

		POLICY		Page 1 of 34	Policy Number 14-2-DHS
POLICY TITLE	SEXUAL ABUSE PREVENTION AND RESPONSE				
FSC EFFECTIVE DATE		June 19, 2017	FSC SUPERSEDES DATE		November 3, 2014 and PCNs (01) 5/26/15, (02) 1/16/17, (03) 4/19/17
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FACILITY NAME					
FACILITY EFFECTIVE DATE			FACILITY SUPERSEDES DATE		

14-2.1 POLICY:

CoreCivic is committed to protecting detainees from personal abuse, corporal punishment, personal injury, disease, property damage, and harassment (**ACI 4-4281**). This policy provides CoreCivic detention facilities with a mechanism for complying with the Prison Rape Elimination Act (PREA) of 2003, Department of Homeland Security (DHS) Standards to Prevent Detect and Respond to Sexual Abuse and Assault in Confinement Facilities (79 Fed. Reg. 13100 March 7, 2014) and the Immigration and Customs Enforcement (ICE) 2016 Revisions to the ICE Performance-Based National Detention Standards (PBNDS).

CoreCivic has mandated zero-tolerance towards all forms of sexual abuse. Such conduct is prohibited by this policy and will not be tolerated; to include Detainee-on-Detainee Sexual Abuse and Employee-on-Detainee Sexual Abuse. When it is learned that a detainee is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the detainee. It is CoreCivic's policy to aggressively investigate all allegations, regardless of the source, and prosecute those who are involved in incidents of sexual abuse. Alleged victims of sexual abuse will be provided a supportive and protective environment. (115.11 (a), 115.62)

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

14-2.2 AUTHORITY:

CoreCivic Company Policy

14-2.3 DEFINITIONS:

Bad Faith – Acting with a dishonest belief or purpose.

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

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

Detainee – Any person detained in an immigration detention facility or holding facility

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

Employee – A person employed by CoreCivic in an approved full-time or part-time position that is designated as 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 in order to combat a threat to the security or order of a facility or security of any person.

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

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

FSC PREA Coordinator – An upper-level management FSC employee designated to develop, implement, and oversee CoreCivic's companywide efforts to comply with the PREA National Standards and the company's Sexual Abuse Response and Prevention Program. He/she must provide supervisory oversight to all CoreCivic facilities ensuring 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 societal gender expectations.

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

Intersex – A person who has a sexual or reproductive anatomy or chromosomal pattern that does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

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

Prevention of Sexual Assault (PSA) 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. The PSA Compliance Manager serves as the facility point of contact for the local field office and ICE PSA Coordinator.

PREA National Standards – Part 115 of Title 6 of the Code of Federal Regulations, the Prison Rape Elimination Act National Standards, including Subpart A, Standards for Immigration Detention facilities.

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

Preponderance of the Evidence Standard – An evidentiary standard under which an allegation is deemed substantiated if the weight of the available evidence indicates that the allegation is more likely than not 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 social 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 specified 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 (SANE) is a specially trained registered nurse, physician assistant, or physician who provides comprehensive care, and timely collection of forensic evidence and testimony in sexual assault cases.

Detainee-on-Detainee Sexual Abuse and/or Assault – Sexual abuse of a detainee by another detainee

includes any of the following acts by one or more detainees who, by force, coercion, or intimidation, or if the victim did not consent or was unable to consent or refuse, engages in or attempts to engage in:

- a. Contact between the penis and the vagina or anus and, for purposes of this subparagraph, contact involving the penis upon penetration, however slight;
- b. Contact between the mouth and the penis, vagina or anus;
- c. Penetration, however slight, of the anal or genital opening of another person by a hand or finger or by any object;
- d. Touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, with an intent to abuse, humiliate, harass, degrade or arouse or gratify the sexual desire of any person; or
- e. Threats, intimidation, or other actions or communications by one or more detainees aimed at coercing or pressuring another detainee to engage in a sexual act.

Staff-on-Detainee Sexual Abuse and/or Assault – Sexual abuse of a detainee by a staff member, contractor, or volunteer includes any of the following acts, if engaged in by one or more staff members, volunteers, or contract personnel who, with or without the consent of the detainee, engages in or attempts to engage in:

- a. Contact between the penis and the vagina or anus and, for purposes of this subparagraph, contact involving the penis upon penetration, however slight;
- b. Contact between the mouth and the penis, vagina or anus;
- c. Penetration, however slight, of the anal or genital opening of another person by a hand or finger or by any object that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- d. Intentional touching of the genitalia, anus, groin, breast, inner thighs or buttocks, either directly or through the clothing, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire;
- e. Threats, intimidation, harassment, indecent, profane or abusive language, or other actions or communications aimed at coercing or pressuring a detainee to engage in a sexual act;
- f. Repeated verbal statements or comments of a sexual nature to a detainee;
- g. Any display of his or her uncovered genitalia, buttocks, or breast in the presence of a detainee, or;
- h. Voyeurism, which is defined as the inappropriate visual surveillance of a detainee for reasons unrelated to official duties. Where not conducted for reasons relating to official duties, the following are examples of voyeurism: staring at a detainee who is using a toilet in his or her cell to perform bodily functions; requiring a detainee to expose his or her buttocks, genitals, or breasts; or taking images of all or part of a detainee's naked body or of a detainee performing bodily functions.

