



14-2 Sexual Abuse Prevention and Response

FSC EFFECTIVE DATE: NOVEMBER 15, 2017

FSC SUPERSEDES DATE: NOVEMBER 3, 2014; 14-2(01) MAY 26, 2015; (02) JANUARY 19, 2017
(03) APRIL 19, 2017

FACILITY:

FACILITY SUPERSEDES DATE:

FACILITY EFFECTIVE DATE:

POLICY:

CoreCivic is committed to protecting inmates/detainees from personal abuse, corporal punishment, injury, disease, property damage, and harassment (**ACI 4-4281**). Sexual abuse in correctional facilities is a public safety issue that can impact facility order and security. It victimizes vulnerable inmates/detainees, causes psychological trauma, can increase the spread of communicable diseases, and can cause violence and tension in a correctional facility. This policy provides CoreCivic correctional facilities a mechanism for complying with the Prison Rape Elimination Act (PREA) and the PREA National Standards for reducing the occurrence of sexual abuse and harassment.

CoreCivic has mandated zero-tolerance towards all forms of sexual abuse and sexual harassment. Sexual abuse or harassment is prohibited by this policy and will not be tolerated; to include inmate/detainee-on-inmate/detainee sexual abuse or harassment and employee-on-inmate/detainee sexual abuse or harassment. If an inmate/detainee is learned that an inmate/detainee is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate/detainee. It is CoreCivic's policy to aggressively investigate and prosecute regardless of the source, and prosecute those who are involved in incidents of sexual abuse. If an inmate/detainee is a victim of sexual abuse or harassment will be provided a supportive and protective environment. (115.11 **ACI 4-4056**)

Sexual activity between inmates/detainees or employees/civilians/contractors and inmates/detainees, regardless of consensual status, is strictly prohibited and subject to administrative and criminal sanctions (**ACI 4-4281-6; 4-ALDF-4D-22-5**).

AUTHORITY:

CoreCivic Company Policy

DEFINITIONS:

Word or Term – Definition Bad Faith – Acting with a dishonest belief or purpose.

C-ORES – CoreCivic's "Correctional Offender/Resident Electronic Services" system – a kiosk system inmates/detainees may use to send electronic mail known as C-Mail and C-Notes, order goods, perform other tasks such as downloading digital music files, and electronically report all incidents of sexual abuse and harassment.

Civilian – A person who is not a paid CoreCivic employee. Such individuals may include visitor guides, interns, delivery truck drivers, or service personnel repairing equipment in the facility. This does not include inmate/detainee visitors.

Contractor – A person who provides services at the facility on a recurring basis pursuant to a contract agreement with CoreCivic. Such individuals may include the contractor's employees who manage facility departments such as health and/or food services, construction workers who are temporary projects within the facility, medical professionals such as a psychiatrist or medical doctor, and consultants such as a professional librarian.

Direct Staff Supervision – Security staff are in the same room with, and within reasonable hearing of, the inmate/detainee.

Employee – A person employed by CoreCivic in an approved full-time or part-time position that is such in the authorized staffing pattern. For the purposes of this policy, a paid intern may be considered an employee.

Exigent Circumstances – Temporary unforeseen circumstance(s) that require immediate action to combat a threat to the security or institutional order of a facility.

Facility Support Center (FSC) – CoreCivic's corporate headquarters where employees provide direction, and oversight in the management and operation of the company's correction, detention, and community correction facilities.

FSC PREA Committee – A committee comprised of senior operations, legal, and mental health professionals to review issues related to PREA reporting, incident response, investigation, and prevention.

FSC PREA Coordinator – An upper-level management FSC employee designated to develop, oversee CoreCivic's companywide efforts to comply with the PREA National Standards and the Sexual Abuse Response and Prevention Program. He/she must provide supervisory oversight and ensure coordination in the prevention, detection, intervention, investigation, and discipline/prosecution of sexual abuse as specified in this policy. (115.11 (b))

Gender Non-Conforming – A person whose appearance or manner does not conform to traditional gender expectations.

Inmate/Detainee – Any person housed in a CoreCivic facility. An inmate/detainee may also be referred to by the term used by the contracting agency, e.g. prisoner, offender, etc.

LGBTI – Lesbian, Gay (Homosexual), Bisexual, Transgender, and Intersex. This acronym will include Gender Non-Conforming.

Intersex – A person whose sexual or reproductive anatomy or chromosomal pattern does not fit the definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

Miranda and Garrity Warnings – Instructions provided at the start of an interview informing the rights and liabilities outlined by the court decisions *Miranda v. Arizona* and *Garrity v. New Jersey*.

PREA – The Prison Rape Elimination Act 42 USC 15601 et seq

PREA Compliance Manager – An Administrative Duty Officer-level manager appointed by the Facility Administrator who maintains responsibility for the facility's Sexual Abuse Response and Prevention Program. (115.11 (c))

PREA National Standards – Part 115 of Title 28 of the Code of Federal Regulations, the Prison Rape Elimination Act National Standards, including Subpart A, Standards for Adult Prisons and Jails

PREA Staffing Plan – An approved plan for staffing the facility in accordance with PREA guidelines by the facility in conjunction with the FSC PREA Coordinator.

PREA Staffing Plan Deviation – When any position designated as part of the PREA Staffing Plan is not staffed during the period of an entire shift.

Preponderance of the Evidence Standard – An evidentiary standard under which an allegation is substantiated if the weight of the available evidence indicates that the allegation is more likely to be truthful or correct.

Qualified Health Care Professional (QHCP) – Includes physicians, physician assistants, nurse practitioners, nurses, dentists, mental health professionals, and others who, by virtue of their education, credentials, and experience are permitted by law within the scope of their professional practice to evaluate and care for patients.

Qualified Mental Health Professionals (QMHP) – Includes psychiatrists, psychologists, psychiatric workers, psychiatric nurses and others who, by virtue of their education, credentials, and experience are permitted by law to evaluate and care for the mental health needs of patients.

Rape Crisis Center – An entity that provides intervention and related assistance, such as the services in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages.

SAFE/SANE Provider – A sexual assault forensic examiner (SAFE) or sexual assault nurse examiner, a specially trained registered nurse, physician assistant, or physician who provides comprehensive and timely collection of forensic evidence and testimony in sexual assault cases.

Sexual Abuse of an Inmate, Detainee, or Resident by Another Inmate, Detainee, or Resident – Following acts, if the victim does not consent, is coerced into such act by overt or implied threat, or the victim is unable to consent or refuse:

1. Contact between the penis and the vulva or the penis and the anus, including penetrative contact, however slight;
2. Contact between the mouth and the penis, vulva, or anus;
3. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, or other instrument; and
4. Any other intentional touching, either directly or through the clothing, of the genitalia, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

Sexual Abuse of an Inmate, Detainee, or Resident by an Employee, Contractor, or Civilian – A following acts, with or without consent of the inmate, detainee, or resident:

1. Contact between the penis and the vulva or the penis and the anus, including penetrative contact, however slight;
2. Contact between the mouth and the penis, vulva, or anus;
3. Contact between the mouth and any body part where the employee, contractor, or civilian has the intent to abuse, arouse, or gratify sexual desire;
4. Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument that is unrelated to official duties or where the employee, contractor, or civilian has the intent to abuse, arouse, or gratify sexual desire;
5. Any other intentional contact, either directly or through the clothing, of or with the genitalia, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the employee, contractor, or civilian has the intent to abuse, arouse, or gratify sexual desire;
6. Any attempt, threat, or request by an employee, contractor, or civilian to engage in the acts listed above in 1-5 of this section;
7. Any display by an employee, contractor, or civilian of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate, detainee, or resident; and
8. Voyeurism by an employee, contractor, or civilian.

Sexual Abuse Response Team (SART) – A team comprised of four (4) or more individuals have a role in responding to reported incidents of sexual abuse, victim assessment and support needs policy and procedures are carried out that ensure inmate/detainee safety.

Sexual Harassment – Includes any of the following acts:

1. Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments or actions of a derogatory or offensive sexual nature by one inmate, detainee, or detainee another; and
2. Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or res employee, contractor or civilian, including demeaning references to gender, sexually suggestive derogatory comments about body or clothing, or obscene language or gestures.

Transgender – A person whose gender identity (i.e. internal sense of feeling male or female) is the person's sex at birth.

Voyeurism – An invasion of privacy of an inmate/detainee by an employee, contractor, or civilian unrelated to official duties, such as peering at an inmate/detainee who is using a toilet in his or perform bodily functions; requiring an inmate/detainee to expose his or her buttocks, genitals, or taking images of all or part of an inmate/detainee's naked body or of an inmate/detainee perform functions.

