physical Plant	
Number of buildings: **Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.**	1
Number of inmate housing units: **Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.**	7
Number of single cell housing units:	0
Number of multiple occupancy cell housing units:	7
Number of open bay/dorm housing units:	0
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):	40
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)	Yes No X N/A

Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?	X Yes No
Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?	Yes X No

Medical and Mental Health Services and Forensic Medical Exams

Are medical services provided on-site?	X Yes No
Are mental health services provided on-site?	X Yes No
Where are sexual assault forensic medical exams provided? Select all that apply.	On-site X Local hospital/clinic **Jackson-Madison County General Hospital** Rape Crisis Center Other (please name or describe: Click or tap here to enter text.)

Investigations

Criminal Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:	1
When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.	Facility investigators Agency investigators An external investigative entity
Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)	X Local police department Local sheriff's department State police A U.S. Department of Justice component Other (please name or describe: Click or tap here to enter text.) N/A

Administrative Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?	1
When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply	X Facility investigators Agency investigators An external investigative entity
Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)	Local police department Local sheriff's department State police A U.S. Department of Justice component Other (please name or describe: Click or tap here to enter text.) X N/A

Audit Findings

Audit Narrative

The onsite PREA audit of the Whiteville Correctional Facility was conducted on August 16, 2020, by Department of Justice Certified PREA Auditor Brian D. Bivens. Interviews with staff and inmates were conducted via SKYPE on August 10th and 12th, 2020 due to COVID-19 restrictions. The Whiteville Correctional Facility is located in Whiteville, Tennessee. Whiteville is the county seat of Hardeman County. The population was 3,148 at the 200 census and 4,638 at the 2010 census. Whiteville Correctional Facility is one of two prisons in the county; the other Hardeman County Correctional Center. Pre-audit preparation included a thorough review of all policies, procedures, training curriculums, Pre-Audit Questionnaire, and supporting documentation provided by the facility to demonstrate compliance to the PREA standards. The auditor, Accreditation Staff at Whiteville Correctional Facility and the CoreCivic agency-wide PREA Coordinator had ongoing communication for several weeks prior to the audit to prepare for the on-site visit.

The auditor wishes to extend his deepest appreciation to Warden Samuel Rogers and his staff for their professionalism, hospitality, and kindness. The auditor also wishes to compliment the Whiteville Correctional Facility's Eric Bryant for his outstanding work in organizing the files that were provided to the auditor in advance of the audit. This enabled the audit to move forward very efficiently. The auditor also wishes to express gratitude for the CoreCivic's agency wide PREA Coordinator, Eric Pierson.

T Staff interviews were conducted on August 10th via SKYPE and inmate interviews were conducted on SKPYE on August 12th, 2020. This process was mutually agreed upon by the Tennessee Department of Corrections, CoreCivic, and the auditor to ensure everyone's personal safety due to COVID-19. he on-site audit began with an entrance meeting being conducted on Sunday August 16, 2020 at 0900 a.m. in the Conference Room. The following staff attended the entrance meeting:

Warden Samuel Rogers

Assistant Warden/PREA Manager Eric Bryant

Stacey Nelson, Assistant Warden of Operations

Johnny Crenshaw, Chief of Security

Charrisma Robinson, Chief of Unit Management

Christopher Cruz, Assistant Chief of Security

Bobby Howell, Investigator

Felessia Johnson, Quality Assurance Manager

Stacey Nelson, Assistant Warden of Security

Following the entrance meeting, the auditor conducted a comprehensive site review that began at approximately 0930 a.m. During the site review the auditor reviewed camera placement, blind spots, staff placement and documentation to assist in determining standard compliance. While touring the facilities the auditor observed the notices of this PREA audit in all the buildings, as well as posters that called attention to the agency's Zero Tolerance Policy and how to report allegations of sexual abuse and sexual harassment. Posters were visible in both English and Spanish. The following staff accompanied the auditor on the site review:

Warden Samuel Rogers

Assistant Warden/PREA Manager Eric Bryant

Johnny Crenshaw, Chief of Security

Charrisma Robinson, Chief of Unit Management

Christopher Cruz, Assistant Chief of Security

Bobby Howell, Investigator

Felessia Johnson, Quality Assurance Manager

Stacey Nelson, Assistant Warden of Security

All housing units, day rooms, resident program areas, work areas, and all other resident accessible areas were toured. Other accessible areas included the Kitchen, Laundry, Barber Shop, Medical, administrative area, Master Control, Unit Control Towers, Vocational and Classrooms, and Recreation Yards, Gymnasium, and the Receiving Dock. While touring several residents and staff were questioned about their knowledge of PREA standards, procedures for reporting, services available, and their responsibilities. All staff and residents informally interviewed during the tour acknowledged receiving training and procedures for reporting sexual abuse, sexual harassment, and/or retaliation for reporting. The auditor found the staff to be well versed in their duties as PREA 1st Responders.

The auditor interviewed a total of thirty-two staff members, contractors and/or volunteers during the course of this audit. (See Chart Below) All staff interviewed was well versed in their respective areas of responsibility regarding PREA and affirmed compliance with the applicable PREA standards.

Staff/Contractor/Volunteer Interviews (32)

Interview Type	Number Interviewed	Additional Information
Volunteer	2	
Contractor	1	Trinity
Supervisor	2	Acting Shift Supervisors
1st Responder	1	
Agency Head/Designee	1	
Contract Monitor	1	With Tennessee Department of Corrections
Facility Head/Designee	1	
Medical Staff	1	
Mental Health Staff	1	
PREA Coordinator	1	CoreCivic
PREA Manager	1	Assistant Warden
Day Shift Random Staff	10	
Night Shift Random Staff	10	
PREA Investigator	2	Chief of Security and Internal Affairs
Screening Staff	3	Case Managers
Human Resources	1	
Training Staff	1	
Juvenile Staff	0	N/A
Segregation Staff	1	Sergeant
Intake Staff	1	

There is no SAFE or SANE staff at the facility; they are made available through a Jackson General. Exams would be performed at Jackson General, located in Jackson, Tennessee. Staff interviewed was well versed in their responsibilities in reporting sexual abuse, sexual harassment, staff negligence, and retaliation for reporting. The WRAP -Wo/Men's Recourse and Rape Assistance Program also acts the external reporting agency. Inmates can simply dial hotline number on any inmate phone, and they are quickly connected to a Victim Advocate. The system was successful tested during the initial tour of the facility. CoreCivic also has a Behavior Health Coordinator and Psychologist on staff to assist victims of sexual abuse if needed.

The facility supplied a list of resident names sorted by housing units, disabilities, and special designations, as well as a list of facility staff names to the auditor. From these lists the auditor selected, at random, a sampling of residents and staff to be interviewed. The sampling size for residents included at least one resident from each housing unit. This decision was made to ensure all residents throughout the facility were receiving the same information and education related to all aspects of the PREA program instituted at this facility.

There were forty inmates interviewed during the on-site visit. These residents consisted of: twenty general population inmates and twenty targeted. Two inmates refused and were replaced during the interviews.

Inmate Interviews (40)

Interview Type	Number Interviewed	Additional Information
General Population	20	
Juvenile	0	Adult only Facility
LEP	3	
Blind/Low Vision	0	None at the time of the interviews
Deaf/Hearing Impaired	1	
Self-Identified as LBGTQ	3	
Physical/Mental Disability	2	
Screened as a Risk of Abusiveness	6	
Screened as a Risk Of Victimization	5	
Reported Sexual Abuse	0	

All of the inmates interviewed acknowledged receiving PREA training and written materials in languages that they could comprehend (posters, pamphlets, and resident handbooks) outlining the agencies zero tolerance policies towards sexual abuse, sexual harassment, and retaliation for reporting, as well as the procedures for reporting. There were eight inmates did not remember if they had watched the PREA orientation video utilized for the more in depth training. Intake files did show all eight inmates had signed a form acknowledging they had watched the video. Six of the forty inmates reviewed stated they did not remember receiving a PREA brochure upon intake. The review of their intake files showed where each had signed for the brochure as a facility issued item. Inmates were given another brochure to ensure compliance. All inmates interviewed felt if they had to file a PREA complaint the facility would respond appropriately to their complaint and that all PREA complaints were taken very serious by staff at this facility.

The auditor selected and carefully examined ten human resource files, ten staff training files, two contractor and two volunteer training files. The human resource and volunteer files were very well organized and contained all the necessary background check information and signed statements regarding previous sexual misconduct described in the standards. The training records were also very complete and included written documentation that staff and volunteers received the required training and understood what was being trained. It was clear the PREA Manager thoroughly covers all aspects of PREA during his training sessions.

The auditor also reviewed ten offender files and saw documentation of offender education, as well as documentation of the initial risk screenings, and screenings upon additional information being completed as required by the standard.

In the 12 months preceding the audit, the Whiteville Correctional Facility had received and investigated twenty-six PREA complaints regarding sexual harassment and/or sexual abuse. During the investigation each case was either determined to be unfounded, unsubstantiated or substantiated based on each merit, investigation findings and evidentially standards. All investigative files were reviewed during the on-site visit and appeared to document thoroughly the investigative process per agency policy. Policy was followed and documented for inmate notification, incident

review and retaliations monitoring. Policy and procedure required that criminal investigative referrals were to be documented and proper referrals were made as warranted.

PREA Investigation Files from the past 12 months (26)

Case Number	*Aggressor vs. Victim	Case Type	Investigation Outcome	Referred for Prosecution	Inmate Notified
300	EOI	Assault	Unsubstantiated	No	Yes
319	EOI	Assault	Unsubstantiated	No	Yes
340	EOI	Assault	Unfounded	Yes	Yes
346	EOI	Assault	Unsubstantiated	No	Yes
386	IOI	Assault	Unfounded	No	Yes
417	EOI	Assault	Unfounded	No	Yes
436	IOI	Assault	Unsubstantiated	No	Yes
444	IOI	Assault	Unsubstantiated	No	Yes
446	IOI	Assault	Unsubstantiated	No	Yes
468	IOI	Assault	Unsubstantiated	No	Yes
570	IOI	Assault	Unsubstantiated	No	Yes
588	IOI	Assault	Unsubstantiated	No	Yes
648	IOI	Harassment	Unfounded	No	Yes
679	IOI	Harassment	Unfounded	No	Yes
029	IOI	Assault	Unsubstantiated	No	Yes
033	IOI	Assault	Unfounded	No	Yes
079	EOI	Assault	*Pending*	*Yes*	Yes
095	IOI	Assault	Unfounded	No	Yes
109	EOI	Harassment	Unsubstantiated	No	Yes
111	IOI	Assault	*Pending*	*Yes*	Yes
174	IOI	Assault	Unfounded	No	Yes
184	EOI	Harassment	Unfounded	No	Yes
200	EOI	Assault	Substantiated	No	Yes
214	EOI	Assault	Substantiated	No	Yes
217	IOI	Assault	Unfounded	No	Yes
218	EOI	Assault	Unfounded	No	Yes

* EOI means Employee on Inmate and IOI means Inmate on Inmate

There were three allegations made by inmates that occurred at other correctional facilities; file review showed all five allegations were forwarded to the appropriate jail administration.