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

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

14-2.4 PROCEDURES:

PROCEDURES INDEX

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A. PSA COMPLIANCE MANAGER

The facility shall designate a Prevention of Sexual Assault (PSA) Compliance Manager who shall serve as the facility point-of-contact for the local ICE field office and ICE PSA Coordinator. The PSA Compliance Manager must have sufficient time and authority to oversee facility efforts to comply with facility sexual abuse and assault prevention and intervention policies and procedures. (115.11 (d)). The PSA Compliance Manager shall:

1. Assist with the development of written policies and procedures for the Sexual Abuse and Assault Prevention and Intervention (SAAPI) Program, and with keeping them current;
2. Assist with the development of initial and ongoing training protocols;
3. Serve as a liaison with other agencies;
4. Coordinate the gathering of statistics and reports on allegations of sexual abuse or assault;
5. Review the results of every investigation of sexual abuse and assist in conducting an annual review of all investigations to assess and improve prevention and response efforts; and
6. Review facility practices to ensure required levels of confidentiality are maintained.

B. PREVENTION PROCEDURES

1. Confidentiality
 - a. All information concerning an event of detainee sexual abuse is to be treated as confidential. Apart from reporting to designated supervisors or officials, employees shall not reveal any 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. This information should never be shared with other detainees.
 - b. Appropriate controls shall be implemented within the facility regarding the dissemination of responses to questions asked pursuant to screening for risk of victimization and abusiveness in order to ensure that sensitive information is not exploited by employees or other detainees to the detainee's detriment. (115.41 g))
 - c. Security and management of documentation containing PREA information will be in accordance with CoreCivic and/or agency policy regarding records management, records retention, HIPAA, etc.
2. Hiring and Promotion

- a. To the extent permitted by law, CoreCivic will decline to hire or promote anyone who may have contact with detainees, and decline to enlist the services of any contractor, or volunteer, who may have contact with detainees, who:
 - i. Has engaged in sexual abuse in a prison, jail, holding facility, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997);
 - ii. Has been convicted of engaging or attempting to engage in sexual activity 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
 - iii. Has been civilly or administratively adjudicated to have engaged in the activity as outlined above in B.2.a.ii. (115.17 (a))

NOTE: To the extent permitted by law, CoreCivic may decline to hire or promote and may terminate employment based on material omissions regarding such misconduct, or the provision of materially false information. (115.17 (e))

- b. All applicants and employees who may have direct contact with detainees shall be asked about previous misconduct, as outlined above in B.2.a.i-iii., in written applications or interviews for hiring or promotions, and in any interviews or written self-evaluations conducted as part of reviews of current employees. (115.17 (b))
 - i. The 14-2H-DHS Self-Declaration of Sexual Abuse form will be completed upon application for employment and as part of the promotional interview process.
 - ii. The 14-2H-DHS Self-Declaration of Sexual Abuse form shall also serve as verification of an employee's fulfillment of his/her continuing affirmative duty to disclose any sexual misconduct as described in this policy, and as outlined above in B.2.a.i-iii.
- c. Background Records Check
 - i. Before hiring new employees who may have contact with detainees, CoreCivic shall:
 - Perform a criminal background records check; and (115.17 (c))
 - 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 resignation during a pending investigation of an allegation of sexual abuse as defined by this policy. The 3-20-2A Verification of Employment form shall be used to solicit such prior employment information.
 - ii. CoreCivic shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with detainees. (115.17 (d))
 - iii. CoreCivic shall conduct criminal background records checks at least every five (5) years of current employees and unescorted contractors who may have contact with detainees or have in place a system for otherwise capturing such information. (115.17 (c)) Unless prohibited by law, CoreCivic shall provide information on substantiated allegations of sexual abuse involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. (115.17 (f))

3. Staff Training

a. Employees

Training on the facility's Sexual Abuse or Assault Prevention and Intervention Program shall be included in training for all new employees, and shall also be included in annual refresher training thereafter. **(ACI 4-4084; ACI-4-4084-1; 4-ALDF-7B-08; 4-ALDF-7B-10; 4-ALDF-7B-10-1)** Employee training shall ensure facility staff are able to fulfill their responsibilities under DHS standards, and shall include: (115.31) (2016 PBNDS V E)