PROCEDURES INDEX:

- A. CONFIDENTIALITY**
- B. HIRING AND PROMOTION**
- C. TRAINING AND ACKNOWLEDGEMENT**
- D. STAFFING**
- E. SUPERVISION AND MONITORING**
- F. EXTERNAL VICTIM ADVOCATE AND SUPPORT SERVICES**
- G. SEXUAL ABUSE RESPONSE TEAM (SART)**
- H. INMATE/DETAINEE SCREENING**
- I. INMATE/DETAINEE ORIENTATION AND EDUCATION**
- J. HOUSING AND PROGRAM ASSIGNMENTS**
- K. SEARCHES AND OBSERVATIONS**
- L. REPORTING SEXUAL ABUSE AND/OR SEXUAL HARASSMENT**
- M. RESPONSE PROCEDURES**
- N. POST INVESTIGATION REVIEW**
- O. ADMINISTRATIVE AND CRIMINAL INVESTIGATIONS**
- P. INCIDENT CLASSIFICATION**
- Q. INMATE/DETAINEE NOTIFICATIONS**
- R. DISCIPLINARY PROCEDURES**
- S. POST INCIDENT CLASSIFICATION PROCEDURES**
- T. COLLECTION AND USE OF DATA**
- U. QUALITY ASSURANCE COMPLIANCE**
- V. UPGRADES TO FACILITIES AND TECHNOLOGIES**

PROCEDURES:

A. CONFIDENTIALITY

- A1. All information concerning an event of inmate/detainee sexual abuse or sexual harassment treated as confidential. Apart from reporting to designated supervisors or officials, employees

reveal any information related to a sexual abuse report to anyone other than to the extent necessary for treatment, investigation, and other security and risk management decisions. This information should never be shared with other inmates/detainees. (115.41(i))

- A2. Appropriate controls shall be implemented within the facility regarding the dissemination of sensitive information is not exploited by employees or other inmates/detainees to the detriment. (115.41(i))
- A3. Security and management of documentation containing PREA information will be in accordance with CoreCivic and/or agency policy regarding records management, records retention, HIPAA

B. HIRING AND PROMOTION

Any incident of sexual harassment shall be considered in determining whether to hire or promote an individual, or to enlist the services of any contractor, who may have contact with inmates/detainees. (115.17 (b))

- B1. To the extent permitted by law, CoreCivic will decline to hire or promote anyone who may have engaged in sexual abuse with inmates/detainees, and decline to enlist the services of any contractor, who may have engaged in sexual abuse with inmates/detainees, who:
 - B1a. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, jail, or other institution (as defined in 42 U.S.C. 1997);
 - B1b. Has been convicted of engaging or attempting to engage in sexual activity in the community 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
 - B1c. Has been civilly or administratively adjudicated to have engaged in the activity as outlined above. (115.17 (a)(1-3))

NOTE: To the extent permitted by law, CoreCivic may decline to hire or promote and may decline to enlist the services of any contractor based on material omissions regarding such misconduct, or the provision of false information. (115.17 (g))

- B2. All applicants and employees who may have direct contact with inmates/detainees shall disclose any previous misconduct, as outlined above in B1a.-c., in written applications or interviews for hiring or promotions, and in any interviews or written self-evaluations conducted as part of review of hiring or promotion of employees. (115.17 (f))
 - B2a. The 14-2H Self-Declaration of Sexual Abuse/Sexual Harassment form will be completed during the hiring process and as part of the promotional process.
 - B2b. The 14-2H Self-Declaration of Sexual Abuse/Sexual Harassment form shall be completed by all employees on an annual basis to serve as verification of an employee's fulfillment of his affirmative duty to disclose any sexual misconduct as described in this policy, and as outlined above in B1a-c. (115.17 (c)(1-2)) The completed 14-2H form shall be retained in each employee's personnel file.
- B3. Background Records Check
 - B3a. Before hiring new employees who may have contact with inmates/detainees, CoreCivic shall:
 - B3a1. Perform a criminal background records check; and
 - B3a2. Consistent with federal, state, and local law make its best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignations pending investigation of an allegation of sexual abuse as defined by this policy. The 3-2

Questionnaire for Prior Institutional Employers form shall be used to solicit such prior information.

- B3b. CoreCivic shall also perform a criminal background records check before enlisting the unescorted contractor who may have contact with inmates/detainees. (115.17 (d))
- B3c. CoreCivic shall conduct criminal background records checks at least every five (5) years for employees and unescorted contractors who may have contact with inmates/detainees or the system for otherwise capturing such information. (115.17 (e))
- B3d. Unless prohibited by law, CoreCivic shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an employer for whom such employee has applied to work. (115.17 (h))

C. TRAINING AND ACKNOWLEDGEMENT

C1. Employees

C1a. All CoreCivic facility employees shall receive training on CoreCivic's zero-tolerance policy on sexual abuse and sexual harassment. Such training shall be tailored to the gender of the inmate at the facility. (115.31 (b)) At a minimum, all employees shall receive pre-service and annual training on the following: (115.31 (c)) **(ACI 4-4084; 4-ALDF-7B-10; 4-ALDF-7B-10-1)**

C1a1. The PREA National Standards and other applicable state or local laws imposing criminal sexual abuse of a person held in custody;

AT THIS FACILITY, THE APPLICABLE STATE OR LOCAL LAWS GOVERNING SEXUAL ABUSE OF PERSONS IN CUSTODY IN ADDITION TO PREA ARE:

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- C1a2. An employee's duty to report any occurrence of sexual harassment or sexual abuse;
- C1a3. How to fulfill employee responsibilities for sexual abuse/sexual harassment prevention, reporting, and response in accordance with this policy;
- C1a4. The right of inmates/detainees to be free from sexual abuse and sexual harassment;
- C1a5. The right of inmates/detainees and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- C1a6. The dynamics of sexual abuse and sexual harassment in confinement;
- C1a7. Locations, situations, and circumstances in which sexual abuse may occur;
- C1a8. The common reactions of sexual abuse and sexual harassment victims;
- C1a9. Signs of victimization;
- C1a10. How to detect and respond to signs of threatened and actual sexual abuse;
- C1a11. Signs of predatory behavior;
- C1a12. How to avoid inappropriate relationships with inmates/detainees;
- C1a13. Circumstances that may lead to inappropriate sexual contact by an employee;
- C1a14. How to communicate effectively and professionally with inmates/detainees, including Gender Non-Conforming inmates/detainees; and
- C1a15. How to comply with laws relevant to mandatory reporting of sexual abuse to outside agencies. (115.31 (a)(1-10))

C1b. Specialized Training

C1b1. In addition to the general training provided to all employees, C1b1. security staff : training in how to conduct cross-gender pat-down searches, and searches of transgender inmates/detainees, in a manner that is professional, respectful, and the least intrusive possible being consistent with security needs. (115.15 (f))

In addition to the general training provided to all employees and to the extent that C conducts sexual abuse investigations, investigators shall receive training in conducting investigations in confinement settings. (115.34 (a)) The PREA Compliance Manager that more than one (1) person at the facility receives training as a sexual abuse investigator ensure that a trained investigator is available as a back-up during employee absence (paid time off, sickness, offsite training, etc.) from work.

Specialized training shall include techniques for interviewing sexual abuse victims, Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, criteria and evidence required to substantiate a case for administrative action or prosecution (115.34 (b))

Documentation confirming that investigators have completed the required specialized training for conducting sexual abuse investigations shall be maintained in accordance with Core 1-15 Record Retention and 4-2 Maintenance of Training Records. (115.34 (c))

C1b2. In addition to the general training provided to all employees, all full and part-time Qualified Professionals and Qualified Mental Health Professionals, who work regularly in the facility shall receive specialized medical training as outlined below: (115.35 (d))

How to detect and assess signs of sexual abuse and sexual harassment;

How to preserve physical evidence of sexual abuse;

How to respond effectively and professionally to victims of sexual abuse and sexual harassment

How and to whom to report allegations of sexual abuse and sexual harassment. (115.35 (e))

C1c. Employees transferring to a facility that houses a population whose gender is different from their previously assigned facility shall receive additional training specific to the population of the new assigned facility. (115.31 (b))

C1d. 14-2A PREA Policy and Training Acknowledgement Form

C1d1. Employees shall be required to confirm, by either electronic or manual signature, their receipt of the received training via the 14-2A PREA Policy and Training Acknowledgement form. This documentation will be maintained in the employee's training file. (115.31 (d))

C1d2. The completed 14-2A PREA Policy and Training Acknowledgement form shall also serve as evidence of the employee's review and understanding of the contents of this policy. Each employee's completed 14-2A will also be retained by the Manager, Human Resources, in the employee's personnel file.

A newly signed 14-2A PREA Policy and Training Acknowledgement form will be required for all revisions of this policy as determined by the FSC General Counsel or designee.

C2. Civilians/Volunteers/Contractors

C2a. All civilians/volunteers/contractors who have contact with inmates/detainees on a recurring basis shall receive training on their responsibilities pertaining to sexual abuse and sexual harassment detection, reporting, and response as outlined in this policy. (115.32 (a))

C2b. The level and type of training provided to civilians/volunteers/contractors shall be based on the frequency they provide and level of contact they have with inmates/detainees. All civilians/volunteers/contractors shall receive training on their responsibilities pertaining to sexual abuse and sexual harassment detection, reporting, and response as outlined in this policy. (115.32 (b))

who have contact with inmates/detainees shall be notified of CoreCivic's zero-tolerance sexual abuse and sexual harassment and informed how to report such incidents. (115.3

- C2c. Civilians/volunteers/contractors shall be required to confirm, by either electronic or mar their understanding of the received training. Signed documentation will be maintained in civilian/volunteer or contractor's file. (115.32 (c))
- C2d. Civilians/volunteers/contractors who have contact with inmates/detainees on a recurring provided a copy of this policy prior to admission to the facility to begin their assignment (
- C2e. The 14-2A PREA Policy and Training Acknowledgement form serves as verification of civilian's/volunteer's or contractor's review and understanding of the contents of this poli completed by each civilian or contractor who has contact with inmates/detainees on a re The completed forms will be maintained by the Manager, Human Resources.
- C2e1. A newly signed 14-2A PREA Policy and Training Acknowledgement form will be requir revisions of this policy as determined by the FSC General Counsel or designee.