At the conclusion of the on-site visit, an exit meeting was held to discuss the audit findings. The following staff attended:

Warden Samuel Rogers

Assistant Warden/PREA Manager Eric Bryant

Stacey Nelson, Assistant Warden of Operations

Johnny Crenshaw, Chief of Security

Charrisma Robinson, Chief of Unit Management

Christopher Cruz, Assistant Chief of Security

Bobby Howell, Investigator

Felessia Johnson, Quality Assurance Manager

Facility Characteristics

The Whiteville Correctional Facility opened in 2002 and is located approximately 60 miles from Memphis, Tennessee. The facility is contracted to provide housing and institutional programming to 1536 minimum and medium inmates for the Tennessee Department of Corrections. The facility is located on a 160-acre parcel of land; the area within the secure perimeter consists of 40 acres. The facility is surrounded by a double fence with Constantine wire. The facility houses only male inmates; the facility does not have juveniles. Custody levels include minimum and medium

With the exception of the gymnasium, the facility is entirely under one roof. Areas include: the Administration Offices, Master Control, Medical and Dental Area, Kitchen, Restrictive Housing, Vocational/Educational Classrooms, Chapel, Warehouse, Commissary Area, Inmate Property, Visitation, Facility Maintenance, Laundry, Mailroom, Staff Training Area, and six (6) inmate housing units (see chart below).

Name	Capacity	Gender	Custody Level
F Unit	**(256)**		
A	128	Males	Minimum/Medium
B	128	Males	Minimum/Medium
C	128	Males	Minimum/Medium
D	128	Males	Minimum/Medium
G Unit	**(256)**		
A	128	Males	Minimum/Medium
B	128	Males	Minimum/Medium
C	128	Males	Minimum/Medium
D	128	Males	Minimum/Medium
H Unit	**(256)**		
A	80	Males	Minimum/Medium
B	48	Males	Minimum/Medium
C	80	Males	Minimum/Medium
D	88	Males	Minimum/Medium
E	88	Males	Minimum/Medium
F	40	Males	Minimum/Medium
I Unit	**(256)**		
A	40	Males	Minimum/Medium
B	48	Males	Close
C	40	Males	Minimum/Medium
D	80	Males	Minimum/Medium
E	88	Males	Minimum/Medium
F	40	Males	Minimum/Medium
Name	**Capacity**	**Gender**	**Custody Level**
J Unit	**(256)**		
A	85	Males	Minimum/Medium
B	85	Males	Minimum/Medium
C	80	Males	Minimum/Medium
D	19	Males	Minimum/Medium
E	80	Males	Minimum/Medium
F	31	Males	Minimum/Medium

K Unit	**(256)**		
A	64	Males	Minimum/Medium
B	64	Males	Minimum/Medium
C	128	Males	Minimum/Medium
D	128	Males	Minimum/Medium
Restrictive Housing	**(83)**		RH - All

Unit Management Offices are adjacent to each housing unit. The gymnasium is located in a separate building and is adjacent to the outdoor athletic fields. There are six living units; three of which have six pods and the remaining three have four pods each. There are two honor pods; one is designed for older inmates. Two pods contain inmates medical and/or mental health needs. Three pods are designated for substance abuse treatment programming. Three more are designated for inmate worker housing and one is designed specifically for intake/orientation. The rest are general population.

The prison offers cognitive-behavioral residential substance use programs. Other programs include anger management, life skills, family counseling, and pre-release counseling.

The prison offers Academic programs include Hi-Set, Adult, Vocational programs include building trades, carpentry, Anger Management, Sex Offender Aftercare Program, Drug Awareness, Drug Education, Partners in Parenting, Time out for men, Alcoholics Anonymous, 50-day pre-release program, Thinking for a Change, Life Skills Class, Group Therapy (GRTH), Pre/Post TCOM (PPTC), Therapeutic Community (TCOM), and Cognitive Behavior (CBIP).

A full-time investigator (appointed on 04/14/20) investigates incidents that occur in the facility, as well as gathers gang intelligence. All new corrections officers complete the Corrections Training Program prior to working with inmates. It is a standardized course that ensures officers receive equal training. Within their first year of employment, corrections officers are required to complete 40 hours of training to be certified by the CoreCivic. Each year therefore, corrections officers are required to complete 40 hours of in-service training.

CoreCivic Purpose

Help government better the public good

CoreCivic Mission

We help government better the public good through:

CoreCivic Safety – We operate safe, secure facilities that provide high quality services and effective reentry programs that enhance public safety.

CoreCivic Community – We deliver proven and innovative practices in settings that help people obtain employment, successfully reintegrate into society and keep communities safe.

CoreCivic Properties – We offer innovative and flexible real estate solutions that provide value to government and the people they serve.

Summary of Audit Findings

This facility has successfully must the necessary requirements for re-certification.

Standards Exceeded

Number of Standards Exceeded: **2**

List of Standards Exceeded: **115.15, 115.64**

Standards Met

Number of Standards Met: **43**

List of Standards Met: **115.11, 115.12, 115.13, 115.14, 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, 115.65, 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**

Standards Not Met

Number of Standards Not Met: 0

List of Standards Not Met: Click or tap here to enter text.

PREVENTION PLANNING

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

X **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

Based on the documentation provided: as well as, interview with the Agency-wide PREA Coordinator, and PREA Manager, it was determined the Whiteville Correctional Facility delineates compliance with Standard 115.11.

115.11 (a) The Whiteville Correctional Facility staff follows the agency's policy, 14.2 Sexual Abuse, Prevention and Response which mandates a zero tolerance for all forms of sexual abuse and sexual harassment. This policy outlines the agency's approach to preventing, detecting, and responding to such conduct. This was evident during the onsite tour, interviews with inmates and staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.11 (B) and (C) The agency employs an upper-level, agency-wide PREA Coordinator. The Job Description for Senior Director, PREA Programs and Compliance, Job Code 10675, outlines the job duties of the agency's PREA Coordinator. Eric Pierson was appointed as the agency-wide PREA Coordinator by Damon Hininger, President and Warden Executive of CoreCivic on December 12, 2016. Mr. Pierson has over 30 years of experience in the field of Corrections. The agency provided the auditors with the organizational chart showing the PREA Coordinator position as an upper-level, agency-wide position, Mr. Pierson reports directly to the Vice President of CoreCivic. Mr. Pierson is very knowledgeable of the PREA standards and actively assists the facility with compliance. Mr. Pierson has the authority to develop, implement, and oversee PREA compliance. He is actively updating the facility as new Frequently Ask Questions (FAQ's) results are published on the PREA Resource Center website. The Whiteville Correctional Facility warden appointed Assistant Warden Eric Bryant the facilities PREA Manager on December 16, 2019.

During interviews with the PREA Coordinator and the PREA Compliance Manager, both indicated they had sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards as required. Therefore, the facility demonstrated compliance with this part of the standard during this audit. The Whiteville Correctional Facility meets this standard due to the fact it employs a PREA Compliance Coordinator and a PREA Compliance Manager for the one facility. Therefore, this standard was found to meet compliance during this audit.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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.) ☐ 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

Based on the documentation provided: as well as, interview with the Warden, PREA Coordinator and PREA Manager, it was determined the Whiteville Correctional Facility does not contract with other facilities to house inmates assigned to their custody. CoreCivic is a private provider and does not contract with other agencies for the confinement of those in their custody. Therefore, this standard was found to be in compliance during this audit.

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)

- Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices? ☒ Yes ☐ No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy? ☒ Yes ☐ No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies? ☒ Yes ☐ No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies? ☒ Yes ☐ No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including

"blind-spots" or areas where staff or inmates may be isolated)? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift? ☒ Yes ☐ No ☐ NA

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? ☒ Yes ☐ No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? ☒ 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*)

Instructions for Overall Compliance Determination Narrative

Based on staff interviews, review of documentation provided and review of the Whiteville Correctional Facility staffing analysis and CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (pages 9 and 10). The following delineates the audit findings regarding this standard:

115.13 (a) The facility has documented and made its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing as described and required by this standard. The established staffing plan uses the criteria found in the standard 115.13 (a) to include the physical layout of the facility, composition of the residents housed, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, and any other relevant factors identified. Video monitoring has been deployed to assist with the protection of offenders against sexual abuse at this facility. The staffing levels are monitored daily by review of shift rosters. There have not been any judicial findings of inadequacy in the past twelve months. CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (pages 9 and 10) outlines this procedure. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.13 (b) The facility has procedures in place to ensure all deviations are covered by overtime or notification must be documented on shift roster and submitted to the PREA Manager outlining the reason(s) for the deviation. There has not been any deviation reported where the staffing plan had not been complied with in the past twelve months, as confirmed by written documentation and during interview with the PREA Manager. Staffing deviations are covered with overtime. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.13 (c) The Whiteville Correctional Facility Annual Staffing Plan Assessment Form (14-2l) is completed by the PREA Manager and forwarded to the PREA Coordinator and Assistant Warden for review. It is then forwarded to the Warden for signature and approval of any recommendations made which would include changes to policy and procedures, physical plant, video monitoring, or staffing levels. The last Whiteville Correctional Facility Annual Staffing Plan Assessment Form (14-2l) was completed on October 1, 2019. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.13 (d) Based on Whiteville Correctional facility logs, staff interviews, and policy 14.2, Sexual Abuse, Prevention, and Response (page 9). Intermediate-level or higher-level supervisors are required to conduct and are documenting UNANNOUNCED rounds on all shifts as required. Random documentation review showed within a 72-hour period; more than two dozen unannounced rounds were conducted in the facility. Such arounds are logged in the appropriate unit log book. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.14: Youthful inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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 X 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 X 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 X 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

Based on the auditor observation, documentation provided, 14.2, Sexual Abuse, Prevention and Response, Whiteville Correctional Facility, Classification Housing, work and Programs Plan, interviews with the Warden, PREA Coordinator, PREA Manager and staff interviews, the Whiteville Correctional Facility does not house youthful offenders. Therefore, the facility is found to be in compliance with this standard.

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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, except in exigent circumstances? (N/A if the facility does not have female inmates.)
  ☒ 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 if the facility does not have female inmates.) ☒ 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? (N/A if the facility does not have female inmates.) ☒ Yes ☐ No ☐ NA

115.15 (d)

- Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? ☒ Yes ☐ No

- Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? ☒ Yes ☐ 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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response pages 17 and 18, training curriculums, CoreCivic Search Procedures – Facilitator's Guide, staff interviews, training file reviews, and documentation provided; the following delineates the audit findings regarding this standard:

115.15 (a) CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response (page 17) outlines offender searches including searches of transgender and intersex offenders. The review of training curriculums and CoreCivic Search Procedures – Facilitator's Guide (page 8) and staff interviews revealed cross gender strip searches are prohibited except in exigent circumstances and must be documented when conducted. Attendance to Training is documented on the "Training/Activity Attendance Roster" Form 4-2A).There have been no documented cross-gender visual body cavity or strip searches reported in the past 12 months. This was reiterated during an interview with the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.15 (b) CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response (page 17) and CoreCivic Search Procedures – Facilitator's Guide (page 8) prohibits male employees from frisk/pat searches of female inmates/residents except in exigent circumstances. Whiteville Correctional Facility is a male only facility. This practice was confirmed during female inmate interviews. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.15 (c) CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response (page 17) and CoreCivic Search Procedures – Facilitator's Guide (page 8) prohibits frisk/pat searches of the female inmates by male staff and requires that all cross-gender searches in exigent circumstances be documented. If a search is completed under exigent circumstances, the Notice to Administration 5-1B must be completed. There no reported searches completed under exigent circumstances in the past twelve months. Whiteville Correctional Facility is a male only facility. This practice was confirmed during female inmate interviews. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.15 (d) CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response (pages 17 and 18) and CoreCivic Search Procedures – Facilitator's Guide (page 8)outlines that inmates shall be permitted to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks or genitalia. The inmates confirmed during interviews they have privacy when showering, using the toilets and while changing their clothes. CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response (pages 17 and 18) also require staff of the opposite gender to announce their presence prior to entering the housing units. Attendance to Training is documented on the "Training/Activity Attendance Roster" Form 4-2A). Inmate and staff interviews revealed that opposite gender announcements were common practice at this facility and reminders of this requirement are posted on the entry doors of all housing units exceeding the requirements of this part of the standard during this audit.