- i. The facility's zero-tolerance policies for all forms of sexual abuse;
- ii. Definitions and examples of prohibited and illegal sexual behavior;
- iii. The right of detainees and staff to be free from sexual abuse, and from retaliation for reporting sexual abuse;
- iv. Instruction that sexual abuse and/or assault is never an acceptable consequence of detention;
- v. Recognition of situations where sexual abuse and/or assault may occur;
- vi. How to avoid inappropriate relationships with detainees;
- vii. Working with vulnerable populations and addressing their potential vulnerability in the general population;
- viii. Recognition of the physical, behavioral and emotional signs of sexual abuse and/or assault and ways to prevent and respond to such occurrences;
- ix. The requirement to limit reporting of sexual abuse and assault to personnel with a need-to-know in order to make decisions concerning the detainee-victim's welfare, and for law enforcement/investigative purposes;
- x. The investigation process and how to ensure that evidence is not destroyed;
- xi. Prevention, recognition and appropriate response to allegations or suspicions of sexual assault involving detainees with mental or physical disabilities;
- xii. How to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees;
- xiii. Instruction on reporting knowledge or suspicion of sexual abuse and/or assault; and
- xiv. Instruction on documentation and referral procedures of all allegations or suspicion of sexual abuse and or assault

b. Specialized Training

- i. In addition to the general training provided to all employees, security staff shall receive training in how to conduct cross-gender pat-down searches, and searches of transgender and intersex detainees, in a manner that is professional, respectful, and the least intrusive possible while being consistent with security needs. (115.15 (j))
- ii. The facility shall provide specialized training on sexual abuse and effective cross-agency coordination to Facility Investigators who conduct investigations into allegations of sexual abuse at immigration detention facilities. This training covers, interviewing sexual abuse and assault victims, sexual abuse and assault evidence collection in confinement settings, the criteria and evidence required for administrative action or

- prosecutorial referral, and information about effective cross-agency coordination in the investigation process. (115.34 (a))
- iii. The PSA Compliance Manager shall ensure that more than one (1) person at the facility receives training as a sexual abuse investigator. This will ensure that a trained investigator is available as a back-up during employee absences (e.g. leave, paid time off, sickness, offsite training, etc.) from work.
 - iv. In addition to the general training provided to all employees, all full and part-time Qualified Health Care Professionals and Qualified Mental Health Professionals, who work in the facility, (115.35 (a)) shall receive specialized medical training as outlined below:
 - How to detect and assess signs of sexual abuse;
 - How to preserve physical evidence of sexual abuse;
 - How to respond effectively and professionally to victims of sexual abuse;
 - How and to whom to report allegations of sexual abuse; and
 - How to preserve physical evidence of sexual abuse. (115.35 (b)(1-4))
- c. Civilians/Contractors/Volunteers
- i. The facility shall ensure that all volunteers and other contractors who have contact with detainees have been trained on their responsibilities under the facility's sexual abuse prevention, detection, intervention and response policies and procedures. (115.32 (a))
 - ii. The level and type of training for volunteers and contractors will be based on the services they provide and their level of contact with detainees; however, all volunteers and contractors who have any contact with detainees must be notified of the facility's zero-tolerance policy and informed how to report such incidents. (115.32 (b))
 - iii. Civilians/contractors/volunteers who have contact with detainees on a recurring basis shall be provided a copy of this policy prior to admission to the facility to begin their assignment or task.
- d. Training and Policy Acknowledgement Documentation
- i. Employees shall be required to confirm, by either electronic or manual signature, their understanding of the received training. Signed documentation will be maintained in the employee's training file.
 - ii. Civilians/contractors/volunteers shall be required to confirm, by either electronic or manual signature, their understanding of the received training. Signed documentation will be maintained in the civilian or contractor's file. (115.32 (c))
 - iii. Employees: The 14-2A-DHS Policy Acknowledgement form shall be completed by each employee serving as verification of the employee's review and understanding of the contents of this policy. The completed forms will be maintained by the Manager, Human Resources. A newly signed 14-2A-DHS Policy Acknowledgement form will be required for future revisions of this policy as determined necessary by the FSC General Counsel or designee.