D. STAFFING

- D1. FSC will develop, in coordination with the facility, a staffing plan that provides for adequ staffing to protect inmates/detainees against sexual abuse. The location of video monito be considered when determining adequate levels of staffing.
- D2. In calculating staffing levels and determining the need for video monitoring, the followin be take into consideration:
 - D2a. Generally accepted detention and correctional practices;
 - D2b. Any judicial findings of inadequacy;
 - D2c. Any findings of inadequacy from federal investigative agencies;
 - D2d. Any findings of inadequacy from internal or external oversight bodies;
 - D2e. All components of the facility's physical plant (including "blind spots" or areas where sta inmates/detainees may be isolated);
 - D2f. The composition of the inmate/detainee population;
 - D2g. The number and placement of supervisory staff;
 - D2h. Institutional programs occurring on a particular shift;
 - D2i. Any applicable state or local laws, regulations, or standards;
 - D2j. The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
 - D2k. Any other relevant factors. (115.13 (a)(1-11))
- D3. The facility shall make its best effort to comply, on a regular basis, with the approved P Plan and shall document and justify all deviations. (115.13 (b)) Deviations shall be docu notification made on the 5-1B Notice to Administration via the Incident Reporting Databa
- D4. The Chief of Security is responsible for reviewing the PREA Staffing Plan in conjunctio shift roster. If a position identified on the Staffing Plan is vacated for a shift, the Chief of notify the PREA Compliance Manager of the deviation. The PREA Compliance Manage
 - D4a. Document and describe the deviation on the 5-1B Notice to Administration via the IRD, thorough justification for the deviation; and
 - D4b. Notify the FSC PREA Coordinator of the deviation within seven (7) calendar days; to in description of any corrective actions that were taken to resolve the deviation. (115.13 (b
- D5. Annual PREA Staffing Plan Assessment

Whenever necessary, but no less frequently than once each year, for each CoreCivic facility, a PREA staffing plan assessment will be completed.

- D5a. The PREA Compliance Manager will complete the 14-21 Annual PREA Staffing Plan Assessment and forward it to the Warden/Facility Administrator for review. Upon completion of the Warden/Facility Administrator's review, the 14-21 Annual PREA Staffing Plan Assessment will be forwarded to the PREA Compliance Coordinator.
- D5b. In consultation with the respective Business Unit Vice President, Operations, the FSC Compliance Coordinator shall assess, determine, and document whether adjustments are needed to the PREA staffing plan.
- D5b1. The staffing plan established pursuant to this section;
- D5b2. The facility's deployment of video monitoring systems and other monitoring technologies;
- D5b3. The resources the facility has available to commit to ensure adherence to the staffing plan (1-3))
- D5c. Any changes to policy and/or procedure, physical plant, approved capital expenditures, monitoring and/or technology, or staffing require the approval of the respective Business Unit Vice President, Operations.

E. SUPERVISION AND MONITORING

E1. Supervision

- E1a. Supervisors shall conduct unannounced facility rounds to identify and deter employee sexual harassment. The occurrence of such rounds shall be documented as an unannounced round in the applicable log (e.g. ADO, post log, shift report, etc.). This practice shall be implemented in all areas where inmates/detainees are permitted.
- E1b. Employees shall be prohibited from alerting other employees that supervisory rounds are being conducted unless such announcement is related to the legitimate operational functions of the facility.

E2. Inmate/Detainee Monitoring

- E2a. Inmates/detainees identified during the intake screening as high risk with a history of sexual assaultive behavior, whether it occurred in an institutional setting or in the community, shall be offered a meeting with a medical or mental health or other qualified professional within 14 days of intake. (115.81 (b)) Inmates with a history of sexually assaultive behavior will be identified, monitored, and counseled. **(ACI 4-4281-4; 4-ALDF-4D-22-3)**
- E2b. Inmates/detainees identified during the intake screening as at risk for sexual victimization or prior sexual victimization whether it occurred in an institutional setting or the community shall be offered a meeting with a medical or mental health or other qualified professional within fourteen (14) days of the intake screening. (115.81 (a)) Inmates at risk for sexual victimization will be identified, monitored, and counseled. **(ACI 4-4281-5; 4-ALDF-4D-22-4)**

F. EXTERNAL VICTIM ADVOCATES AND SUPPORT SERVICES

- F1. CoreCivic shall maintain or attempt to enter into Memorandums of Understanding (MOU) agreements with community service providers that are able to provide inmates/detainee confidential emotional support services related to sexual abuse. (115.53 (c)) Before attempting to enter into an MOU, the facility shall contact the FSC Assistant General Counsel for Contract Services. CoreCivic shall maintain copies of agreements or documentation showing attachment into such agreements.
- F2. Inmates/detainees shall be provided access to outside victim advocates for emotional support services related to sexual abuse by giving inmates/detainees mailing addresses and telephone numbers.

including toll-free hotline numbers where available, of local, state, or national victim advocacy crisis organizations, and, for persons detained solely for civil immigration purposes, immigration agencies. Such information shall be included in the facility's Inmate/Detainee Handbook shall enable reasonable communication between inmates/detainees and these organizations, in as confidential a manner as possible. (115.53 (a))

- F3. Inmates/detainees shall be informed, prior to giving them access, of the extent to which communications shall be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. (115.53 (b))
- F4. As requested by the victim, either the victim advocate, a qualified community-based organization member, or a qualified facility staff person shall accompany and support the victim through the medical examination process and investigatory interviews and shall provide emotional support, intervention, information, and referrals. (115.21 (e))

G. SEXUAL ABUSE RESPONSE TEAM (SART)

G1. Each facility will establish a SART which includes the following positions:

- G1a. PREA Compliance Manager;
- G1b. Medical representative;
- G1c. Security representative;
- G1d. Mental health representative; and
- G1e. Victim Services Coordinator.

NOTE: The medical and/or mental health professional may serve as the facility's Victim Services Coordinator. The facility Victim Services Coordinator will not be a member of security.

G2. The SART responsibilities shall include the following:

- G2a. Responding to reported incidents of sexual abuse;
- G2b. Responding to victim assessment and support needs;
- G2c. Ensuring policy and procedures are enforced to enhance inmate/detainee safety; and
- G2d. Participating in the development of practices and/or procedures that encourage prevention of sexual abuse and enhance compliance with PREA National Standards.

G3. SART Member Responsibilities

G3a. The PREA Compliance Manager will:

- G3a1. Review the facility's response to sexual abuse allegations, with the Warden/Facility Administrator, to ensure the policy is implemented effectively and victim needs are addressed;
- G3a2. Serve as a primary liaison with local law enforcement or delegate this responsibility to a designated investigator;
- G3a3. Ensure the completion of the 14-2C Sexual Abuse and Sexual Harassment Incident Classification Report;
- G3a4. Ensure that thirty/sixty/ninety (30/60/90) day monitoring is conducted by the designated staff member upon report of sexual abuse to protect against potential retaliation against inmates/detainees. This shall include periodic status checks of inmates/detainees and review of relevant documentation. (115.67 (d))

AT THIS FACILITY, THE POSITION THAT WILL SERVE AS THE DESIGNATED STAFF MEMBER CONDUCTING THE 30/60/90 DAY MONITORING IS:

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Monitoring shall be documented on the 14-2D, PREA Retaliation Monitoring Report form.

Monitoring shall continue beyond ninety (90) days if the initial monitoring indicates a need.

- G3a5. Ensure prompt actions are taken to remedy any identified retaliation. (115.67 (c))
- G3a6. Ensure any other individual who cooperates with an investigation and expresses fear is protected from retaliation. (115.67 (e))
- G3b. The medical representative will:
 - G3b1. In cases of sexual abuse, ensure that the facility's medical staff respond appropriately stabilizing an alleged victim before assessment by a community medical provider, if necessary and
 - G3b2. Address any ongoing medical care needs following the incident.
- G3c. The security representative will:
 - G3c1. Ensure inmate/detainee safety needs are addressed, including separating the alleged perpetrator; and
 - G3c2. Ensure employee responses to reports of sexual abuse and sexual harassment are timely consistent with policy.
- G3d. The mental health representative will:
 - G3d1. Ensure the alleged victim is assessed; and
 - G3d2. Ensure mental health needs are addressed according to policy and local procedure.
- G3e. The Victim Services Coordinator will:
 - G3e1. Attempt to obtain the services of a victim advocate from a rape crisis center to assist the victim of sexual abuse.

Efforts to identify and utilize a victim advocate shall be documented on the 14-2C Sexual Harassment Incident Check Sheet via the IRD.

In the absence of a victim advocate, the Victim Services Coordinator will provide inmates with confidential emotional support services related to sexual abuse.

- G3e2. Ensure that inmates/detainees are aware they may access additional victim resources including community victim resource agencies; and
- G3e3. Ensure that alleged victims are informed of their rights to care and protection from further abuse.