115.15 (e) Based on CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response (page 17), CoreCivic Search Procedures – Facilitator's Guide (page 10), training curriculum provided and staff

interviews the facility prohibits staff from physically examining transgender or intersex inmates for the sole purpose of determining genital status. If the inmate's genital status is unknown, it is determined 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. Attendance to Training is documented on the "Training/Activity Attendance Roster" Form 4-2A). This was corroborated during interviews with LBGTI inmates and random staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.15 (f) Based on CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response (page 18), CoreCivic Search Procedures – Facilitator's Guide (page 11), training curriculum provided, staff training file reviews, and staff interviews the facility trains security staff to conduct cross-gender pat-down 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. Attendance to Training is documented on the "Training/Activity Attendance Roster" Form 4-2A). During interview with the LBGTI inmates, it was confirmed that the inmates felt the staff conducts proper searches. There were also no complaints filed by the LBGTI inmate in the past 12 months related to searches. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on Whiteville Correctional Facility practice, CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response (pages 15 and 16), "Preventing Sexual Abuse and Misconduct" brochure, review of the lesson plans, and review of Language Line agreement, Avaza Sign Language interpretation Services, invoices, as well as staff and inmate interviews and facility tour; the following delineates the audit findings regarding this standard:

115.16 (a) CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response (pages 15 and 16) outlines the steps that Whiteville Correctional Facility takes appropriate steps to ensure inmates with disabilities (including, for example, 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 its efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. PREA Brochure – "Preventing Sexual Abuse and Misconduct", PREA postings, PREA education video, and the inmate handbook are provided in both English and Spanish. The facility has two TDD phones. The facility utilizes Avaza Language Line for interpreter services. During interviews with the inmates identified to meet the aspects of this standard, they all confirmed having received training and materials they could understand. The agency has multiple employees who are fluent in Spanish. The inmates and staff also confirmed that the Language Line is available when needed; as well as several employee interpreters. The auditor was provided with invoices and payments for Language Line Services. There were no blind/low vision and one deaf/hearing impaired inmate to interview during the onsite visit. The hearing impaired inmate understood the agency's zero tolerance for sexual abuse, how to report sexual abuse and stated he felt safe in the facility. Inmates with mental deficiencies are assisted by the Medical and Mental Health staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.16 (b) The Whiteville Correctional Facility takes 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, including steps to provide interpreters who can interpret effectively accurately and impartially. Language Line interpreter services and/or staff interpreters are used to translate at this facility. There were three Spanish speaking inmates interviewed (with the assistant of a staff interpreter) during the on-site visit and they confirmed during interviews receiving all written PREA information and viewing the Spanish version of the a PREA DVD. The inmates and staff also confirmed that interpretive services are available when needed. The facility has two TDD phones. CoreCivic Policy 14.2, Sexual Abuse, Prevention and

Response (page 16) outlines these practices. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.16 (c) CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response (page 16) illustrates the facility does not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety. The auditor was provided with invoices and payments for Language Line Services. This was confirmed during interviews with First Responders, the PREA Manager and the PREA Investigator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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 who may have contact with inmates? ☒ Yes ☐ No

- Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates? ☒ Yes ☐ 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*)

Instructions for Overall Compliance Determination Narrative

Based upon review of TDOC Policy 301.04, Job Requirements (pages 5 and 6), CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response (pages 5 and 6), PREA Questionnaire CR-3962, Human Resource staff interviews, Self Declaration Forms for applicants, volunteers, contractors and promotions, and personnel file reviews; the following delineates the audit findings regarding this standard:

115.17 (a) TDOC Policy 301.04, Job Requirements (pages 6 and 7), and CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response policy (pages 5 and 6) outlines that Whiteville Correctional Facility does not hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor or volunteer 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, has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in the activity described above. The facility completes a Self-Declaration of Sexual Abuse/Sexual Harassment Form CR-3819 on all applicants as well as a background check is completed on all new applicants confirming compliance. This practice was confirmed during interviews with the facility's Human Recourse Staff and the Tennessee Department of Corrections. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (b) TDOC Policy 301.04, Job Requirements (pages 6 and 7), and CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response policy (pages 5 and 6) outlines that Whiteville Correctional Facility considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor or volunteer, who may have contact with inmates. Staff are required to sign the "Self-Declaration form for Sexual Abuse and Sexual Harassment CR-3819. This was confirmed during review of four human resource files for volunteers and four Human Resource File reviews of volunteers. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (c)-1 Whiteville Correctional Facility requires a criminal background records check be completed before hiring any new employee. Ten out of ten Human Resource files confirmed this practice. Background checks are documented on the "Criminal History Results Form (CR-3704). Therefore, the facility demonstrated compliance with this part of the standard during this audit.

(c)-2 Whiteville Correctional Facility makes their best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any pending investigations of allegation of sexual abuse. This request is documented on PREA Questionnaire for Prior Institutional Employer CR-3962 Form. Review of Human Resource files illustrated this practice. Two applicants had previously worked at a prior institution; both times, the Human Resource Staff had sent and received the prior documentation from the previous employer. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (d) Whiteville Correctional Facility requires a criminal background records check be completed before enlisting the services of any contractor or volunteer who may have contact with the inmates. Four out of four files reviewed confirmed this practice. Background checks are documented on the "Criminal History Results Form (CR-3704). Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (e) Whiteville Correctional Facility completes background checks annually. There is an extensive tracking system in place to monitor the process. CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 6) outlines the requirements. Background checks are documented on the "Criminal History Results Form (CR-3704). Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (f) Whiteville Correctional Facility instills upon all employees a continuing affirmative duty to disclose any sexual misconduct as required by this standard. A Whiteville Correctional Facility PREA Questionnaire for Prior Institutional Employer CR-3962 Form is completed by all applicants, upon being hired, and if being considered for a promotion. Each subsequent year of employment, employees are required to complete the agency's Self-Declaration of Sexual Abuse/Sexual Harassment Form CR-3819. File review showed that ten out of ten files contained a Self-Declaration Form. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (g) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 6) mandates that material omissions regarding sexual misconduct, and the provision of materially giving false information, are grounds for termination as required by this standard. The PREA Manager stated there had been no terminations of a contract employee for this circumstance in the past twelve months. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (h) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 6) requires that the agency shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a current or former employee upon receiving a request from an institutional employer for whom such employee has applied to work. The PREA Manager stated the agency has not received such a request in the past twelve months. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based upon review of Whiteville Correctional Facility physical plant, staff interviews and review of documentation provided; the following delineates the audit findings regarding this standard:

115.18 (a) CoreCivic Policy 7-1, Record Drawing and Alterations/Additions (page 1), and CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 34) requires when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. Significant facility modifications must be documented on the "PREA Physical Plant Considerations Form (7-1B).

During this audit cycle there have been no expansions or modifications to this facility. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.18 (b) CoreCivic Policy 7-1, Record Drawing and Alterations/Additions (page 1), CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 34) requires when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse. Significant facility modifications must be documented on the "PREA Physical Plant Considerations Form (7-1B).

During this audit cycle there has been minimal enhancements to the video technology at this facility. All identified blind spots were addressed and staff as well as inmates/detainees confirmed during interviews they felt safer with the changes in place. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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 evidentiary 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? (N/A if the agency *always* makes a victim advocate from a rape crisis center available to victims.) ☐ Yes ☐ No ☒ NA

- 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 agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) ☐ Yes ☐ 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 *always* makes a victim advocate from a rape crisis center available to victims.) ☐ 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

Based upon review of CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (pages 25-27), investigative staff interviews, and review of documentation provided; this delineates the audit findings regarding this standard:

115.21 (a) and (b) Whiteville Correctional Facility complies with all elements of this standard. Documented in CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 20); the agency follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings. Whiteville Correctional Facility has a Memorandum of Understanding with the Whiteville Police Department, effective 12/08/16. The Whiteville Police Department investigates all PREA complaints for potential criminal activity and maintains a close working relationship with the County Prosecutor and the Whiteville Police Department investigator on each case. The Warden did appoint a Facility Investigator on 04/14/20; he has completed RELIAS PREA Investigation Protocol training. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.21 (c) Whiteville Correctional Facility offers all victims of sexual abuse access to forensic medical examinations at Jackson-Madison County General Hospital without financial cost, where evidentiary or medically appropriate. Such examinations are to be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) as required. During the past twelve months, there were six inmates who alleged sexual abuse that constituted the need for a SANE exam. The exams were conducted. At the conclusion of the investigation, the PREA Investigator determined the allegation to be unfounded. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.21 (d) The Whiteville Correctional Facility has entered into a Memorandum of Understanding with WRAP - WO/Men's Resources and Rape Assistance Program (effective 03/06/20) which agrees to provide outside victim advocacies services to the inmates. Additionally, Whiteville Correctional Facility has fourteen staff members listed as advocates to assist the inmate/detainee victim upon request. The services of these victim advocates has been requested and utilized once by an alleged inmate victim during this audit cycle. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.21 (e) Whiteville Correctional Facility has entered into a Memorandum of Understanding with WRAP - WO/Men's Resources and Rape Assistance Program (effective 03/06/20); which agrees to provide outside victim advocacies services to the inmates upon request. The facility also makes available to the victim qualified agency staff members, upon request by the victim, who will accompany and support the victim through the forensic medical examination process and investigatory interviews and provide emotional support, crisis intervention, information, and referrals as warranted. Interviews with multiple Whiteville Correctional Facility staff members confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.21 (f) The Whiteville Correctional Facility is responsible for administrative investigations and criminal investigators with the Whiteville Police Department and TDOC OIC shall conduct all criminal investigations covering all aspects of this standard. Whiteville Correctional Facility has a Memorandum of Understanding with the Whiteville Police Department. The Warden did appoint a Facility Investigator on 04/14/20; he has completed RELIAS PREA Investigation Protocol training. This was confirmed during an interview with the PREA Coordinator and during review of all PREA investigation files from the past twelve months. Therefore, this part of the standard is not applicable to this facility.

115.21 (g) The Whiteville Correctional Facility is exempt from this section.

115.21 (h) The Whiteville Correctional Facility has qualified employees available for inmate/detainee victims of sexual assault. These employees have been appropriately screened to fulfill this role. These individuals have received proper training and have been screened by the Administrative Staff before providing these services. Therefore, this part of the standard is not applicable to this facility.