- iv. Civilians/Contractors/Volunteers: The 14-2A-DHS Policy Acknowledgement form serves as verification of the civilian's or contractor's review and understanding of the contents of this policy and shall be completed by each civilian or contractor who has contact with detainees. The completed forms will be maintained by the Manager, Human Resources. A newly signed 14-2A-DHS Policy Acknowledgement form will be required for future revisions of this policy as determined by the FSC General Counsel or designee.
- v. Documentation confirming that investigators have completed the required specialized training in conducting sexual abuse investigations shall be maintained in accordance with CoreCivic Policies 1-15 Record Retention and 4-2 Maintenance of Training Records. (115.34 (b))

C. SUPERVISION AND MONITORING

1. The CoreCivic Facility Support Center (FSC) will develop, in coordination with the facility, comprehensive detainee supervision guidelines to determine and meet the facility's detainee supervision needs, and shall review those guidelines at least annually. (115.13 (b)) Each facility will ensure sufficient supervision of detainees, including through appropriate staffing levels and, where applicable, video monitoring, to protect detainees against sexual abuse. (115.13 (a))
2. In calculating staffing levels and determining the need for video monitoring, the following factors shall be taken into consideration:
 - a. Generally accepted detention and correctional practices;
 - b. Any judicial findings of inadequacy;
 - c. All components of the facility's physical plant;
 - d. The composition of the detainee population;
 - e. The prevalence of substantiated and unsubstantiated incidents of sexual abuse;
 - f. Recommendations of sexual abuse incident review reports; and
 - g. Any other relevant factors, including but not limited to the length of time detainees spend in agency custody. (115.13 (c))
3. Annual PREA Staffing Plan Assessment
 - a. Whenever necessary, but no less frequently than once each year, for each CoreCivic facility, an annual PREA staffing plan assessment will be completed.
 - b. The Facility PSA Compliance Manager will complete the 14-2I-DHS Annual PREA Staffing Plan Assessment and forward it to the Facility Administrator for review. Upon completion of the Facility Administrator's review, the 14-2I-DHS Annual PREA Staffing Plan Assessment will be forwarded to the FSC PREA Coordinator.
 - c. In consultation with the respective FSC Business Unit Vice President, the FSC PREA Coordinator shall assess, determine, and document whether adjustments are needed to:
 - i. The staffing plan established pursuant to this section;
 - ii. The facility's deployment of video monitoring systems and other monitoring technologies; and
 - iii. The resources the facility has available to commit to ensure adherence to the staffing plan.
 - d. Changes to staffing, policy/procedure, physical plant, approved capital

expenditures, video monitoring and/or technology require the approval of the Business Unit Vice President

4. Supervision

- a. Staff, including supervisors, shall conduct frequent unannounced facility rounds to identify and deter sexual abuse of detainees. The occurrence of such rounds shall be documented in the applicable log (e.g. Administrative Duty Officer, post log, shift report, etc.). This practice shall be implemented for all shifts and all areas where detainees are permitted.
- b. Employees shall be prohibited from alerting other employees that supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility. (115.13 (d))

D. DETAINEE SCREENING, CLASSIFICATION AND REASSESSMENT

1. All detainees shall be screened upon arrival at the facility for potential risk of sexual victimization or sexually abusive behavior, and shall be housed to prevent sexual abuse or assault, taking necessary steps to mitigate any such danger. **(ACI 4-4281-2; 4-ALDF-4D-22-1)**
2. Each new detainee shall be kept separate from the general population until he/she has been classified and may be housed accordingly.
3. The initial classification process and initial housing assignment should be completed within twelve (12) hours of admission to the facility (115.41 (b)) **(ACI 4-4281-2; 4-ALDF-4D-22-1)**
4. The facility shall consider, to the extent that the information is available, the following criteria to assess detainees for risk of sexual victimization: (115.41 (c))
 - a. Whether the detainee has a mental, physical, or developmental disability;
 - b. The age of the detainee;
 - c. The physical build and appearance of the detainee;
 - d. Whether the detainee has previously been incarcerated or detained;
 - e. The nature of the detainee's criminal history;
 - f. Whether the detainee has any convictions for sex offenses against an adult or child;
 - g. Whether the detainee has self-identified as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
 - h. Whether the detainee has self-identified as having previously experienced sexual victimization; and
 - i. The detainee's own concerns about his or her physical safety.
5. Detainees shall not be disciplined for refusing to answer, or for not disclosing complete information in response to questions asked pursuant to items (a), (g), (h), or (i) above (115.41 (f))
6. The 14-2B-DHS Sexual Abuse Screening Tool form or electronic OMS version will be utilized to complete the initial screening.
7. The initial screening shall consider prior acts of sexual abuse or assault, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse or assault, as known to the facility, in assessing detainees for risk of being sexually abusive.
8. The facility shall implement appropriate protections on responses to questions asked pursuant to this screening, limiting dissemination, and ensuring that sensitive information

is not exploited to the detainee's detriment by staff or other detainees or detainees. (115.41 (g))