H. INMATE/DETAINEE SCREENING

H1. Initial

Upon admission to the facility, inmates/detainees shall be screened by staff assigned to initial intake screening process in order to obtain information relevant to housing, cell, work and program assignments with the goal of keeping separate those inmates/detainees at being sexually victimized from those at high risk of being sexually abusive. The screeners shall identify past victims and/or predators and assess vulnerability to sexual abuse victimization. Housing assignments are made accordingly. (115.41 (a) and (115.42 (a)) **(ACI 4-4281-2)**

- H1a. Inmates/detainees shall be screened, within twenty-four (24) hours of arrival at the facility. **(ACI 4-4281-2; 4-ALDF-4D-22-1)**

- H1b. Screenings shall include interview questions and a review of the inmate/detainee's inst other documentation provided). Prior convictions of this type will also be considered.
- H1c. Screenings will be completed and documented using the 14-2B, Sexual Abuse Screeni referrals to Classification/Unit Staff and the Health Services Department for further eval screening as necessary, unless the facility management contract requires otherwise. (1

AT THIS FACILITY, THE FOLLOWING SCREENING TOOL IS USED IN LIEU OF THE ABUSE SCREENING TOOL:

- H1d. All completed 14-2B forms, or agency equivalent, will be maintained in the inmate/deta with a copy forwarded to the inmate/detainee's medical record and/or, where applicable, inmate/detainee's electronic records.
- H1e. Screening of inmates/detainees should only be used as a guideline for determining app and services and should never be used as the sole reason for the deprivation of a progr
- H2. Reassessment
A reassessment of the inmate/detainee's risk level of victimization or abusiveness will be the appropriate Case Manager or a staff member designated by the Warden/Facility Adr reassessment shall occur:
 - H2a. Within thirty (30) days of the inmate/detainee's arrival at the facility. The reassessmen additional relevant information received by the facility since the initial intake screening; a
 - H2b. When warranted, due to a referral, request, incident of sexual abuse, or receipt of addi that may impact the inmate/detainee's risk of victimization or abusiveness. (115.41 (g))

NOTE: The 14-2B Sexual Abuse Screening Tool will be used for completing the reasse

- H3. Inmate/Detainee Refusal to Disclose
Inmates/detainees may not be disciplined for refusing to answer, or for not disclosing co information, in response to questions asked pursuant to the following:
 - H3a. Whether the inmate/detainee has a mental, physical, or developmental disability;
 - H3b. Whether the inmate/detainee is or is perceived to be LGBTI or Gender Non-Conformin;
 - H3c. Whether the inmate/detainee has previously experienced sexual victimization; or
 - H3d. The inmate/detainee's own perception of vulnerability. (115.41 (h))

I. INMATE/DETAINEE ORIENTATION AND EDUCATION (ACI 4-4281-1; 4-ALDF-2A

- I1. Upon arrival at the facility, all inmates/detainees shall be provided written information r abuse prevention and reporting (e.g. inmate handbook, 14-2AA Preventing Sexual Abus etc.). (115.33 (a) and (c)) During orientation, which is to occur within thirty (30) days of i person or through video, inmates/detainees shall receive comprehensive educational inl the following topics related to this policy:
 - I1a. CoreCivic's zero tolerance policy regarding sexual abuse and sexual harassment;
 - I1b. How to safely report incidents, threats or suspicions of sexual abuse or sexual harassr
 - I1c. An inmate/detainee's right to be free from sexual abuse and sexual harassmt and to retaliation for reporting such incidents;
 - I1d. Availability of policies regarding sexual abuse prevention/intervention;

- I1e. Inmate/detainee-on-inmate/detainee sexual abuse;
- I1f. Employee-on-inmate/detainee sexual abuse;
- I1g. Self-protection from sexual abuse;
- I1h. Treatment and counseling services available (to include external victim advocates and support services as outlined in 14-2 F.); and
- I1i. CoreCivic's effort to aggressively refer sexual abusers for prosecution. (115.33 (b))
CoreCivic prohibits discrimination based on an inmate/detainee's race, religion, national disability, or political views in making administrative decisions and in providing access to **4-4277; 4-ALDF-6B-02**.
- I2. Inmates/detainees will be provided education in formats accessible to all inmates/detainees, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, and inmates/detainees who have limited reading skills. (115.33 (d)) (115.16 (a))
- I2a. In the event an inmate/detainee has difficulty understanding provided information and/or services outlined in this policy, employees must ensure that such information is effectively communicated to such inmates/detainees on an individual basis. (115.16 (b)) **(4-ALDF-2A-2)**
- I2b. Auxiliary aids that are reasonable, effective, and appropriate to the needs of the inmate/detainee shall be provided when simple written or oral communication is not effective. (115.16 (b))
- I2c. Inmates/detainees will not be relied upon to provide interpretation services, act as readers, or provide other types of communication assistance except in limited circumstances where an inmate/detainee is obtaining an effective interpreter could compromise the inmate/detainee's safety, the performance of first-responder duties, or the investigation of the inmate/detainee's allegations. (115.16 (c))
- I3. The facility shall maintain documentation of inmate/detainee participation in educational programs pertaining to sexual abuse and sexual harassment. (115.33 (e))
- I4. In addition to providing such education, the facility shall ensure that key information is readily available or visible to inmates/detainees through posters, inmate handbooks, or other formats. (115.33 (f))

J. HOUSING AND PROGRAM ASSIGNMENTS

- J1. LGBTI and Gender Non-Conforming
 - J1a. In deciding whether to house a transgender or intersex inmate/detainee in a male housing unit/area, or when making other housing and programming assignments for transgender inmates/detainees, the facility shall consider the transgender or intersex inmate/detainee's safety with respect to his/her own safety and shall consider (115.42 (e)) on a case-by-case basis whether a placement would ensure the inmate/detainee's health and safety. Consideration shall also be given as to whether the placement would present management or security problems. (115.42 (a))
 - J1b. Placement and programming assignments for each transgender or intersex inmate/detainee shall be reassessed at least twice each year to review whether any threats to safety were experienced by the inmate/detainee. (115.42 (d))
 - J1c. 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. (115.42 (g))
- J2. Segregation Housing
 - J2a. Inmates/detainees identified with a history of perpetration of rape or sexual assault or sexual harassment in an institutional setting, documented by prior convictions and/or prior institutional records

into segregation until the initial classification has been completed and the inmate/detainee housed in the most appropriate available setting.

- J2b. Inmates/detainees at high risk for sexual victimization shall not be placed in involuntary 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 such an assessment cannot be conducted immediately, the facility may hold the inmate/detainee in segregated housing for less than twenty-four (24) hours while completing the assessment.
- J2c. Segregated housing shall be used only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of thirty (30) calendar days.
- J2d. If involuntary segregated housing is warranted as outlined above in J2b., documentation shall clearly specify:
 - J2d1. The basis for the facility's concern for the inmate/detainee's safety and security.
 - J2d2. The reason why no alternative means of separation can be arranged. (115.43 (d)(1) and (2))
- J2e. Every thirty (30) days, a review of each inmate/detainee's status will be conducted to determine whether there is a continuing need for separation from the general population. (115.43 (d)(3))
- J2f. Inmates/detainees placed in segregated housing for this purpose shall have access to the same privileges, education, and work opportunities to the extent possible. If access to program, education, or work opportunities is restricted, the facility shall document the following:
 - J2f1. The opportunities that have been limited;
 - J2f2. The duration of the limitation; and
 - J2f3. The reasons for such limitations. (115.43 (b)(1, 2, 3))

K. SEARCHES AND OBSERVATION

- K1. Cross-Gender
 - K1a. Cross-gender inmate/detainee strip searches shall not be conducted except in exigent circumstances (that is, temporary unforeseen circumstances that require immediate action in order to combat a threat to security or institutional order) or when performed by medical practitioners. (115.15 (a))
 - K1b. Cross-gender inmate/detainee frisk/pat searches of female inmates/detainees by male staff shall be prohibited except in exigent circumstances (that is, temporary unforeseen circumstances that require immediate action in order to combat a threat to security or institutional order). (115.15 (b))
 - K1c. Whenever a cross-gender pat search of a female inmate/detainee or cross-gender strip search of an inmate/detainee does occur, the search shall be documented on the 5-1B Notice to Admit (refer to CoreCivic Policy 5-1 Incident Reporting). (115.15(c))
- K2. Searches or physical examination of a transgender or intersex inmate/detainee for the purpose of determining the inmate/detainee's genital status is prohibited. If the inmate/detainee's gender is unknown, it may be determined during conversations with the inmate/detainee, 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. (115.15 (e))
- K3. The gender of the staff member searching a transgender or intersex inmate/detainee will be determined based on the specific needs of the individual inmate/detainee and on the operational concerns of the facility. In most circumstances, this will be a case-by-case determination that may change over the course of the inmate's incarceration and should take into consideration the gender expression of the inmate/detainee.
- K4. Searches of breasts will be completed using the back and/or side of the hand.