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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 the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).) ☐ Yes ☐ 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*)

Instructions for Overall Compliance Determination Narrative

Based upon review of CoreCivic policy 5.1, Incident Reporting (page 7), 14.2 Sexual Abuse, Prevention and Response (pages 25-26) investigative staff interviews, TDOC Policy 301.04, Job Requirements (pages 2 and 3), and CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response policy (pages 5 and 6),and review of documentation provided; the following delineates the audit findings regarding this standard:

115.22 (a) TDOC Policy 301.04, Job Requirements (pages 2 and 3), and CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response policy (pages 5 and 6) outlines and CoreCivic Policy 14.2, Sexual Abuse, Prevention and Response (pages 25-26) states that the Whiteville Correctional Facility is required to investigate ALL PREA complaints received at this facility. Whiteville Correctional Facility has a Memorandum of Understanding with the Whiteville Police Department. All potential criminal activity is referred to the Whiteville Police Department PREA Investigator assigned to the Whiteville Correctional Facility. The Warden did appoint a Facility Investigator on 04/14/20; he has completed RELIAS PREA Investigation Protocol training. There were four case of sexual abuse referred and investigated during this audit cycle. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.22 (b) All PREA allegations are investigated by the Whiteville Correctional Facility and TDOC OIC for potential criminal activity. If it is determined that the allegation involves potential criminal activity, it is referred to the Whiteville Police Department PREA Investigator and TDOC OIC and prosecution as warranted. Whiteville Correctional Facility has a Memorandum of Understanding with the Whiteville Police Department. This was confirmed during an interview with the PREA Coordinator. This policy is published on the agency website https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea as required. All PREA allegations are recorded in PAS Reporting System. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.22 (c) The Whiteville Correctional Facility refers all criminal allegations for investigation to the designated Whiteville Police Department PREA investigator. This was confirmed during an interview with the PREA Coordinator. The requirements of this part of the standard are outlined in the policy that is posted on the website https://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea. All PREA allegations are recorded in PAS Reporting System. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

TRAINING AND EDUCATION

Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on the review of the CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (pages 5-7) staff interviews, random staff training file review and review of documentation provided CoreCivic PREA Overview – Facilitator's Guide, sign-in sheets, signed acknowledgement forms, training curriculums and employee handouts); the following delineates the audit findings regarding this standard:

115.31 (a) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (pages 6-7) requires Whiteville Correctional Facility train all their employees who have contact with inmates on:

(1) Its zero-tolerance policy for sexual abuse and sexual harassment;
(2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
(3) Inmates' right to be free from sexual abuse and sexual harassment;
(4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
(5) The dynamics of sexual abuse and sexual harassment in confinement;
(6) The common reactions of sexual abuse and sexual harassment victims;
(7) How to detect and respond to signs of threatened and actual sexual abuse;
(8) How to avoid inappropriate relationships with inmates;
(9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and
(10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.31 (b) The training is tailored to male inmates at Whiteville Correctional Facility; the facility does not house female inmates. The lesson plan is titled, "Objectives for Sexual Abuse Procedures and Response". This was confirmed after reviewing the training lesson plan and an interview with the PREA Manager; who advised there had not been any staff transfers from a facility that houses females in the past 12 months. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.31 (c) The training staff provided a report containing all staff that had been PREA trained which confirmed the requirements needed to meet the standard and proved that all current staff was trained within one year of the effective date of the PREA standards. All staff receive annual refresher PREA training during in-service according to policy CoreCivic 14.2 Sexual Abuse, Prevention and Response (pages 6-7) which meets the requirements of this standard. Staff sign form 14-2A, Training Acknowledgment form indicating they have received and understood the PREA Training. Review of ten employee training files illustrated that all ten were found to be in compliance with the policy. Therefore, the facility meets this part of the standard during this audit.

115.31 (d) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (pages 6-7) requires that Whiteville Correctional Facility documents, through employee signature on CoreCivic PREA Policy Acknowledgment and/or Training Acknowledgement Form 14-2A, that all employees understand the training they have received. Ten out of ten training file reviews confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based upon review of CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 8) volunteer and contractor interviews, random training file review and review of documentation provided CoreCivic PREA Overview –Facilitator's Guide, 4-2A-Training Activity Attendance roster, 14-2A-Policy Acknowledgment, and 14-2H-Self Declaration of Sexual Abuse/ Sexual Harassment for Contractor sign-in sheets, signed acknowledgement forms, training curriculums and handouts; the following delineates the audit findings regarding this standard:

115.32 (a) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 8) mandates that Whiteville Correctional Facility ensures all volunteers and contractors who have contact with inmates have been trained on their responsibilities under Whiteville Correctional Facility's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. CoreCivic PREA Overview –Facilitator's Guide outlines the training given to all volunteers and contractors. Interviews

with two contractors and two volunteers confirmed they had been properly trained. Signature on the CoreCivic PREA Policy Acknowledgment and/or Training Acknowledgement Form 14-2A acknowledges each volunteer and contractor has received and understands the PREA training provided. Volunteers and contractors also sign the "Training Activity Enrollment/Attendance Roster Form 4-2A). Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.32 (b) The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates are notified of Core Civics' zero-tolerance policy regarding sexual abuse and sexual harassment and their requirements to report such incidents. Review of training records also confirmed the training. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.32 (c) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 8) mandates that Whiteville Correctional Facility documents through signature on the CoreCivic PREA Policy Acknowledgment and/or Training Acknowledgement Form 14-2A, that volunteers and contractors understand the training they have received. Volunteers and contractors also sign the "Training Activity Enrollment/Attendance Roster Form 4-2A). Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.33: Inmate education

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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 the comprehensive education referenced in 115.33(b)? ☒ 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*)

Instructions for Overall Compliance Determination Narrative

Based on review of the CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (pages 15 and 16), the Inmate Handbook, Preventing Sexual Abuse Brochure 14-2AA, Facility Orientation, PREA Posters, and the PREA video; as well as interviews with random inmates, case managers and staff. The following delineates the audit findings regarding this standard:

115.33 (a) During the intake process, inmates receive information explaining Whiteville Correctional Facility's zero-tolerance policy (CoreCivic policy 14.2 Sexual Abuse, Prevention and Response) regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Inmate sign the Orientation Acknowledgment Form CR-2110, that they have received the Preventing Sexual Abuse Brochure which is available in both English and Spanish. This was confirmed during an interview with the Case Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.33 (b) Within 30 days of intake, Whiteville Correctional Facility provides comprehensive education to the inmates, administered by video, regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. The additional education is provided in the form of a video (both English and Spanish). The video "PREA- What you need to know" was created by the PREA Resource Center and Just Detention International. This practice is outlined in the CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 15). Classification file review that forty out of forty inmates signed stated they had seen the video. Thirty six out of forty inmates interviewed indicated they remembered the video. File review showed that the remaining four inmates signed, stated they had seen the PREA educational video. Inmates sign the Prison Rape Elimination Act (PREA Video Log). Administrators routinely conduct town hall meetings to discuss PREA; the auditor was provided meeting notes from one such town hall meeting. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.33 (c) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 15) mandates that Whiteville Correctional Facility provides such education within one year of the effective date of the PREA standards to all its inmates, and provides education to inmates upon transfer as required by this standard. This was confirmed during an interview with the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.33 (d) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 15) mandates that Whiteville Correctional Facility provides inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The facility has an agreement with Language Line Services. PREA handouts, PREA postings, PREA education video, and the inmate handbook are provided in both English and Spanish. The facility has two working TDD phones. There were no blind/low vision and one deaf/hard of hearing inmate incarcerated at the time of the onsite visit. The hard of hearing inmates demonstrated knowledge of the agencies zero tolerance against sexual abuse, how to report sexual abuse and stated he felt safe in the facility. Mentally deficient inmates are assisted by Medical and Mental Health Staff. Three limited English proficient inmates had documentation in their intake file showing they all had received a PREA Brochure, properly screened and watched the PREA education video. All LEP inmates stated they felt safe in the facility. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.33 (e) There was documentation provided of inmates participation in PREA educational sessions as required by this part of the standard. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.33 (f) Whiteville Correctional Facility does provide the inmates with posters, pamphlets, and an inmate handbook in English and Spanish outlining the zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Inmates/detainees are given the "Preventing Sexual Abuse and Misconduct Brochure. The agency has "I Have a Right to Know" Posters located in all common areas of the facility. Records review showed that three out of three LEP inmates received education information in a Spanish format; all three LEP inmates stated they felt safe in the facility. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.34: Specialized training: Investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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 receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ 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*)

Instructions for Overall Compliance Determination Narrative

Based on review of the CoreCivic Policy 14-2 Sexual Abuse Prevention and Response (pages 7-8) Whiteville Correctional Facility practices as well as the MOU provided, Investigators training file review and investigative staff interviews. The following delineates the audit findings regarding this standard:

115.34 (a) In addition to the general training provided to all employees Whiteville Correctional Facility ensures that the PREA Administrative Investigator received training in conducting investigations in confinement settings. This was confirmed during a review of the Investigation's training records. The Whiteville Correctional Facility has a Memorandum of Understanding with the Whiteville Police Department and TDOC OIC to conduct all criminal investigations. The MOU requires the Whiteville Police Department Investigator to have specialized training for sexual assault in a confinement setting. A former Marine, the Facility PREA Investigator began his career in Corrections in 1995. He is also the current Chief of Security. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.34 (b) Specialized training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. A former Marine, the Facility PREA Investigator began his career in Corrections in 1995. He is also the current Chief of Security. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.34 (c) Whiteville Correctional Facility maintains documentation that Whiteville Police Department investigators have completed the required specialized training in conducting sexual abuse investigations. The Whiteville Correctional Facility has a Memorandum of Understanding with the Whiteville Police Department to conduct all criminal investigations. The MOU requires the Whiteville Police Department Investigator to have specialized training for sexual assault in a confinement setting. The auditor found the facility PREA Administrative Investigator to be very knowledgeable and well versed in the PREA standards as they pertain to investigations and evidentially standards.

The facility PREA Administrative Investigator has completed specialized training of Sexual Assault in a Confinement setting through Relias. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

- 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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

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 *or* the agency does not employ medical staff.) ☒ 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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) ☒ Yes ☐ No ☐ NA

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)
  ☒ Yes ☐ No ☐ NA

- Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.) ☒ Yes ☐ 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

Based on review of the CoreCivic Policy 14-2 Sexual Abuse Prevention and Response (page 8) Whiteville Correctional Facility practices, as well as the PREA Specialized Medical/Mental Health training records, training file review and staff interviews; the following delineates the audit findings regarding this standard:

115.35 (a) CoreCivic provides PREA Specialized Medical/Mental Health training video from the PREA Resource Center, curriculum provided, training file Whiteville Correctional Facility review and staff interviews revealed the agency has provided specialized training to all its medical and mental health staff on how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how to report allegations of sexual abuse and sexual harassment. Review of two training records and interviews with two CoreCivic Medical Staff members confirmed this practice. Employees completing the training sign the "Training/Activity Attendance Roster" form 4-2A. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.35 (b) The medical staff at this facility does not conduct forensic exams. This was confirmed during interviews with the Warden and the PREA Manager. Whiteville Correctional Facility has a Memorandum of Understanding with Jackson-Madison County General Hospital for SANE/SAFE examinations. Therefore, this part of the standard is not applicable to this facility.