9. If screening indicates that a detainee has experienced prior sexual victimization or perpetrated sexual abuse, staff shall, as appropriate, ensure that the detainee is immediately referred to a qualified medical or mental health practitioner for medical and/or mental health follow-up as appropriate. **(ACI 4-4281-4; ACI-4-4281-5; 4-ALDF-4D-22-3; 4-ALDF-22-4)**
 - a. When a referral for medical follow-up is initiated, the detainee shall receive a health evaluation no later than two (2) working days from the date of assessment. (115.81 (b))
 - b. When a referral for mental health follow-up is initiated, the detainee shall receive a mental health evaluation no later than seventy-two (72) hours after the referral. (115.81 (c))
10. Reassessment

The facility shall reassess each detainee's risk of victimization or abusiveness between sixty (60) and ninety (90) days from the date of the initial assessment, and at any other time when warranted based upon the receipt of additional, relevant information or following an incident of abuse or victimization. (115.41 (e))

 - a. A reassessment of the detainee's risk level of victimization or abusiveness will be conducted by the appropriate Case Manager or a staff member designated by the Facility Administrator.
 - b. The 14-2B-DHS Sexual Abuse Screening Tool will be used for completing the re-assessment.
 - c. The reassessment will include any additional relevant information received by the facility since the initial intake screening; and (115.41 (e)) when warranted, due to a referral, request, incident of sexual abuse, or receipt of additional information that may impact the detainee's risk of victimization or abusiveness. (115.41 (e))
11. Completed 14-2B-DHS forms, will be maintained in the detainee's central file or electronic records, with a copy forwarded to the detainee's medical record and/or, where applicable, the detainee's electronic medical records.
12. Following any investigation into an allegation of sexual abuse, the necessity of filing any detainee "incompatible" or "keep separate" 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 or recommend a transfer to another facility.
13. The predatory detainee shall be reclassified in accordance with the applicable classification procedures.

E. HOUSING AND PROGRAM ASSIGNMENTS

1. The facility shall use the information from the 14-2B-DHS conducted at initial screening in the consideration of housing recreation, work program and other activities. (115.42 (a))
2. LGBTI and Gender Non-Conforming
 - a. In deciding whether to house a transgender or intersex detainee in a male housing unit/area or female housing unit/area, or when making other housing and programming assignments for such detainees, the facility shall consider the transgender or intersex detainee's gender self-identification and an assessment

of the effect of placement and shall consider on a case-by-case basis whether such a placement would ensure the detainee's health and safety. The facility shall consult a medical or mental health professional as soon as practicable on this assessment. (115.42 (b))

- b. The facility should not base *placement* decisions on transgender or intersex detainees solely on the identity documents or physical anatomy of the detainee; a detainee's self-identification of his/her gender and self-assessment of safety needs shall always be taken into consideration as well. (115.42 (b)) (**ACI 4-4277; 4-ALDF-6B-02**)
- c. Placement and programming assignments for each transgender or intersex detainee shall be reassessed at least twice each year to review whether any threats to safety were experienced by the detainee. (115.42 (b))

3. Segregation Housing

- a. Use of Administrative Segregation to protect detainees at high risk for sexual abuse and assault shall be restricted to those instances where reasonable efforts have been made to provide appropriate housing and shall be made for the least amount of time practicable, and when no other viable housing options exist, as a last resort. (115.42 (b))
- b. Detainees considered at risk for sexual victimization shall be placed in the least restrictive housing that is available and appropriate. If appropriate custodial options are not available at the facility, the facility will consult with the ICE Field Office Director to determine if ICE can provide additional assistance. Such detainees may be assigned to Administrative Segregation for protective custody 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) days. (115.43 (b))
- c. Staff shall document detailing reasons for placement of an individual in Administrative Segregation on the basis of a vulnerability to sexual abuse and assault. (115.43 (a))
- d. If involuntary segregated housing is warranted as outlined above in E.3.b., the facility will take the following actions:
 - i. A supervisory staff member shall conduct a review within seventy-two (72) hours of the detainee's placement in segregation to determine whether segregation is still warranted; and
 - ii. A supervisory staff member shall conduct, at a minimum, and identical review after the detainee has spent seven days in Administrative Segregation, and every week thereafter for the first thirty (30) days and every ten (10) days thereafter. (115.43 (d)(1-2))
- e. Facilities shall notify the appropriate ICE Field Office Director no later than seventy-two (72) hours after the initial placement into segregation, whenever a detainee has been placed in segregation on the basis of a vulnerability to sexual abuse or assault. (115.43)
- f. 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:
 - i. The opportunities that have been limited;
 - ii. The duration of the limitation; and

iii. The reasons for such limitations. (115.43 (c))