K5. Inmates/detainees may shower, perform bodily functions, and change clothing without of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circ is, temporary unforeseen circumstances that require immediate action in order to comba security or institutional order) or when such viewing is incidental to routine cell/living qua (115.15 (d))

AT THIS FACILITY, PROCEDURES FOR SHOWERING TRANSGENDER AND INTER INMATES/DETAINEES SEPARATE FROM OTHER INMATES/ DETAINÉES ARE:

K6. Employees of the opposite gender must announce their presence when entering an inn housing unit. (115.15 (d))

K7. Transgender and intersex inmates/detainees shall be given the opportunity to shower s other inmates/detainees. (115.42 (f))

L. REPORTING SEXUAL ABUSE AND/OR SEXUAL HARASSMENT

L1. Inmate/Detainee Reporting

L1a. Inmates/detainees shall be encouraged to immediately report pressure, threats, or inst abuse or sexual harassment, as well as possible retaliation by other inmates/detainees reporting sexual abuse and sexual harassment, and staff neglect or violation of respons have contributed to such incidents. Inmates/detainees who are victims of sexual abuse to report an incident to a designated employee other than an immediate point-of-contact using any of the following methods: (115.51 (a) and (b)) **(ACI 4-4281-7; 4-ALDF-4D-22-**

L1a1. Submitting a request to meet with Health Services staff and/or reporting to a Health Se member during sick call;

L1a2. Calling the facility's twenty-four (24) hour toll-free notification telephone number;

L1a3. Verbally telling any employee, including the facility Chaplain;

L1a4. Forwarding a letter, sealed and marked "confidential", to the Warden/Facility Administr employee;

L1a5. Calling or writing someone outside the facility who can notify facility staff;

L1a6. Forwarding a letter to the CoreCivic Managing Director, Facility Operations, at the follo
10 Burton Hills Boulevard
Nashville, TN 37215

L1a7. Electronically report allegations of sexual abuse and harassment to any department lis C-ORES system as a contact.

L1a8. **AT THIS FACILITY, ADDITIONAL INMATE/DETAINEE REPORTING METHODS RE THE CONTRACTING AGENCY ARE:**

L1b. Inmates/detainees detained solely for civil immigration purposes shall be provided info to contact relevant consular officials and relevant officials at the Department of Homelar (115.51 (b))

L1c. **Unless otherwise mandated by contract, alleged PREA incidents will not be proc the facility's inmate/detainee grievance process. Should a report be submitted an**

an inmate/detainee grievance, whether inadvertently or due to contracting agency it will immediately be referred to the facility Investigator or Administrative Duty Officer.

L2. Employee Reporting Duties

Employees must take all allegations of sexual abuse seriously, including verbal, anonymous party reports, and treat them as if the allegation is credible. Staff shall promptly document reports. (115.51 (c)) All reports of sexual abuse and sexual harassment will be reported to the facility investigator. (115.61 (e)) Employees having contact with the alleged victim should behave in a manner that is sensitive, supportive, and non-judgmental.

L2a. All employees are required to immediately report:

L2a1. Any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility in accordance with this policy, whether or not the area is under the direct management authority;

L2a2. Retaliation against inmates/detainees or employees who have reported such an incident;

L2a3. Any employee neglect or violation of responsibilities that may have contributed to an incident of retaliation. (115.61 (a))

L2b. Employees who fail to report allegations may be subject to disciplinary action.

L2c. Apart from reporting to designated supervisors or officials, employees shall not reveal information related to a sexual abuse report to anyone other than to the extent necessary, and as specified in this policy, to make treatment, investigation, and other security and management decisions. **When it is learned that an inmate/detainee is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate/detainee.**

L2d. Employees may privately report sexual abuse and sexual harassment of inmates/detainees by forwarding a letter, sealed and marked "confidential", to the Warden/Facility Administrator.

L2e. Unless otherwise precluded by federal, state, or local law, medical and mental health professionals shall be required to follow reporting procedures as outlined above in L2a. At the initiation of medical care, both medical and mental health professionals will inform inmates/detainees of their professional duty to report and the limitations of confidentiality. (115.61 (c)) Medical and mental health practitioners shall obtain informed consent from inmates/detainees before reporting information regarding prior sexual victimization that did not occur in an institutional setting, unless the inmate/detainee is under the age of 18. (115.81 (e))

L2f. If the alleged victim is under the age of eighteen (18) or considered a vulnerable adult under applicable local vulnerable person's statute, the allegation shall be reported to the designated state or local agency under applicable mandatory reporting laws. (115.61 (d))

AT THIS FACILITY, THE DESIGNATED STATE AND/OR LOCAL REPORTING AGENCY IS:

L3. Anonymous Reporting

Each facility shall provide at least one way for inmates/detainees to report abuse or harassment to a public or private entity or office that is not part of CoreCivic, and that is able to receive and forward inmate/detainee reports of sexual abuse and sexual harassment to facility officials. The facility shall ensure that the inmate/detainee to remain anonymous upon request. (115.51 (b))

AT THIS FACILITY, THE FOLLOWING ANONYMOUS REPORTING MECHANISM HAS BEEN ESTABLISHED:

L4. Third Party Reporting

Each facility shall establish a method to receive third-party reports of sexual abuse and harassment and shall post this information on the facility PREA link. (115.54)

M. RESPONSE PROCEDURES

M1. Any employee who discovers or learns of sexual abuse, or an allegation of sexual abuse, shall ensure that the following actions are accomplished:

M1a. The alleged victim is kept safe, has no contact with the alleged perpetrator, and is immediately escorted to the Health Services Department. (115.64 (a) (1))

M1a1. The Health Services Department is responsible for medical stabilization and assessment until transported to an outside medical provider, if medically indicated, for collection of evidence and necessary medical treatment. CoreCivic will request, in writing, that the examination be performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE). If a SANE provider is not available, the examination may be performed by other qualified medical practitioners. (ACI 4-4406; 4-ALDF-22-6)

The Health Services Department shall provide services in accordance with CoreCivic Policy 13-79 Sexual Assault Response, unless otherwise mandated by contract. (ACI 4-4406; 4-ALDF-22-6)

**AT THIS FACILITY, THE FOLLOWING CONTRACTUALLY-REQUIRED POLICY IS USED:
CORECIVIC POLICY 13-79:**

M1a2. While in the Health Services Department, employees shall, to the best of their ability, ensure that the victim does not wash, shower, remove clothing without medical supervision, use the restroom, eat, drink or brush his/her teeth. (115.64 (a)(3))

M1b. The highest ranking authority onsite is immediately notified and will further ensure to protect the safety of the victim and the integrity of the crime scene and any investigation. (115.54 (a)(2))

M1c. When the alleged perpetrator is an inmate/detainee, he/she is secured in a single cell (if available) and the event evidence collection is required.

M1d. All acquired information concerning the allegation is kept confidential by discussing the allegation only with those employees who have a direct need to know.

M1e. If the first staff responder is not a security staff member, the responder shall be required to ensure the alleged victim not take any actions that could destroy physical evidence, and notify the Health Services Department. (115.64 (b))

M1f. An incident statement is written in accordance with CoreCivic Policy 5-1 Incident Reporting.

M2. Upon notification of alleged sexual abuse, the highest ranking authority onsite shall ensure that the following actions are accomplished:

M2a. When the alleged perpetrator is an inmate/detainee, in order to preserve any evidence, the alleged perpetrator is not allowed to wash, shower, brush his/her teeth, use the restroom facilities, eat, or drink while secured in segregation in a single cell (if available). (115.64 (a)(3))

M2b. The PREA Compliance Manager and the Warden/Facility Administrator or ADO are immediately notified of the allegation.

- M2c. While in the Health Services Department, a brief statement is obtained from the alleged concerning the incident.
- M2c1. Based upon the alleged victim's statement regarding the location and time of the incident crime scene is preserved. These actions shall include the following:
 - Sealing access to the immediate area of the scene, if possible;
 - Photographing the scene and visible evidence at the scene (e.g. tissue or blood); and
 - Securing any available recorded video footage of the affected area.
- M2d. In cases of alleged sexual harassment, an escort to the Health Services Department facility is not required.
- M3. If the allegation involves events that took place while the alleged victim was not in Core (e.g. while housed at another provider's facility), the following actions shall be taken:
 - M3a. The Warden/Facility Administrator that received the allegation shall contact the facility appropriate office of the facility where the alleged abuse took place as soon as possible but not less than seventy-two (72) hours after receiving the allegation. (115.63 (a)(b))
 - M3b. Determine whether the allegation was reported and investigated.
 - M3b1. If the allegation was reported and investigated by the appropriate officials, the facility shall document the allegation, the name and title of the person contacted, and that the allegation has been fully addressed. Under this circumstance, further investigation and notification need not occur.
 - M3b2. If the allegation was not reported or not investigated, a copy of the statement of the inmate shall be forwarded to the appropriate official at the location where the incident was reported to have occurred.
 - M3c. All such contacts and notifications shall be documented on the 5-1B Notice to Administrator regarding the allegation, any details learned from contact with the site where the alleged abuse took place, and the facility's response to the allegation. (115.63 (c))
 - M3d. If an allegation is received from another facility, the Warden/Facility Administrator will ensure the allegation is investigated. (115.63 (d))
- M4. The PREA Compliance Manager, Warden/Facility Administrator, or Administrative Duty Officer shall ensure that the following is completed:
 - M4a. The PREA Compliance Manager, Warden/Facility Administrator or designee shall immediately report all allegations of rape, sexual assault, or employee on inmate/detainee sexual misconduct to the appropriate law enforcement agencies for criminal investigation if the allegation (if proven true) would constitute a criminal act under federal, state, or local law. The reporting party should request guidance from the appropriate law enforcement agency(ies) in preserving the crime scene and coordinating an investigation.