115.35 (c) The agency maintains documentation that all medical and mental health practitioners have received specialized training. The training is two courses from NCCD entitled; PREA medical and mental care standards" and CoreCivic PREA Specialty Training. Review of two training records and interviews with two CoreCivic staff members confirmed this practice. Employees completing the training sign the "Training/Activity Attendance Roster" form 4-2A. The Auditor was provided with a

spreadsheet showing in-service completion or all medical and mental health staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.35 (d) Medical and mental health care practitioners with CoreCivic also receive the annual training mandated for all employees, contractors, and volunteers. Employees completing the training sign the "Training/Activity Attendance Roster" form 4-2A. Review of two training records and interviews with two CoreCivic staff members confirmed this practice. The Auditor was provided with a spreadsheet showing in-service completion or all medical and mental health staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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, as 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, as 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, as 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 an incident of sexual abuse? ☒ Yes ☐ No

- Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?
  ☒ Yes ☐ 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*)

Instructions for Overall Compliance Determination Narrative

Based on TDOC Policy 502.06.1 PREA Screening, Classification, and Monitoring, CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (pages 13-14), inmate and staff interviews, inmate file reviews, CR-2178, Intake Health Questionnaire with CR-3431, Mental Health Referral, and a review of the Whiteville Correctional Facility Sexual Abuse Screening Tool 14-2B; the following delineates the audit findings regarding this standard:

115.41 (a) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 13) mandates that Whiteville Correctional Facility ensures that all inmates are assessed during intake and upon transfer to another facility for risk of being sexually abused by other inmates or sexually abusive toward other inmates. Ten out of ten inmate records confirmed this practice. Inmates sign a facility property receipt, indicating they have received the facility's brochure on PREA. The brochure outlines basic information on the topics of sexual assault and sexual harassment, the agency's zero

tolerance, reporting procedures and the victim advocacy support available. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (b) The Whiteville Correctional Facility provided documentation proving compliance with the standard that all inmates are screened for their risk of being sexually abused by other inmates or being sexually abusive toward other inmates normally upon intake but no later than 72 hours of arrival at the facility. This process is documented on the PREA Screening Form. Ten out of ten inmate records confirmed this practice. Thirty Five out of forty inmates remembered being screening upon intake. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (c) Based on the documentation provided and inmate file reviews the facility utilizes an objective screening instrument that covers all aspects of this standard. Ten out of ten inmate records confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (d) The intake screening instrument Sexual Abuse Screening Tool 14-2B considers, 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;
(2) The age of the inmate;
(3) The physical build of the inmate;
(4) Whether the inmate has previously been incarcerated;
(5) Whether the inmate's criminal history is exclusively nonviolent;
(6) Whether the inmate has prior convictions for sex offenses against an adult or child;
(7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
(8) Whether the inmate has previously experienced sexual victimization;
(9) The inmate's own perception of vulnerability; and
(10) Whether the inmate is detained solely for civil immigration purposes.
Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (e) The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to Whiteville Correctional Facility PREA Screening Form. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (f) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 10) mandates within 30 days from the inmate's arrival, the Whiteville Correctional Facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by Whiteville Correctional Facility since the intake screening. The Program Staff completes a follow-up interview with each inmate within 30 days to determine if additional information is available. This process is documented on the Whiteville Correctional Facility Reassessment form. Ten out of ten inmate records confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (g) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 14) mandates Whiteville Correctional Facility will reassess an inmate's risk level when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bares on the inmate's risk

of sexual victimization or abusiveness. A review of rescreening showed there was a clear handoff from the Screening Staff and the Mental Health staff, when circumstances warranted a reassessment. This process is outlined in TDOC Policy 113.82, Mental Health Referral Triage Process. Two such rescreenings were reviewed during the onsite visit. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (h) TDOC Policy 502.06.1 PREA Screening, Classification, and Monitoring (page 2) and CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 14) mandates Whiteville Correctional Facility does not discipline inmates for refusing to answer screening questions or not disclosing complete information. This was confirmed during an interview with the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (i) Whiteville Correctional Facility implements appropriate controls on the dissemination 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. Based on policy review, interview with the Assistant Warden and interviews with the staff responsible for completing the screening, all information gathered on the screening instrument is restricted to staff making housing, work and program assignments. Staff responsible for inmate movements do have assess to see who listed as aggressor and/or a victim. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) ☒ Yes ☐ No ☐ NA

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the

placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) ☒ Yes ☐ No ☐ NA

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) ☐ 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

Based on CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 13-18), TDOC Policy 502.06.1 PREA Screening, Classification, and Monitoring (pages 2-3), TDOC Policy 113.37, inmate and staff interviews, file review, and a review of the Whiteville Correctional Facility PREA Screening Form; the following delineates the audit findings regarding this standard:

115.42 (a) Whiteville Correctional Facility uses information from the risk screening to decide housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. This was confirmed during a review of policy and during an interview with the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.42 (b) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (pages 13-18) requires Whiteville Correctional Facility makes individualized determinations about how to ensure the safety of each inmate. This was confirmed during a review of policy and during an interview with the PREA Manager. TDOC Policy 502.06.1 PREA Screening, Classification, and Monitoring (pages 2-3), mandates decisions concerning individual housing assignments and group activities for inmates who enter TDOC and are identified as Sexual Aggressors or Sexual Victims are the responsibility of the unit management team. This information is strictly need-to-know and housing, cell assignments, work education and program assignments shall be made with a goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually aggressive. If behavioral health intervention is indicated, a referral shall be made in accordance with Policy #113.82, utilizing Institutional Health Services Referral, CR-3431. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.42 (c) Whiteville Correctional Facility outlines the procedures to be followed in deciding whether to assign a transgender inmate to a facility for male or female inmates, and the process for making

housing and programming assignments, on case by case basis as required by this standard. Based on interview with the three self-identified LBGTI inmates housed at this facility the inmate confirmed feeling safe at the facility and felt staff considered the inmate's safety when making housing and programming assignments. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.42 (d) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 12) documents Whiteville Correctional Facility procedures for placement and programming assignments of each transgender or intersex inmate being reassessed at least twice per year to review any threats to safety experienced by the inmate as required by this standard. Based on interviews with the three self-reported LBGTI inmates housed at this facility the inmate confirmed feeling safe at the facility and felt staff considered the inmate's safety when making housing and programming assignments. The inmates also confirmed the PREA Manager always inquiries about the inmate's safety. Documentation provided revealed that a review was conducted and documented every six months as required. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.42 (e) Whiteville Correctional Facility requires that a transgender and intersex inmate's own views regarding their own safety be given serious consideration. Based on interview with three self-identified LBGTI inmates housed at this facility the inmate confirmed feeling safe at the facility and felt staff considered the inmate's safety regarding housing assignments. Whiteville Correctional Facility utilizes TDOC software, ETOMIS to document and secure housing information. Once a transgender inmate is processed into the facility, a multi-disciplinary team reviews the inmates housing, programming and worker status based on the inmates own views, medical and mental health history, prior institutional behavior record and programming needs. The multi-disciplinary team will then make than individualized assessment. Inmates identified as transgender or intersex shall be considered on a case-by-case basis. (TDOC Policy #113.37) These identified inmates shall be reclassified every six months by the assigned counselor to review any threats to safety experienced by the inmate. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.42 (f) CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 18) requires that Whiteville Correctional Facility transgender and intersex inmates be given the opportunity to shower separately from other inmates. The three self-identified LBGTI inmates confirmed during interview with this auditor being given the opportunity to shower separately. The decision for housing and programs placement for a transgender inmate is documented on the Whiteville Correctional Facility's the facility's electronic records. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.42 (g) CoreCivic policy 14.2 Sexual Abuse, Prevention and Response (page 16) stipulates that The establishment of a unit or pod solely dedicated to the housing of LGBTI and/or Gender Non-Conforming inmates/detainees is strictly prohibited unless required by consent decree, court order or other comparable legal authority. Whiteville Correctional Facility does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such 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 such inmates. This was confirmed by the auditor's observation during the onsite visit,

interview with three self-identified LBGTI inmates an interview with the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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 any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) ☐ Yes ☐ No ☒ NA

- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) ☐ Yes ☐ No ☒ NA

- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) ☐ Yes ☐ No ☒ NA

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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic 14.2 Sexual Abuse, Prevention and Response (pages 16-17), staff interviews, inmate interviews, and documentation review; the following delineates the audit findings regarding this standard:

115.43 (a) CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 16) and Inmates/detainees at high risk for sexual victimization shall not be placed 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. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate/detainee in involuntary segregated housing for less than twenty-four (24) hours while completing the assessment. This policy outlines the procedures to ensure compliance with this standard. Staff and inmate interviews revealed no incidents of involuntary segregated housing being used for this purpose during the past 12 months at this facility. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.43 (b) CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 16) stipulates that Inmates/detainees placed in segregated housing for this purpose shall have access to programs,

privileges, education, and work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the following: the opportunities that have been limited; the duration of the limitation; the reasons for such limitations. This was confirmed during an interview with the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.43 (c) CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 17) stipulates that Whiteville Correctional Facility assigns such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment does not ordinarily exceed a period of 30 days. Staff and inmate interviews revealed no incidents of involuntary segregated housing being used for this purpose during the past 12 months at this facility. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

REPORTING

Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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? (N/A if the facility *never* houses inmates detained solely for civil immigration purposes) ☒ Yes ☐ No ☐ NA

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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic 14.2 Sexual Abuse, Prevention and Response (pages 18-19), the Inmate Handbook, PREA Brochures, and posters provided to inmates were utilized to verify compliance with this standard. The following delineates the audit findings regarding this standard:

115.51 (a) Whiteville Correctional Facility provides multiple internal ways for inmates to report incidents of abuse or harassment: the includes;

- Submit a request to meet with Health Services staff
- Call the facility's twenty four (24) hour toll-free notification number
- Verbally telling any employee, including the facility Chaplain
- Forward a letter, sealed and marked "confidential" to the Warden
- Forwarding a letter to the CoreCivic Managing Director, Facility Operations, at the following address: 10 Burton Hills Boulevard Nashville, TN 37215

Posters are located in each housing unit and in all common areas both in English and Spanish outlining the multiple processes in which inmate can report sexual abuse and/or sexual harassment. The auditor successfully tested the phone system during the facility tour. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.51 (b) Whiteville Correctional Facility provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of Whiteville Correctional Facility,

and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. The Whiteville Correctional Facility has by Memorandum of Understanding provided the address and phone number for WRAP - WO/Men's Resources and Rape Assistance Program to the inmates satisfying the requirements of this standard. The auditor successfully tested the phone system during the facility tour. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.51 (c) CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 19) requires all staff to accept reports made verbally, in writing, anonymously and from third parties. All allegations shall be promptly documented in an incident report and reported to the supervisor. All staff, volunteers and contractors have been trained in the mandatory reporting laws in the State of Tennessee; all confirmed this practice during interviews. This philosophy was collaborated during review of the agency's PREA investigation files. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.51 (d) CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 19) Whiteville Correctional Facility staff may privately report sexual abuse and sexual harassment to the Warden or the PREA external telephone number or submit a letter labeled "confidential" to the Warden. Posters are located in all housing units, indicating how to report sexual abuse. This information includes the telephone number and address of the WRAP - WO/Men's Resources and Rape Assistance Program. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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 X No

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.) X 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.) X 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.) X 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.) X 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.) X 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.)
  X 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.) X 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.)
  X 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.) X 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.)
  X 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.) X 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.).
  X 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.) X 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.) X 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.) X 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.) X 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.)
  X 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.) X 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

Based on TDOC Policy 501.01 Inmate Grievance Procedures (pages 6-7), the Inmate Handbook, PREA Brochures, and posters provided to inmates were utilized to verify compliance with this standard; The following delineates the audit findings regarding this standard:

115.52 (a) Tennessee Department of Corrections policy 501.01 Inmate Grievance Procedures (page 6), the agency investigates any report of sexual abuse and takes appropriate actions whether or not

such information is received in the form of a grievance. During the past 12 months, Whiteville Correctional Facility has not received a grievance concerning sexual abuse. Interview with the PREA Manager confirms this process. The agency is found to be in compliance with this section of the standard.