F. DETAINEE ORIENTATION AND EDUCATION

1. Upon admission, all detainees shall be notified of the facility's zero tolerance policy on sexual abuse and assault through the orientation program and detainee handbook. Detainees will be provided with information (orally and in writing) about the facility's SAAP Program. Such information shall include, at a minimum: (115.33 (a)) (**ACI 4-4281-1; 4-ALDF-2A-29**)
 - a. The facility's zero tolerance policy for all forms of sexual abuse or assault;
 - b. The name of the facility PSA Compliance Manager, and information about how to contact him/her;
 - c. Prevention and intervention strategies;
 - d. Definitions and examples of detainee-on-detainee sexual abuse and assault, staff-on-detainee sexual abuse and assault and coercive sexual activity;
 - e. Explanation of methods for reporting sexual abuse or assault, including one or more staff members other than an immediate point-of-contact line officer, the DHS/Office of Inspector General (OIG) and the ICE/Office of Professional Responsibility (OPR) investigation processes;
 - f. Information about self-protection and indicators of sexual abuse and assault;
 - g. Prohibition against retaliation, including an explanation that reporting an assault shall not negatively impact the detainee's immigration proceedings; and
 - h. The right of a detainee who has been subjected to sexual abuse to receive treatment and counseling.
2. The facility shall post on all housing unit bulletin boards the following notices: (115.33 (b))
 - a. The DHS-prescribed sexual abuse and assault awareness notice;
 - b. The name of the PSA Compliance Manager; and
 - c. Information about local organization(s) that can assist detainees who have been victims of sexual abuse or assault, including mailing addresses and telephone numbers (toll-free hotline numbers where available). If no such local organizations exist, the facility shall make available the same information about national organizations.
 - d. **AT THIS FACILITY, INFORMATION IS POSTED IN THE HOUSING AREAS ABOUT THE FOLLOWING LOCAL ORGANIZATIONS:**
3. The facility shall make available and distribute the DHS-prescribed "Sexual Assault Awareness Information" pamphlet. (115.33 (e))
4. During orientation, detainees shall be shown the CoreCivic Video "PREA What You Need to Know" This video will be shown in both English and Spanish. Detainees must sign and acknowledge that they have seen the video.
5. Information about reporting sexual abuse shall be included in the detainee handbook. The detainee shall sign for receipt of the handbook and a copy placed in his/her file
6. The facility shall maintain documentation of detainee participation in educational sessions pertaining to sexual abuse. (115.33 (c))

G. LIMITS TO CROSS GENDER VIEWING AND SEARCHES

1. Pat-down searches of male detainees by female staff shall not be conducted unless, after reasonable diligence, staff of the same gender is not available at the time the pat-down search is required or in exigent circumstances. (115.15 (b))
2. Pat-down searches of female detainees by male staff shall not be conducted unless in exigent circumstances. (115.15 (c))
3. All cross-gender frisk/pat searches will be documented in a log book. If a strip search of any detainee does occur, the search shall be documented on the 5-1B Notice to Administration (NTA) (refer to CoreCivic Policy 5-1 Incident Reporting). (115.15 (d))
4. Strip searches or visual body cavity searches by staff of the opposite gender shall not be conducted except in exigent circumstances, including consideration of officer safety, or when performed by medical practitioners. Staff shall not conduct visual body cavity searches of juveniles and, instead, shall refer all such body cavity searches of juveniles to a medical practitioner. (115.15 (e))
5. All strip searches and visual body cavity searches shall be documented. If a strip search of any detainee does occur, the search shall be documented on the 5-1B Notice to Administration (NTA) (refer to CoreCivic Policy 5-1 Incident Reporting). (115.15 (f))
6. Detainees shall be able to shower, perform bodily functions, and change clothing without being viewed by staff of the opposite gender, except in exigent circumstances or when such viewing is incidental to routine cell checks or is otherwise appropriate in connection with a medical examination or monitored bowel movement. (115.15 (g))
7. The facility shall not search or physically examine a detainee for the sole purpose of determining the detainee's genital characteristics. If the detainee's gender is unknown, it may be determined during conversations with the detainee, by reviewing medical records, or, if necessary, learning that information as part of a medical examination that all detainees must undergo as part of intake or other processing procedure conducted in private, by a medical practitioner. (115.15 (i))
8. All pat-down searches shall be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs and policy, including officer safety. (115.15 (j))
9. The gender of the staff member searching a transgender or intersex detainee will depend on the specific needs of the individual detainee and on the operational concerns of the facility. Under most circumstances, this will be a case-by-case determination, which may change over the course of incarceration and should take into consideration the gender expression of the detainee.
10. Searches of breasts will be completed using the back and/or side of the hand.
11. Transgender and intersex detainees shall be given the opportunity to shower separately from other detainees. (115.15 (g))
12. Employees of the opposite gender must announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing. (115.15 (g))

H. TRANSPORTATION

1. Detainees identified as being "at risk" for sexual victimization shall be transported in accordance with that special safety concern.
2. Transportation staff shall seat each detainee in accordance with written procedures from the Facility Administrator (see PBNDS procedures outlined in CoreCivic Policy 9-18

Transportation and Offsite Post Operations), with particular attention to detainees who may need to be afforded closer observation for their own safety.