AT THIS FACILITY, SUCH ALLEGATIONS ARE REPORTED TO THE FOLLOWING LAW ENFORCEMENT/GOVERNMENTAL ENTITY:

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- M4b. Ensure the alleged perpetrator is secured in segregation in a single cell (when possible) pending investigation into the allegation. Ensure the alleged victim is separated/isolated from the perpetrator until completion of the investigation.
- M4c. If the allegation involves an employee, ensure steps are taken to place this person in a non-inmate/detainee contact role.

- M4d. Notify the applicable contracting governmental correctional agency.
- M4e. Ensure that medical and mental health referrals are completed (when appropriate).
- M4f. Ensure that an investigation is initiated and documented; however, investigations into a sexual abuse must be investigated by an employee who has received training in the investigation of sexual abuse cases.
- M4g. Ensure appropriate incident reports are completed in accordance with CoreCivic Policy Reporting.
- M4h. Review any video recordings of the alleged crime scene from the time period implicate allegation. Ensure all video recordings are secured and preserved from the time period allegation.
- M5. A preliminary review of the incident and the response shall be conducted within seven (excluding weekends and holidays) following reportable PREA incidents of Employee-on-Inmate/Detainee Sexual Abuse (excluding Voyeurism) and Inmate/Detainee-on-Inmate/Abuse. Upon receipt of the 5-1A Incident Report, the review will be convened by the FS Operations Support, assigned to the facility. Review participants will include the staff pc below as identified under each incident type.
- M5a. Employee-on-Inmate/Detainee Sexual Abuse (excluding Voyeurism)
 - M5a1. Required Participants
 - Managing Director/designee;
 - FSC PREA Coordinator/designee;
 - Warden/Facility Administrator;
 - Facility PREA Compliance Manager; and
 - Facility Investigator.
 - M5a2. Optional Participants
 - Staff identified by the Warden/Facility Administrator, if their participation is necessary specialized information essential to complete the review; and
 - FSC PREA Committee Members.
- M5b. Inmate/Detainee-on-Inmate/Detainee Sexual Abuse
 - M5b1. Required Participants
 - FSC PREA Coordinator/designee;
 - Warden/Facility Administrator;
 - Facility PREA Compliance Manager; and
 - Facility Investigator.
 - M5b2. Optional Participants
 - FSC Managing Director;
 - Staff identified by the Warden/Facility Administrator, if their participation is necessary specialized information to complete the review; and
 - FSC PREA Committee Members.
- M5c. Voyeurism, Employee-on-Inmate/Detainee Sexual Harassment, and Inmate/Detainee-on-Inmate/Detainee Sexual Harassment

- M5c1. Incidents with these categories will be reviewed for compliance by the Warden/Facility and FSC PREA Coordinator/designee upon receipt of the electronic 5-1 Incident Report
- M5c2. These incidents do not require a telephonic review unless in the judgement of the Ward Administrator or FSC PREA Coordinator the details or nature of the incident require this
- M5c3. Upon receipt of the electronic 5-1 Incident Report, incidents in these categories will be a minimum, the Warden/Facility Administrator, FSC PREA Coordinator/designee, Facility Compliance Manager and Facility Investigator.
- M5c4. These incidents do not require a telephonic review unless, in the judgment of the Ward Administrator or FSC PREA Coordinator, the details or nature of the incident require this
- M5c5. If a telephonic review is required, additional report recipients may be invited.

M5d. Review Protocol

At a minimum, the review shall include:

- M5d1. Discussion of the incident, and whether the incident response meets applicable standards
- M5d2. Appropriate categorization of the incident report;
- M5d3. Completion of required notifications;
- M5d4. A request for law enforcement involvement (if appropriate);
- M5d5. Whether employee actions, or failures to act, contributed to the sexual abuse; and
- M5d6. Initial discussion as to whether the incident is Substantiated, Unsubstantiated, Unfounded, or pending.

N. POST INVESTIGATION REVIEW

- N1. The Warden/Facility Administrator will ensure that a post investigation review of a sexual abuse investigation is conducted at the conclusion of every sexual abuse investigation, unless the allegation is determined to be unfounded. (115.86 (a))
- N1a. In addition to the Warden/Facility Administrator, the incident review team shall include facility management and the facility SART, with input from line supervisors, investigators, and mental health practitioners. (115.86 (c))
- N1b. Such review shall ordinarily occur within thirty (30) days of the conclusion of the investigation. (b))
- N2. The review team shall:
 - N2a. Consider whether the allegation or investigation indicates a need to change policy or procedure to prevent, detect, or respond to sexual abuse;
 - N2b. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity and/or Gender Non-Conforming identification, status, or perceived status; or gang affiliation motivated or otherwise caused by other group dynamics at the facility;
 - N2c. Examine the area in the facility where the incident allegedly occurred to assess whether barriers in the area may enable abuse;
 - N2d. Assess the adequacy of staffing levels in that area during different shifts; and
 - N2e. Assess whether monitoring technology should be deployed or augmented to supplement staff. (115.86 (d)(1-5))
- N3. All findings and recommendations for improvement will be documented on the 14-2F Sexual Abuse Incident Review Report. Completed 14-2F forms will be forwarded to the Warden/Facility Administrator, the PREA Compliance Manager, and the FSC PREA Compliance Coordinator. (115.86

- N4. The facility shall implement the recommendations for improvement or shall document not doing so. (115.86 (e))

O. ADMINISTRATIVE AND CRIMINAL INVESTIGATIONS

The Warden/Facility Administrator shall ensure that an administrative investigation and a criminal investigation, where appropriate, are completed for all allegations of sexual abuse or harassment. (115.22 (a)) (**ACI 4-4281-3; 4-ALDF-4D-22-2**)

O1. Administrative Investigation

The administrative investigation shall include an effort to determine whether staff actions or inactions contributed to the abuse. Such investigations shall be documented on the 5-1G Incident Investigation Report via the IRD and shall detail the following components: (115.71 (f)(1))

- O1a. Investigative facts (i.e. specific details about what actually happened);
- O1b. Physical evidence (e.g. clothes collected, medical evidence, etc.);
- O1c. Testimonial evidence (e.g. witness statements);
- O1d. Reasoning behind credibility assessments (i.e. why is the person deemed credible or not credible). Credibility shall be assessed on an individual basis and shall not be determined by the presence of an inmate/detainee or employee.; (115.71 (f)(2))
- O1e. Investigative findings (i.e. discovery or outcome of the investigation); and
- O1f. Whether actions and/or failures of staff to act contributed to the incident, including an effort to determine what determined the conclusion.

O2. Roles within a Criminal Investigation

O2a. Whenever feasible, the facility shall enter into a written Memorandum of Understanding with an outside investigating agency or entity outlining the roles and responsibilities of both the facility and the investigating entity in performing sexual abuse investigations. Before developing or attempting to enter into an MOU, the facility shall contact the FSC Assistant General Counsel, Vendor Contracting, and the Vendor shall maintain copies of agreements or documentation showing attempts to enter into such an agreement.

O2a1. When outside agencies investigate sexual abuse, the facility shall cooperate with outside agencies and shall endeavor to remain informed about the progress of the investigation. (115.71 (f)(3))

O2b. The facility investigator, as delegated by the PREA Compliance Manager and/or Warden/Facility Administrator, shall establish a relationship with local law enforcement agencies and periodically develop a clear understanding of the investigative guidelines and procedures during a criminal investigation of an alleged sexual abuse incident.

O2c. Discussions with state or local law enforcement should articulate a delineation of roles and responsibilities between the facility investigator and the law enforcement investigator.

O2d. Facility employees will assist the state or local law enforcement by preserving the integrity of the evidence so that cases are not lost based on lack of evidence, improper technique, and/or lack of credibility.

O3. Contracting Governmental Agencies with Required Internal Investigation Processes

O3a. If the contracting governmental correctional agency utilizes an internal investigative process under contract, law, or regulation, that agency's investigative process will be invoked for all allegations of sexual abuse.

O3b. AT THIS FACILITY, ADDITIONAL CONTRACTING AGENCY REQUIREMENTS PER THE INVESTIGATION OF RAPE, SEXUAL ASSAULT, OR EMPLOYEE ON INMATE/SEXUAL MISCONDUCT ARE:

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O4. Responsibilities of the Investigating Entity

Investigations conducted by a facility employee for allegations of sexual abuse will be handled in accordance with the Code of Federal Regulations, Title 28, Part 115.21, Evidence Protocol and Medical Examinations, as outlined below. If the facility is not responsible for investigating the allegations, the facility shall request that the responsible outside agency or entity (i.e. state law enforcement, contracting agency, etc.) comply with these requirements. (115.21 (f))

O4a. The investigating entity shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution. (a)

O4b. The protocol shall be developmentally appropriate for youth where applicable, and, as applicable, shall be adapted from or otherwise based on the most recent edition of the Department of Justice Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocol published after 2011. (115.21 (b))

O4c. The investigating entity shall offer all victims of sexual abuse access to forensic medical examinations, whether onsite or at an outside facility, without financial cost, where evidentially or medically appropriate. Such examinations shall be performed by a SAFE or SANE where possible. If SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The investigating entity shall document its efforts to provide SAFEs or SANEs. (115.21 (c))

O4d. The investigating entity shall attempt to make available to the victim a victim advocate or victim center. The investigating entity may utilize a rape crisis center that is part of a governmental agency as the center is not part of the criminal justice system (such as a law enforcement agency) to provide a comparable level of confidentiality as a non-governmental entity that provides similar victim services. (115.21 (d))

O4d1. If a rape crisis center is not available to provide victim advocate services, the investigating entity shall make available a qualified staff member from a community-based organization, or a qualified investigating entity staff member, to provide these services.