115.52 (b) The agency does not impose a time limit on when an offenders/detainee may submit a grievance regarding an allegation of sexual abuse. Interview with the PREA Manager confirms this practice. Therefore, the agency complies with this section of the standard.

115.52 (c) The Tennessee Department of Corrections policy 501.01, Inmate Grievance Procedures, states the agency will ensure that an offenders/detainees alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. During the past 12 months, Whiteville Correctional Facility has not received a grievance concerning sexual abuse. Additionally, such grievances will not be referred to the staff member who is the subject of the complaint. Therefore, the agency is in compliance.

115.52 (d) According to policy Tennessee Department of Corrections 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 (A WT) 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. TDOC 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 A WT/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. (See subsection (5) below regarding emergency PREA grievances). During the past 12 months, Whiteville Correctional Facility has not received a grievance concerning sexual abuse. Interview with the PREA Manager reiterates this process; therefore the agency is found to be in compliance with section of the standard.

115.52 (e) Tennessee Department of Corrections policy 501.01, states third parties (including fellow inmates, staff members, family members, attorney's, 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 files such a grievance on behalf of an inmate, that inmate shall agree to have the grievance filed on their behalf and document such on the Inmate Grievance, CR-1394. The inmate shall be required to personally pursue any subsequent steps in the grievance process. If the inmate declines to have the grievance processed on his/her behalf, the inmate' s decision shall be documented on the original Inmate Grievance, CR-1394, and signed by the inmate. During the past 12 months, Whiteville Correctional Facility has not received a grievance concerning sexual abuse. The PREA Manager confirmed this process. Therefore, the agency compiles with this section of the standard.

115.52 (f) The Tennessee Department of Corrections policy 501.01 (page 7) states after receiving an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse, the grievance chairperson shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to the PREA Manager and the Facility Investigator 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

(PAS) 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. Timeframes in (3) above still apply after any immediate corrective action has been implemented. 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." During the past 12 months, Whiteville Correctional Facility has not received a grievance concerning sexual abuse. Interview with the PREA Manager confirms this practice; therefore the agency complies with this standard.

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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? (N/A if the facility *never* has persons detained solely for civil immigration purposes.) ☒ Yes ☐ No ☐ NA

- 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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic Policy 14-2 Sexual Abuse Prevention and Response (page 11), Whiteville Correctional Facility practices, staff interviews, inmate interviews, MOU with the WRAP - WO/Men's Resources and Rape Assistance Program and documentation review; the following delineates the audit findings regarding this standard:

115.53 (a) The agency has entered into a Memorandum of Understanding with the WRAP - WO/Men's Resources and Rape Assistance Program which agrees to provide confidential outside victim advocacies services to the inmates at Whiteville Correctional Facility. The mailing address and telephone number for this agency are made available to all inmates at the facility. Whiteville Correctional Facility enables reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. The auditor successfully tested the phone system. The person, who answered the call, walked the auditor through the process if an actual inmate had contacted them for assistance. The Sexual Assault representative stated they did utilize the interpreter services if they received a call from a limited English Proficient inmate. The services of these victim advocates have been requested and utilized once by an alleged inmate inmates during this audit cycle, verified by phone call. Inmates/Detainees are given this information upon intake on the Orientation Checklist. CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (page 11) outlines this process. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.53 (b) Whiteville Correctional Facility informs 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. Inmates are informed of their right to remain anonymous and the mandatory reporting laws in the State of Tennessee. All calls to the WRAP - WO/Men's Resources and Rape Assistance Program are not recorded. This was confirmed by the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.53 (c) Whiteville Correctional Facility maintains a Memorandum of Understanding with the WRAP - WO/Men's Resources and Rape Assistance Program. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on the review of CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 20), Whiteville Correctional Facility practices as well as a review of the agency website outlining third party reporting; the following delineates the audit findings regarding this standard:

115.54 (a) CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 20) mandates that Whiteville Correctional Facility provides multiple methods for receiving third-party reports of sexual abuse and sexual harassment on the agency's website at: https://www.corecivic.com/faciities/central-Tennessee-Whiteville-correctional complex. Methods include; mailing a letter to the warden, mailing a letter to CoreCivic, mailing a letter to the WRAP - WO/Men's Resources and Rape Assistance Program, Tennessee Department of Corrections, or call the facility directly. The information available on the website explains how to report sexual abuse and sexual harassment on behalf of an inmate. The facility takes all reports seriously no matter how they are received and investigates each reported incident. Review of PREA investigation files revealed that two investigations was started and completed based on third party reports. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

OFFICIAL RESPONSE FOLLOWING AN INMA TE REPORT

Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic 14.2 Sexual Abuse, Prevention and Response (pages 18-20), Sexual Abuse Incident Check Sheet Review Form 14-2F, staff interviews, and documentation provided, the following delineates the audit findings regarding this standard:

115.61 (a) CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 18), requires 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 Whiteville Correctional Facility; 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. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.61 (b) CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 19) stipulates that Whiteville Correctional Facility requires apart from reporting to designated supervisors or officials, staff do not reveal 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. Sexual Abuse Incident Check Sheet Review Form 14-2F is completed on each PREA allegation. This was reiterated during an interview with the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.61 (c) Whiteville Correctional Facility requires medical and mental health practitioners to report sexual abuse immediately to the security staff supervisor. Medical and mental health practitioners are required to inform the inmates of their duty to report, and the limitations of confidentially, at the initiation of services. This was confirmed during interviews with two CoreCivic Medical staff; each confirmed their knowledge of mandatory reporting laws in the state of Tennessee. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

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, Whiteville Correctional Facility reports the allegation to the designated state or local services agency. This was confirmed by the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.61 (e) Whiteville Correctional Facility reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the PREA investigator as required. File review of twenty-six PREA investigations confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic 14.2 Sexual Abuse, Prevention and Response Policy (page 19), staff interviews, and documentation provided; the following delineates the audit findings regarding this standard:

115.62 (a) CoreCivic 14.2 Sexual Abuse, Prevention and Response Policy (page 19) and staff training requires all staff to take immediate action and staff acknowledged during their interviews the requirement of all staff to protect inmates when it is learned that an inmate at the Whiteville Correctional Facility is subject to a substantial risk of imminent sexual abuse. The review of twenty-six PREA investigation files clearly illustrated that everyone from line staff, intermediate supervisors and the SART team play specific roles in dealing with PREA allegations. Whiteville Correctional Facility maintains an update "keep separate" list at all times; this list is made available to all staff charged with the duty of housing movements. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 22), staff interviews, and documentation provided; the following delineates the audit findings regarding this standard:

115.63 (a) CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 22) mandates that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of Whiteville Correctional Facility that received the allegation notifies the head of the facility or appropriate office where the alleged abuse occurred. This process is documented on memorandum. This process was corroborated during interviews with the PREA Manager and the PREA Investigator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.63 (b) and (c) CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 22) states that notification is provided as soon as possible, but no later than 72 hours after receiving the allegation, and all actions are thoroughly documented. All such contacts and notifications shall be documented on the 5-1 B Notice to Administration; including the allegation, any details learned from contact with the site where the alleged abuse took place, and the facility's response to the allegation. Documentation reviewed revealed that one such notification have occurred during the past twelve months. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.63 (d) CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 22) mandates that upon receiving a call from an outside facility that an inmate had been sexually abused while in the custody of the Whiteville Correctional Facility. The allegation is referred immediately to the PREA Investigator to be investigated. This was confirmed during interviews with the PREA Manager and the PREA Investigator. The PREA Investigator stated he had received one notification from another agency in the past twelve months. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic 14.2 Sexual Abuse, Prevention and Response (pages 20-21)), staff interviews, and documentation provided; the following delineates the audit findings regarding this standard:

115.64 (a) CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 20) outlines the responsibilities of all staff members receiving an allegation of sexual abuse to follow these guidelines:

(1) Separate the alleged victim and abuser;
(2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;
(3) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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; and
(4) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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.

Whiteville Correctional Facility employees are required to keep a PREA First Responder Card on their person while on duty. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.64 (b) CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 21) mandates when the first staff responder is not a security staff member, they shall advise the alleged victim not to take any actions that could destroy physical evidence, and then notify security staff immediately. Whiteville Correctional Facility employees are required to keep a PREA First Responder Card on their person while on duty. The auditor confirmed compliance based on interviews with and training records of two volunteers and two contract employees. Ten out of ten random staff interviews confirmed staff are training on their role and responsibility of a first responder. Two first responders were also interviewed; it was clear each understand the process as it is outlined in CoreCivic 14-2 policy. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic Policy 14-2 Sexual Abuse, Prevention and Response (page 11), staff interviews, and documentation provided, the following delineates the audit findings regarding this standard:

115.65 (a) CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 11) outlines states Whiteville Correctional Facility has a very comprehensive written plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators and facility leadership. Policy 14-2 outlines each SART member and their responsibilities during an alleged PREA incident. The plan clearly defines the roles and responsibilities of each person involved and the procedures to be followed in detail. Interviews with SART members confirmed their knowledge of the response plan. Employees are issued a First Responder Card; which outlines the initial response to an alleged sexual assault. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 30), interviews with agency head and the PREA Manager, collective bargaining agreement, and documentation provided. The following delineates the audit findings regarding this standard:

115.66 (a) CoreCivic 14.2 Sexual Abuse, Prevention and Response Policy (page 30) states employees are subject to disciplinary sanctions up to termination for violating Whiteville Correctional Facility policies on sexual abuse and sexual harassment. The Whiteville Correctional Facility has not entered into any collective bargaining agreements during this audit cycle. This was confirmed during an interview with the agency head and PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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 inmates 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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 12), staff interviews, inmate interviews, PREA Retaliation Monitoring Report 14-2D, and documentation provided; the following delineates the audit findings regarding this standard:

115.67 (a) CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 12) policy to protect all inmates and staff at Whiteville Correctional Facility who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff, and designates which staff members or departments are charged with monitoring retaliation. Monitoring is documented on PREA Retaliation Monitoring Report 14-2D. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.67 (b) Whiteville Correctional Facility has multiple protection measures, such as housing changes or transfers for inmates, victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. Monitoring is documented on PREA Retaliation Monitoring Report 14-2D. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.67 (c) CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 12) calls for at least 90 days following a report of sexual abuse, Whiteville Correctional Facility monitors the conduct and treatment of inmates or staff who reported the sexual abuse and 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, and act promptly to remedy any such retaliation. There is periodic status checks performed and documented. Whiteville Correctional Facility's monitoring includes any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. Such monitoring continues beyond 90 days if the initial monitoring indicates a continuing need. Monitoring is documented on PREA Retaliation Monitoring Report 14-2D. The auditor reviewed several retaliation monitoring reports and found each to be thorough and followed policy and procedure. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.67 (d), (e), (f) If any other individual who cooperates with an investigation expresses a fear of retaliation, Whiteville Correctional Facility takes appropriate measures to protect that individual against retaliation. Whiteville Correctional Facility's obligation to monitor shall terminate if the agency determines that the allegation is unfounded. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 16), staff interviews, inmate interviews, PREA Retaliation Monitoring Report 14-2D, and documentation provided; the following delineates the audit findings regarding this standard:

115.68 (a) CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 12) states that Whiteville Correctional Facility prohibits offenders who have alleged sexual abuse to be placed in involuntary segregated housing. If segregated housing is used, the same provisions as outlined in policy Interviews with the PREA Manager and segregation staff revealed that involuntary segregation has not been used for this purpose in the past 12 months. The PREA Manger stated that if separation was required to protect the offender, they would be placed in segregation for no longer than 72 hours. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based upon review of the CoreCivic 14.2 Sexual Abuse, Prevention and Response (pages 25-27), CoreCivic Records Retention Schedule, investigative staff interviews, training certificates, investigative reports, as well as interviews with the PREA Manager, and the PREA Compliance Manager, the following delineates the audit findings regarding this standard:

115.71 (a) Whiteville Police Department PREA investigators conduct an investigation immediately when notified of an allegation of sexual abuse and sexual harassment. Whiteville Correctional Facility has a Memorandum of Understanding with the Whiteville Police Department to investigation all criminal PREA allegations. The investigative files were reviewed and it appeared that the investigations were conducted promptly, documented thoroughly, and objectively for all allegations, including third-party, and anonymous reports. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (b) Based on training curriculums provided, investigators training file review, and investigative staff interviews, it was evident the facility provided, in addition to the general training received by all employees, specialized training to all its investigators. This Relias training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (c) Whiteville Police Department PREA Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator. This was confirmed during review of twenty-six investigation files and during an interview with the PREA Investigator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (d) CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 20) stipulates, when the quality of evidence appears to support criminal prosecution, Whiteville Correctional Facility refers the case to the Whiteville Police Department and TDOC OIC for the criminal investigation. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (e) The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and is not determined by the person's status as inmate or staff. The inmate who alleges sexual

abuse is not required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. This was confirmed during review of twenty-six investigation files and during an interview with the PREA Investigator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (f) Whiteville Correctional Facility administrative investigations include efforts to determine whether staff actions or failures to act contributed to the abuse; and are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. This was confirmed during review of twenty-six investigation files and during an interview with the PREA Investigator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (g) Whiteville Correctional Facility criminal investigations are documented by the Whiteville Police Department and TDOC OIC are in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. This was confirmed during review of twenty-six investigation files and during an interview with the PREA Investigator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (h) Whiteville Correctional Facility refers all allegations to the Whiteville Police Department PREA Investigator for investigation and prosecution when warranted. Whiteville Correctional Facility has a Memorandum of Understanding with the Whiteville Police Department to investigation all criminal PREA allegations. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (i) Whiteville Correctional Facility retains all written reports for as long as the alleged abuser is incarcerated or employed by Whiteville Correctional Facility, plus five years. This is stipulated in the CoreCivic Policy Records Retention Schedule, 1-15. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (j) The departure of the alleged abuser or victim from employment or control of the Whiteville Correctional Facility or agency does not provide a basis for terminating an investigation. This was confirmed during review of twenty-six investigation files and during an interview with the PREA Investigator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (k) The Whiteville Police Department PREA Investigator conducts criminal sexual abuse investigations pursuant to the requirements of this standard. Whiteville Correctional Facility Memorandum of Understanding with the Whiteville Police Department outlines the requirements of the criminal investigation and complies with all aspects of this standard. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (l) Whiteville Correctional Facility refers all criminal cases to the Whiteville Police Department PREA Investigator and cooperates with their investigators during the entire investigation. The facility remains informed of the progress of the investigation through communication between the facility investigator and the Whiteville Police Department PREA Investigator agent handling the case. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

PREA Investigation Files from the past 12 months (26)

Case Number	*Aggressor vs. Victim	Case Type	Investigation Outcome	Referred for Prosecution	Inmate Notified
300	EOI	Assault	Unsubstantiated	No	Yes
319	EOI	Assault	Unsubstantiated	No	Yes
340	EOI	Assault	Unfounded	Yes	Yes
346	EOI	Assault	Unsubstantiated	No	Yes
386	IOI	Assault	Unfounded	No	Yes
417	EOI	Assault	Unfounded	No	Yes
436	IOI	Assault	Unsubstantiated	No	Yes
444	IOI	Assault	Unsubstantiated	No	Yes
446	IOI	Assault	Unsubstantiated	No	Yes
468	IOI	Assault	Unsubstantiated	No	Yes
570	IOI	Assault	Unsubstantiated	No	Yes
588	IOI	Assault	Unsubstantiated	No	Yes
648	IOI	Harassment	Unfounded	No	Yes
679	IOI	Harassment	Unfounded	No	Yes
029	IOI	Assault	Unsubstantiated	No	Yes
033	IOI	Assault	Unfounded	No	Yes
079	EOI	Assault	*Pending*	*Yes*	Yes
095	IOI	Assault	Unfounded	No	Yes
109	EOI	Harassment	Unsubstantiated	No	Yes
111	IOI	Assault	*Pending*	*Yes*	Yes
174	IOI	Assault	Unfounded	No	Yes
184	EOI	Harassment	Unfounded	No	Yes
200	EOI	Assault	Substantiated	No	Yes
214	EOI	Assault	Substantiated	No	Yes
217	IOI	Assault	Unfounded	No	Yes
218	EOI	Assault	Unfounded	No	Yes

* EOI means Employee on Inmate and IOI means Inmate on Inmate

Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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

Based upon review of CoreCivic 14.2 Sexual Abuse, Prevention and Response and investigative staff interviews; the following delineates the audit findings regarding this standard:

CoreCivic 14.2 Sexual Abuse, Prevention and Response Policy requires Whiteville Correctional Facility imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. This was reiterated during an interview with the PREA Investigator and evident during PREA Investigation File reviews. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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 inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate 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 inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate 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 inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate 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 inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate 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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic 14.2 Sexual Abuse, Prevention and Response (pages 27-28), Inmate/Detainee PREA Allegation Status Notification Form 14-2E documentation provided, and staff interviews; the following delineates the audit findings regarding this standard:

115.73 (a) Based on CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 27), it was confirmed that following an investigation into an inmate's allegation he/she suffered sexual abuse in the facility, the inmate was to be informed whether the allegation had been determined to be substantiated, unsubstantiated, or unfounded. The documentation provided confirmed the inmates were provided this notification on the Whiteville Correctional Facility Inmate/Detainee PREA Allegation Status Notification Form 14-2E. The inmates are required to sign the form documenting acknowledgement of this notification as required. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.73 (b) The agency does request all relevant information from the criminal investigation conducted by the Whiteville Police Department and TDOC OIC in order to inform the inmate as required by this standard. Whiteville Correctional Facility Memorandum of Understanding with the Whiteville Police Department outlines the requirements of the criminal investigation and complies with all aspects of this standard. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.73 (c) Based on Whiteville Correctional Facility practice and documentation provided, it was confirmed that following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) 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 agency learns that the staff member has been indicted on a charge related to sexual abuse within the Whiteville Correctional Facility; or
(4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the Whiteville Correctional Facility

The documentation provided confirmed the inmates were provided this notification on the Whiteville Correctional Facility Inmate/Detainee PREA Allegation Status Notification Form 14-2E. The inmates are required to sign the form documenting acknowledgement of this notification as required. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.73 (d) Based on CoreCivic 14.2 Sexual Abuse, Prevention and Response (page 28), following an inmate's allegation they had been sexually abused by another inmate, Whiteville Correctional Facility subsequently informs the alleged victim whenever the facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or Whiteville Correctional Facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. The documentation provided confirmed the inmates were provided this notification on the Whiteville Correctional Facility Inmate/Detainee PREA Allegation Status Notification Form 14-2E. The inmates are required to sign the form documenting acknowledgement of this notification as required. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.73 (e) Based on CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 28), all inmate/detainee notifications or attempted notifications shall be documented on the 14-2E Inmate Allegation Status Notification. The inmate/detainee shall sign the 14-2E Inmate Allegation Status Notification, verifying that such notification has been received. The signed 14-2E Inmate Allegation Status Notification shall be filed in the inmate/detainee's institutional file. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.73 (f) Based on CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 28), outlines the agency's obligation to report under this standard terminates if the inmate is released from Whiteville Correctional Facility's custody. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

PREA Investigation Files from the past 12 months (26)

Case Number	*Aggressor vs. Victim	Case Type	Investigation Outcome	Referred for Prosecution	Inmate Notified
300	EOI	Assault	Unsubstantiated	No	Yes
319	EOI	Assault	Unsubstantiated	No	Yes
340	EOI	Assault	Unfounded	Yes	Yes
346	EOI	Assault	Unsubstantiated	No	Yes
386	IOI	Assault	Unfounded	No	Yes
417	EOI	Assault	Unfounded	No	Yes
436	IOI	Assault	Unsubstantiated	No	Yes
444	IOI	Assault	Unsubstantiated	No	Yes
446	IOI	Assault	Unsubstantiated	No	Yes
468	IOI	Assault	Unsubstantiated	No	Yes
570	IOI	Assault	Unsubstantiated	No	Yes
588	IOI	Assault	Unsubstantiated	No	Yes
648	IOI	Harassment	Unfounded	No	Yes
679	IOI	Harassment	Unfounded	No	Yes
029	IOI	Assault	Unsubstantiated	No	Yes
033	IOI	Assault	Unfounded	No	Yes
079	EOI	Assault	*Pending*	*Yes*	Yes
095	IOI	Assault	Unfounded	No	Yes
109	EOI	Harassment	Unsubstantiated	No	Yes
111	IOI	Assault	*Pending*	*Yes*	Yes
174	IOI	Assault	Unfounded	No	Yes
184	EOI	Harassment	Unfounded	No	Yes
200	EOI	Assault	Substantiated	No	Yes
214	EOI	Assault	Substantiated	No	Yes
217	IOI	Assault	Unfounded	No	Yes
218	EOI	Assault	Unfounded	No	Yes

* EOI means Employee on Inmate and IOI means Inmate on Inmate

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based upon review of Based on CoreCivic 14.2 Sexual Abuse, Prevention and Response (pages 29-30), documentation provided, and PREA Manager interview; the following delineates the audit findings regarding this standard:

115.76 (a) and (b) CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 29) stipulates that staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. The PREA Manager advised there were no employees terminated during the past twelve months due to the outcome of a PREA investigation. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.76 (c) CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 29) states that disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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. The PREA Manager advised there were no employees terminated during the past twelve months due to the outcome of a PREA investigation. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.76 (d) CoreCivic Policy 14.2 Sexual Abuse, Prevention and Response (page 30) mandates that 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, are reported to law enforcement, unless the activity was clearly not criminal, and to any relevant licensing bodies. The PREA Manager advised there were no employees terminated during the past twelve months due to the outcome of a PREA investigation. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based upon review of CoreCivic Policy14.2 Sexual Abuse, Prevention and Response (page 30), documentation provided, agency head, and PREA Manager interviews; the following delineates the audit findings regarding this standard:

115.77 (a) CoreCivic Policy14.2 Sexual Abuse, Prevention and Response (page 30) states any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and are reported to law enforcement, unless the activity was clearly not criminal, and to relevant licensing bodies. During the past twelve months, there has been no PREA substantiated incident at Whiteville Correctional Facility involving a contractor or volunteer. This was confirmed during an interview with the PREA investigator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.77 (b) Whiteville Correctional Facility takes appropriate remedial measures, and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. During the past twelve months, there has been no PREA substantiated incident at Whiteville Correctional Facility involving a contractor or volunteer. This was confirmed during an interview with the PREA Investigator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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)