I. UPGRADES TO FACILITIES AND TECHNOLOGIES

1. 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 detainees from sexual abuse. Such considerations shall be documented on 7-1B PREA Physical Plant Considerations form. (115.18 (a))
2. 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 detainees from sexual abuse. Such considerations shall be documented on the 7-1B PREA Physical Plant Considerations form. (115.18 (b))

J. ACCOMMODATING DETAINEES WITH DISABILITIES OR LIMITED ENGLISH PROFICIENCY

1. Detainees with Disabilities

- a. The facility shall ensure that detainees with disabilities (including, but not limited to, detainees who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse. (115.16 (a) and 115.33 (b)) **(4-ALDF-6B-02; ACI 4-4277)**
- b. When necessary to ensure effective communication with detainees who are deaf or hard of hearing, or detainees who have intellectual, psychiatric, or speech disabilities, limited reading skills, or who are blind or have low vision, the facility shall accommodate the detainee by:
 - i. Providing access to in-person, telephonic, or video interpretive services that enable effective, accurate, and impartial interpretation, both receptively and expressively, using any necessary specialized vocabulary; and
 - ii. Providing access to written materials related to sexual abuse in formats or through methods that ensure effective communication.
- c. Auxiliary aids such as readers, materials in Braille, audio recordings, telephone handset amplifiers, telephones compatible with hearing aids, telecommunications devices for deaf persons (TTYs), interpreters, and note-takers, may be provided as needed.

2. Detainees with Limited English Proficiency (LEP)

- a. The facility will provide detainees who are LEP with language assistance, including bilingual staff or professional interpretation and translation services, to provide them with meaningful access to its programs and activities. (115.33 (b))
- b. Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.
- c. Interpretation services shall be provided by someone other than another detainee, unless the detainee expresses a preference for another detainee to provide interpretation and ICE determines that such interpretation is appropriate and consistent with DHS policy. The provision of interpreter services by minors, alleged abusers, detainees who witnessed the alleged abuse, and detainees who

have a significant relationship with the alleged abuser is not appropriate in matters relating to allegations of sexual abuse. (115.16 (c))

- d. Detainees with LEP will be provided in-person or telephonic interpretation services. The facility will provide access to the Language Line or other similar translation service at no cost to the detainee.
- e. Where practicable, provisions for written translation of materials related to sexual abuse or assault shall be made for any significant segments of the population with LEP. Oral interpretation or assistance shall be provided to any detainee who speaks another language in which written material has not been translated or who is illiterate.
- f. All written materials provided to detainees shall generally be translated into Spanish. Information provided to detainees will be available in both English and Spanish, including, but not limited to:
 - i. Written information provided to detainees at intake, and in orientation;
 - ii. PREA information posted on housing unit bulletin boards; and
 - iii. Orientation videos.

K. REPORTING PROCEDURES

1. Detainee Reporting

- a. The facility shall provide multiple ways for detainees to privately report sexual abuse.
- b. Detainees shall be encouraged to immediately report pressure, threats, or instances of sexual abuse as well as possible retaliation by other detainees or employees for reporting sexual abuse and staff neglect or violation of responsibilities that may have contributed to such incidents.
- c. Staff shall take seriously all statements from detainees claiming to be victims of sexual abuse or assault, and shall respond supportively and non-judgmentally.
- d. Any detainee may report acts of sexual abuse or assault to any employee, contractor, or volunteer.
- e. If a detainee is not comfortable with making the report to immediate point-of-contact line staff, he/she shall be allowed to make the report to a staff person with whom he/she is comfortable in speaking about the allegations.
- f. Detainees who are victims of sexual abuse have the option to report an incident to a designated employee other than an immediate point-of-contact line officer by using any of the following methods: (115.51 (a) and (b)) **(ACI 4-4281-7; 4-ALDF-4D-22-7)**
 - i. Submitting a request to meet with Health Services staff and/or reporting to a Health Services staff member during sick call;
 - ii. Calling the facility's twenty-four (24) hour toll-free notification telephone number;
 - iii. Verbally telling any employee, including the facility Chaplain;
 - iv. Forwarding a letter, sealed and marked "confidential", to the Facility Administrator or any other employee;
 - v. Calling or writing someone outside the facility who can notify facility staff;
 - vi. Contacting the respective consular office; and/or