O4d2. The investigating entity shall document efforts to secure services from rape crisis centers.

O4e. As requested by the victim, either the victim advocate, a qualified investigating entity staff member, or a qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide support, crisis intervention, information, and referrals. (115.21 (e))

O5. In any sexual abuse or sexual harassment investigation in which the facility is the primary entity, the facility shall utilize a preponderance of the evidence standard for determining whether sexual abuse or sexual harassment has taken place. (115.72)

P. INCIDENT CLASSIFICATION

All allegations of sexual abuse shall be reported in accordance with CoreCivic Policy 5-1 Reporting.

P1. Incident Classification

- P1a. Following completion of the investigation, the allegation will be classified as follows:
- P1a1. Substantiated – An incident shall be classified as substantiated if the results of the investigation determine that the allegation did occur.
- P1a2. Unsubstantiated – An incident shall be classified as unsubstantiated if the results of the investigation determine that the evidence was insufficient to make a final determination of whether or not the allegation occurred.
- P1a3. Unfounded – An incident shall be classified as unfounded if the results of the investigation determine that the allegation did not occur.
- P1b. The Warden/Facility Administrator will determine the appropriate classification of the incident and ensure that the 5-1E PREA Reporting form (refer to CoreCivic Policy 5-1 Incident Reporting) is completed and maintained with the incident packet.

Q. INMATE/DETAINEE NOTIFICATIONS

- Q1. Following an investigation into an inmate/detainee's allegation that he/she suffered sexual abuse at the facility, the inmate/detainee shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. If the facility did not conduct the investigation, information shall be requested from the outside investigating agency or entity in order to determine the allegation. (115.73 (a)(b))
- Q2. Following an inmate/detainee's allegation that an employee has committed sexual abuse at the facility, the facility shall subsequently inform the inmate/detainee (unless the facility has determined that the allegation is unfounded) whenever:
 - Q2a. The employee is no longer posted within the inmate/detainee's unit as a result of the facility's investigation;
 - Q2b. The employee is no longer employed at the facility as a result of the allegation;
 - Q2c. The facility learns that the employee has been indicted on a charge related to sexual abuse at the facility; or
 - Q2d. The facility learns that the employee has been convicted on a charge related to sexual abuse at the facility. (115.73 (c)(1-4))
- Q3. Following an inmate/detainee's allegation that he/she has been sexually abused by an inmate/detainee, the facility shall subsequently inform the alleged victim whenever:
 - Q3a. The facility learns that the alleged abuser has been indicted on a charge related to sexual abuse at the facility; or
 - Q3b. The facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. (115.73 (d)(1, 2))
- Q4. All inmate/detainee notifications or attempted notifications shall be documented on the 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. (115.73 (e))
- Q5. The facility's obligation to notify the inmate/detainee as outlined in this section shall terminate when the inmate/detainee is released from CoreCivic's custody. (115.73 (f))

R. DISCIPLINARY PROCEDURES

- R1. Inmates/Detainees
 - R1a. Substantiated Incidents

- R1a1. All inmates/detainees found guilty of sexual abuse shall be institutionally disciplined in the facility disciplinary procedures. (115.78 (a))
- R1a2. Because the burden of proof is substantially easier to prove in an inmate/detainee's di than in a criminal prosecution, an inmate/detainee may be institutionally disciplined ever enforcement officials decline to prosecute.
- R1a3. Sanctions shall be commensurate with the nature and circumstances of the abuse cor inmate/detainee's disciplinary history, and the sanctions imposed for comparable offens inmates/detainees with similar histories. (115.78 (b))
- R1a4. The disciplinary process shall consider whether an inmate/detainee's mental disabilitie illness contributed to his/her behavior when determining what type of sanction, if any, sh imposed. (115.78 (c))
- R1a5. An inmate/detainee may be disciplined for sexual conduct with an employee only upor the employee did not consent to such contact. (115.78 (e))
- R1a6. Sexual activity between inmates/detainees is prohibited in all CoreCivic facilities, and inmates/detainees may be disciplined for such activity. Such activity shall not be deeme it is determined that the activity is not coerced. (115.78 (g))
- R1b. Deliberate False Allegations
- R1b1. Inmates/detainees who deliberately allege false claims of sexual abuse can be disciplir
- R1b2. The Warden/Facility Administrator or designee should contact law enforcement to dete deliberately false accusation may be referred for prosecution.
- R1c. Disciplinary Sanctions

If the facility offers therapy, counseling, or other interventions designed to address and c underlying reasons or motivations for the abuse, the facility shall consider whether to rep perpetrator to participate in such interventions as a condition of access to programming (115.78 (d))

AT THIS FACILITY, THE FOLLOWING INTERVENTIONS MAY BE AVAILABLE TO T PERPETRATOR:

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- R2. Employees
- R2a. Employees shall be subject to disciplinary sanctions up to and including termination for CoreCivic's sexual abuse or sexual harassment policies. Termination shall be the presu disciplinary sanction for employees who have engaged in sexual abuse. (115.76 (a)(b))
- R2b. Disciplinary sanctions for violations of CoreCivic policies relating to sexual abuse or se (other than actually engaging in sexual abuse) shall be commensurate with the nature a circumstances of the acts committed, the employee's disciplinary history, and the sancti comparable offenses by other employees with similar histories. (115.76 (c))
- R2c. All terminations for violations of CoreCivic sexual abuse or sexual harassment policies, by employees who would have been terminated if not for their resignation, shall be repo enforcement agencies, unless the activity was clearly not criminal, and to any relevant li (115.76 (d))
- R2d. Neither CoreCivic nor any other entity responsible for collective bargaining on CoreCiv enter into or renew any collective bargaining agreement or other agreement that limits th

ability to remove alleged employee sexual abusers from contact with any inmates/detainees pending the outcome of an investigation or of a determination of whether and to what extent disciplinary action is warranted. Nothing in this requirement shall restrict the entering into or renewal of agreements that

(a))

R2d1. The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions outlined above in R2a-c. and a preponderance of the evidence in determining whether abuse or sexual harassment is substantiated.

R2d2. Whether a no-contact assignment that is imposed pending the outcome of an investigation is expunged from or retained in the employee's personnel file following a determination that the conduct of sexual abuse is not substantiated. (115.66 (b)(1, 2))

R3. Civilians/Contractors

Any civilian or contractor who engages in sexual abuse shall be prohibited from contact with inmates/detainees and shall be reported to law enforcement agencies and to any relevant regulatory body. Any other violation of CoreCivic sexual abuse or sexual harassment policies by a contractor will result in further prohibitions. (115.77 (a)(b))

S. POST INCIDENT CLASSIFICATION PROCEDURES

S1. Once the investigation is complete, the necessity of filing any inmate/detainee "incomplete" notices between the victim and perpetrator will be evaluated, such that the victim and perpetrator or potential perpetrator are kept separate while housed at the CoreCivic facility. Recommend a transfer to another facility.

S2. The predatory inmate/detainee shall be reclassified in accordance with the applicable classification procedures.

T. COLLECTION AND USE OF DATA

T1. Internal

All case records associated with claims of sexual abuse, including incident reports, investigation findings, inmate/detainee information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling shall be retained in accordance with CoreCivic Policy 1-15 Retention of Records. (115.87 (d)) **(ACI 4-4281-8; 4-ALDF-4D-22)**

T1a. Allegation Tracking

T1a1. Each facility will ensure that incidents of sexual abuse are entered into the IRD as required by CoreCivic Policy 5-1 Incident Reporting and 5-1BB PREA 5-1 IRD Incident Reporting Data. (115.87 (a))

T1a2. At least annually, CoreCivic shall aggregate the incident-based sexual abuse data. (115.87 (b))

T1a3. The aggregated data will, at a minimum, include all categories of data necessary to respond to the Survey of Sexual Violence as directed by the Department of Justice. (115.87 (c))

T1a4. Data collected for this purpose shall be securely stored and retained in accordance with CoreCivic Policy 1-15 Retention of Records. (115.89 (a))

T2. External

T2a. Upon request, CoreCivic shall provide all data as outlined above in T1a1-3. from the previous year to the Department of Justice no later than June 30. (115.87 (f))