- If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) ☒ Yes ☐ 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

Based upon review CoreCivic 14.2 Sexual Abuse, Prevention and Response (pages 28-29), CoreCivic Policy 5-1 Incident Reporting, documentation provided, Warden, Mental Health Staff, and PREA Manager interviews. The following delineates the audit findings regarding this standard:

115.78 (a) CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (page 28) states that inmates/detainees are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse (detainee on detainee) or following a criminal finding of guilt for inmate-on-inmate sexual abuse. This was confirmed during an interview with the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.78 (b) Sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's or detainee's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.78 (c) CoreCivic Policy 5-1 Incident Reporting states that the disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. This was confirmed during an interview with the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.78 (d) The Mental Health staff offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, Whiteville Correctional Facility does not require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. This was confirmed during an interview with the Mental Health Staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.78 (e) Whiteville Correctional Facility disciplines an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. This was confirmed during an interview with the PREA Manager. There were no such incidents at Whiteville Correctional Facility during the past twelve months. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.78 (f) Policy states a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred does not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. This was confirmed during an interview with the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.78 (f) Whiteville Correctional Facility prohibits all sexual activity between inmates and may discipline inmates for such activity. This was confirmed during an interview with the PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

MEDICAL AND MENTAL CARE

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (page 10) medical and mental health staff interviews and documentation provided; the following delineates the audit findings regarding this standard:

115.81 (a) CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (page 10) mandates if the screening indicates the inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, the Screening Staff at the Whiteville Correctional Facility ensures the inmate is offered a follow-up meeting with the medical and/or mental health staff within 14 days of the intake screening as required by this part of the standard. The Screening Staff will documents the referral to the CoreCivic Mental Health Staff. Medical records review produced two such referrals. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.81 (b) CoreCivic 14.2 Sexual Abuse, Prevention and Response policy mandates if the screening indicates an inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the Screening Staff at the Whiteville Correctional Facility ensures the mate is offered a follow-up meeting with mental health staff within 14 days of the intake screening as required by this part of the standard. The Screening Staff will documents the referral to the CoreCivic Mental Health Staff. Medical records review produced two such referrals. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.81 (d) Whiteville Correctional Facility requires that any information related to sexual victimization or abusiveness that occurred in the facility is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.81 (e) Whiteville Correctional Facility requires CoreCivic Medical and Mental Health Staff to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in the facility, unless the inmate is under the age of 18. This was confirmed during an interview with the Health Services Administrator. During the past twelve months, there has not been a situation where consent from an inmate under the age of 18 has occurred. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic medical and mental health staff interviews, CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (page 20-21), Memorandum of Understanding with WRAP, and documentation provided; the following delineates the audit findings regarding this standard:

115.82 (a) CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (page 20), states that Whiteville Correctional Facility has a Memorandum of Understanding with the Jackson-Madison County General Hospital to treat inmate victims of sexual abuse. The facility also has medical and mental health staff at the facility ensuring inmates 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. This was confirmed during interviews with the Medical Staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.82 (b) Whiteville Correctional Facility has procedures to follow when no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. Victims are taken to Jackson-Madison County General Hospital. This was confirmed during interviews with the Medical Staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.82 (c) Whiteville Correctional Facility ensures inmate victims of sexual abuse while incarcerated are 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. This is done in cooperation with Jackson-Madison County General Hospital and Central Tennessee Center against Sexual Abuse. This was confirmed during interviews with the Medical Staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.82 (d) CoreCivic 13.79 Sexual Assault Response (page 4) states that Whiteville Correctional Facility requires that all treatment services provided to the victim are without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The CoreCivic bares all cost. This was confirmed during interviews with the Medical Staff and PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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. *Note: in "all-male" facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*) ☒ Yes ☐ 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. *Note: in "all-male" facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*) ☐ Yes ☐ 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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic medical and mental health staff interviews, CoreCivic 14-2 Sexual Abuse Prevention and Response policy (pages 10-11), and documentation provided; the following delineates the audit findings regarding this standard:

115.83 (a) CoreCivic 14-2 Sexual Assault Response (page 10) requires Whiteville Correctional Facility to offer medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any facility. This was confirmed during an interview with the Health Services Administrator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.83 (b) CoreCivic 14-2 Sexual Assault Response (page 10) requires Whiteville Correctional Facility that the evaluations 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. Follow-up care is done in cooperation between Jackson-Madison County General Hospital, CoreCivic and WRAP - WO/Men's Resources and Rape Assistance Program. This was confirmed during interviews with the Health Services Administrator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.83 (c) Whiteville Correctional Facility requires that medical and mental health staff provide all victims with medical and mental health services consistent with the community level of care. Follow-up care is done in cooperation between Jackson-Madison County General Hospital, CoreCivic, and the WRAP - WO/Men's Resources and Rape Assistance Program. This was confirmed during interviews with the Whiteville Correctional Facility Health Services Administrator and the PREA Manager for Whiteville Correctional Facility. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.83 (d and e) Based on Whiteville Correctional Facility documentation requires inmate victims of sexually 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 as required by this standard. Follow-up care is done in cooperation between Jackson-Madison County General Hospital, CoreCivic and WRAP - WO/Men's Resources and Rape Assistance Program. This was confirmed during interviews with the Health Services Administrator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.83 (f) Whiteville Correctional Facility requires that medical and mental health staff provide inmate victims of sexual abuse while incarcerated tests for sexually transmitted infections as medically appropriate. Follow-up care is done in cooperation between Jackson-Madison County General Hospital, CoreCivic and WRAP - WO/Men's Resources and Rape Assistance Program. This was confirmed during interviews with the Health Services Administrator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.83 (g) Whiteville Correctional Facility requires that medical and mental health staff provide treatment services 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. Follow-up care is done in cooperation between Jackson-Madison County General Hospital, CoreCivic and WRAP - WO/Men's Resources and Rape Assistance Program. This was confirmed during interviews with the Health Services Administrator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.83 (h) Whiteville Correctional Facility shall 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. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on interviews with the PREA Manager, the PREA Manager, CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (pages 24-25), Sexual Abuse or Assault Incident Review Form 14-2F, and documentation provided; the following delineates the audit findings regarding this standard:

115.86 (a) CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (page 24) mandates that Whiteville Correctional Facility conducts 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. This was confirmed during file review and during interviews with SART members. During the past twelve months, there were twenty-six PREA Investigations; all substantiated and unsubstantiated sexual abuse investigations were followed by

an incident review within 30 days. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.86 (b) Whiteville Correctional Facility ensures that these reviews occur within 30 days of the conclusion of the investigation and documents the review on the Sexual Abuse or Assault Incident Review Form 14-2F; which is a four page comprehensive review form. During the past twelve months, there were twenty-six PREA investigations; all substantiated and unsubstantiated sexual abuse investigations were followed by an incident review within 30 days. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.86 (c) The review team consist of upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. In addition to the Warden/Facility Administrator, the incident review team shall include upper-level facility management and the facility SART, with input from line supervisors, investigators, and medical or mental health practitioners. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.86 (d) The review team considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; 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; and they examine the area in Whiteville Correctional Facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. The agency has deployed an excellent PREA after action review form which addresses all elements of the standard. During the past twelve months, there were twenty-six PREA investigations: all substantiated and unsubstantiated sexual abuse investigations were followed by an incident review within 30 days. Therefore, this meets this portion of the standard.

115.86 (e) Whiteville Correctional Facility shall implement the recommendations for improvement, or shall document its reasons for not doing so. Each of the 30-Day reviews clearly marked recommendations as deemed appropriate by the SART team. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on interviews with the PREA Manager, the PREA Manager, website, CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (page 31), and documentation provided; the following delineates the audit findings regarding this standard:

115.87 (a), (b) and (c) CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (page 31), mandates that each facility will ensure that incidents of sexual abuse are entered into the IRD as required by CoreCivic Policy 5-1 Incident Reporting and 5-188 PREA 5-1 IRD Incident Reporting Definitions. Whiteville Correctional Facility collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions, and aggregates the incident-based sexual abuse data at least annually. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (page 31) mandates that the incident-based data collected is based on the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.87 (d) CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (page 31) stipulates the Whiteville Correctional Facility maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.87 (e) Whiteville Correctional Facility does not contract its inmates to other facilities. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.87 (f) Upon request, Whiteville Correctional Facility provides all such data from the previous calendar year to the Department of Justice no later than June 30 when required. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on interviews with the PREA Manager, website, CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (pages 31-32), and documentation provided; the following delineates the audit findings regarding this standard:

115.88 (a) CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (pages 31-32) specifies that Whiteville Correctional Facility reviews data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility, as well as Whiteville Correctional Facility as a whole. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.88 (b) Such reports includes a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of Whiteville Correctional Facility's progress in addressing sexual abuse. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.88 (c) Whiteville Correctional Facility's report is approved by the Warden and made readily available to the public through its website https://www.corecivic.com/faciities/central-Tennessee-Whiteville-correctional complex. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.88 (d) CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (pages 31-32) states that Whiteville Correctional Facility may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of the facility, but must indicate the nature of the material redacted. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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*)

Instructions for Overall Compliance Determination Narrative

Based on CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (pages 31-32), interviews with the PREA Manager, and documentation provided; the following delineates the audit findings regarding this standard:

115.89 (a) through (d): CoreCivic 14.2 Sexual Abuse, Prevention and Response policy (page 31) mandates Whiteville Correctional Facility PREA Manager to make all aggregated sexual abuse data, readily available to the public at least annually through the agency website https://www.corecivic.com/faciities/central-Tennessee-Whiteville-correctional complex. All reports

are securely retained and maintained for at least 10 years after the date of the initial collection unless Federal, State, or Local law requires otherwise. This was confirmed during an interview with the agency wide PREA Manager. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.401 (a)

- During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (*Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.*) ☒ Yes ☐ No

115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a "no" response does not impact overall compliance with this standard*.) ☐ Yes ☒ No

- If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is **not** the *second* year of the current audit cycle.) ☒ Yes ☐ No ☐ NA

- If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is **not** the *third* year of the current audit cycle.) ☒ Yes ☐ No ☐ NA

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*)

Instructions for Overall Compliance Determination Narrative

115.401 (a) and (b)The Whiteville Correctional Facility did have a PREA audit during the first audit cycle. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.401 (h) The auditor has full access to all location/areas of the Whiteville Correctional Facility. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.401 (i) The auditor did obtain all necessary copies of audit items. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.401 (m) The auditor was allowed to interview inmates in a private setting. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.401 (n) The auditor did receive any correspondence from one Whiteville Correctional Facility inmates/detainees. Audit notices were observed in every housing unit; as well as all common areas. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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. The review period is for prior audits completed during the past

three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies 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*)

Instructions for Overall Compliance Determination Narrative

115.403 Whiteville Correctional Facility has had a PREA audit in 2017; the final report is posted on the agency's website (https://www.corecivic.com/faciities/central-Tennessee-Whiteville-correctional complex). Therefore, the facility demonstrated compliance with this part of the standard during this audit.

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.

DOJ Certified Auditor:

Brian D. Bivens _____ September 16, 2020

Auditor Signature **Date**