- T2b. Any requests for information from an outside agency or entity (excluding the contractin correctional agency) regarding incidents of sexual abuse/harassment shall be forwarded by the FSC General Counsel or designee, and the FSC PREA Coordinator, prior to send response to the requesting entity.
- T2c. Public Access
 - T2c1. The FSC PREA Coordinator shall make all aggregated sexual abuse data available to least annually through the CoreCivic website. (115.89 (b))
 - T2c2. Before making aggregated sexual abuse data publicly available, CoreCivic shall remov identifiers. (115.89 (c))
- T3. Data Review
 - T3a. The FSC PREA Coordinator shall review all aggregated sexual abuse data collected ir and improve the effectiveness of its sexual abuse prevention, detection, and response p practices, and training, to include:
 - T3a1. Identifying problem areas;
 - T3a2. Taking corrective action on an ongoing basis; and
 - T3a3. Preparing an annual report of findings and corrective actions for each facility, as well a whole. (115.88 (a)(1-3))
 - T3b. Such report shall include a comparison of the current year's data and corrective action prior years and shall provide an assessment of CoreCivic's progress in addressing sexu (115.88 (b))
 - T3c. CoreCivic's report shall be approved by the company's Chief Corrections Officer and n available to the public through the CoreCivic website. (115.88 (c))
 - T3d. Specific material may be redacted from the reports when publication would present a c threat to the safety and security of a facility, but the nature of the material redacted mus (115.88 (d))

U. QUALITY ASSURANCE COMPLIANCE

U1. Internal Audits

The FSC Quality Assurance Department shall conduct an annual audit of all CoreCivic f ensure compliance with CoreCivic policy, the PREA National Standards, and federal law

U2. External Audits

An external audit of all CoreCivic facilities shall be conducted every three (3) years to er with this policy, the PREA National Standards, and federal law and regulations. The FS Assurance Department will coordinate all such external audits in conjunction with the FS Compliance Coordinator, to include all aspects of the audit process as outlined in this se

U2a. The external audit shall be conducted by any of the following:

- U2a1. A member of a correctional monitoring body that is not part of, or under the authority o may be part of, or authorized by, the relevant state or local government);
- U2a2. A member of an auditing entity such as an inspector general's or ombudsperson's offic to CoreCivic; or
- U2a3. Other outside individuals with relevant experience.

U2b. External Auditor Qualifications

- U2b1. All auditors shall be certified by the Department of Justice. The Department of Justice shall issue procedures regarding the certification process, which shall include training requirements.
- U2b2. Each audit shall include a certification by the auditor that no conflict of interest exists with his/her ability to conduct an audit of CoreCivic.
- U2b3. No audit may be conducted by an auditor who has received financial compensation from (except for compensation received for conducting prior PREA National Standards audits (3) years prior to CoreCivic's retention of the auditor).
- U2b4. CoreCivic will not employ, contract with, or otherwise financially compensate the auditor for any years subsequent to the company's retention of the auditor, with the exception of contracts for subsequent PREA National Standards audits.
- U2c. The Audit Process
 - U2c1. The auditor shall review all relevant company-wide policies, procedures, reports, internal audits, and accreditations for each facility type.
 - U2c2. The audits shall review, at a minimum, a sampling of relevant documents and other relevant information for the most recent one (1) year period.
 - U2c3. The auditor shall have access to, and shall observe, all areas of the audited facilities.
 - U2c4. The auditor shall be permitted to request and receive copies of any relevant document (including electronically-stored information).
 - U2c5. The auditor shall retain and preserve all documentation (including, e.g. video tapes and notes) relied upon in making audit determinations. Such documentation shall be provided to the Department of Justice upon request.
 - U2c6. The auditor shall review a sampling of any available videotapes and other electronically stored information (e.g. Watchtour) that may be relevant to the provisions being audited.
 - U2c7. The auditor shall interview a representative sample of inmates/detainees and employee supervisory staff).
 - U2c8. The auditor shall be permitted to conduct private interviews with inmates/detainees.
 - U2c9. Inmates/detainees shall be permitted to send confidential information or correspondence in the same manner as if they were communicating with legal counsel.
 - U2c10. Auditors shall attempt to communicate with community-based or victim advocates who can provide insight into relevant conditions in the facility.
- U2d. Audit Report and Findings
 - U2d1. Audit reports shall state whether company-wide policies and procedures comply with the PREA National Standards.
 - U2d2. For each PREA National Standard, the auditor shall determine whether the audited facility meets the following findings:
 - Exceeds Standard (substantially exceeds requirement of the standard);
 - Meets Standard (substantial compliance; complies in all material ways with the standard during the relevant review period); or
 - Does Not Meet Standard (requires corrective action).
 - U2d3. The audit summary shall indicate, among other things, the number of provisions the facility achieved at each grade level.

- U2d4. Audit reports shall describe the methodology, sampling sizes, and basis for the auditor with regard to each standard provision for each audited facility, and shall include recommending any required corrective action.
- U2d5. Auditors shall redact any personally identifiable inmate/detainee or employee information reports, but shall provide such information to CoreCivic upon request, and may provide information to the Department of Justice.
- U2d6. CoreCivic will ensure that the auditor's final report is published on CoreCivic's website and readily available to the public.
- U2e. Audit Corrective Action Plan
 - U2e1. A finding of "Does Not Meet Standard" with one or more standards shall trigger a one-hundred-eighty (180) day corrective action period. The auditor and CoreCivic shall jointly develop the corrective action plan to achieve compliance.
 - U2e2. The auditor shall take necessary and appropriate steps to verify implementation of the corrective action plan, such as reviewing updated policies and procedures or re-inspecting portions of a facility.
 - U2e3. After the one-hundred-eighty (180) day corrective action period ends, the auditor shall determine as to whether the facility has achieved compliance with those standards and report the results of the corrective action.
 - U2e4. If compliance with each standard is not achieved, the FSC PREA Compliance Coordinator shall schedule a subsequent audit (at its discretion and cost) once it is believed that compliance has been achieved.
- U2f. Audit Appeals
 - U2f1. An appeal may be filed with the Department of Justice regarding any specific audit finding that is believed to be incorrect. Such appeal must be filed within ninety (90) days of the auditor's final determination.
 - U2f2. If the Department of Justice determines that there is good cause for a re-evaluation, CoreCivic shall commission a re-audit by an auditor mutually agreed upon by the Department of Justice and CoreCivic shall bear the costs of this re-audit.
 - U2f3. The findings of the re-audit shall be considered final.

V. UPGRADES TO FACILITIES AND TECHNOLOGIES

- V1. When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, CoreCivic will consider the effect of the design, acquisition, expansion or modification on the company's ability to protect inmates/detainees from sexual abuse. Such considerations shall be documented on form 7-1B PREA Physical Plant Considerations.
- V2. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, CoreCivic will consider how such technology may enhance the ability to protect inmates/detainees from sexual abuse. Such considerations shall be documented on form 7-1B Physical Plant Considerations. (115.18 (b))

REVIEW:

This policy will be reviewed annually by the General Counsel or qualified designee.

APPLICABILITY:

All CoreCivic Safety Facilities

APPENDICES:

- 14-2AA [Preventing Sexual Abuse and Misconduct Brochure \(English\)](#)
- 14-2AA [Preventing Sexual Abuse and Misconduct Brochure \(Spanish\)](#)
- 14-2BB PREA 5-1 IRD Incident Reporting Definitions [**MOVED TO CORECIVIC POLICY 5 REPORTING AS APPENDIX 5-1BB PREA 5-1 IRD INCIDENT REPORTING DEFINITIONS**]
- 5-1BB [PREA 5-1 IRD Incident Reporting Definitions](#)

ATTACHMENTS:

- 14-2A [PREA Policy and Training Acknowledgement](#)
- 14-2B [Sexual Abuse Screening Tool](#)
- 14-2C [Sexual Abuse Incident Check Sheet](#)
- 14-2D [PREA Retaliation Monitoring Report \(30/60/90\)](#)
- 14-2E [Inmate/Detainee Allegation Status Notification](#)
- 14-2F [Sexual Abuse Incident Review Report](#)
- 14-2G PREA Physical Plant Considerations [**MOVED TO CORECIVIC POLICY 7-1 RECORD DRAWINGS AND ALTERATIONS/ADDITIONS AS FORM 7-1B PREA PHYSICAL CONSIDERATIONS**]
- 14-2H [Self-Declaration of Sexual Abuse/Sexual Harassment](#)
- 14-2I [Annual PREA Staffing Plan Assessment](#)
- 3-20-2B [PREA Questionnaire for Prior Institutional Employers](#)
- 5-1B [Notice to Administration](#)
- 5-1E [PREA Reporting](#)
- 7-1B [PREA Physical Plant Considerations](#)

REFERENCES:

- CoreCivic Policy 1-15 Retention of Records
- CoreCivic Policy 4-2 Maintenance of Training Records
- CoreCivic Policy 5-1 Incident Reporting
- CoreCivic Policy 7-1 Record Drawings and Alterations/Additions
- CoreCivic Policy 13-79 Sexual Assault Response
- PREA National Standards – Title 28 of the Code of Federal Regulations, Part 115
- Bureau of Justice Statistics (BJS) Survey of Sexual Violence (SSV)
- American Correctional Association (ACA) Standards for Adult Correctional Institutions (ACI) and Detention Facilities (ALDF):
- ACI 4-4056
- ACI 4-4084
- ACI 4-4277
- ACI 4-4281 through 4-4281-8
- ACI 4-4406
- 4-ALDF-2A-29
- 4-ALDF-4D-22-1 through 8
- 4-ALDF-6B-02
- 4-ALDF-7B-10; 4-ALDF-7B-10-1