- vii. Forwarding a letter to the FSC PREA Coordinator at the following address:
- 10 Burton Hills Boulevard
Nashville, TN 37215**
- g. Alleged PREA incidents will not be processed through the CoreCivic facility Detainee Grievance Procedure. Should a report be submitted and received as a detainee grievance it will immediately be referred to the Facility Investigator or Administrative Duty Officer. (115.52)
- h. Detainees shall also be permitted to directly report to the U.S. Department of Homeland Security OIG via telephone at **1-888-351-4024** or the toll free hot line at **1-800-323-8603 (TTY 1-844-889-4357)**. This number and pertinent information will be securely posted inside each housing unit for access twenty-four hours per day seven days per week (24/7).
- i. Detainees may also report by mailing a letter to ICE at the following address:
- Office of Inspector General
Department of Homeland Security
245 Murray Lane SW
Washington, DC 20528-0305**
- j. Detainees may make telephone calls or file written reports to Consulates and/or Consular offices. Resources with phone numbers and addresses for Consulates and/or Consular offices will be kept in the detainee library and by request for detainees unable to visit the library. (115.51 (b))
- k. Each facility shall establish a method to receive third-party reports of sexual abuse and shall post this information on the facility PREA link found on the CoreCivic website. (115.54)
- l. Each facility shall provide at least one way for detainees to report abuse to a public or private entity or office that is not part of CoreCivic, and that is able to receive and immediately forward detainee reports of sexual abuse to facility officials, allowing the detainee to remain anonymous upon request (115.51 (a))

AT THIS FACILITY, THIRD PARTY AND ANONYMOUS REPORTING MECHANISMS AND PROCESSES HAVE BEEN ESTABLISHED AS FOLLOWS:

2. Employee Reporting Duties
- a. Employees must take all allegations of sexual abuse seriously, including verbal, anonymous and third-party reports, and treat them as if the allegation is credible. Staff shall promptly document any verbal reports. (115.51 (c)) All reports of sexual abuse will be reported to the Facility Investigator. (115.61 (b)) Employees having contact with the alleged victim should behave in a manner that is sensitive, supportive, and non-judgmental.
- b. All employees are required to immediately report:
- i. 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 CoreCivic's management authority;

- ii. Retaliation against detainees or employees who have reported such an incident; and
- iii. Any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation. (115.61 (a))
- c. Employees who fail to report allegations may be subject to disciplinary action.
- d. Apart from reporting to designated supervisors or officials, employees shall not reveal any 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. (115.61 (c))
- e. **When it is learned that a detainee is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the detainee.** (115.62)
- f. Employees may privately report sexual abuse of detainees by forwarding a letter, sealed and marked "confidential", to the Facility Administrator. (115.61 (a))
- g. 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 K.2.a. At the initiation of providing medical care, both medical and mental health professionals will inform 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 detainee before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the detainee is under the age of eighteen (18).
- h. If the alleged victim is under the age of eighteen (18) or considered a vulnerable adult under a state or local vulnerable person's statute, the allegation shall be reported to the designated state or local services agency under applicable mandatory reporting laws. (115.61 (d))
- i. Staff shall accept reports made verbally, in writing, anonymously, and from third parties, and promptly document any verbal reports. (115.51 (c))

L. RESPONSE PROCEDURES

- 1. Sexual Abuse Response Team (SART) (115.65)
 - a. Each facility will establish a SART which includes the following positions:
 - i. PSA Compliance Manager;
 - ii. Medical representative;
 - iii. Security representative;
 - iv. Mental health representative; and
 - v. Victim Services Coordinator.

NOTE: The medical and/or mental health professional may serve as the facility Victim Services Coordinator. The facility Victim Services Coordinator will not be a member of security.
 - b. The SART responsibilities shall include the following:
 - i. Responding to reported incidents of sexual abuse;
 - ii. Responding to victim assessment and support needs;
 - iii. Ensuring policy and procedures are enforced to enhance detainee safety; and
 - iv. Participating in the development of practices and/or procedures that

encourage prevention of sexual abuse and enhance compliance with PREA National Standards.

c. SART Member Responsibilities

i. The PSA Compliance Manager will:

- Review the facility's response to sexual abuse allegations, with the Administrator or designee, to ensure the policy is implemented effectively and victim needs are addressed;
- Serve as a primary liaison with local law enforcement or delegate this responsibility to the Facility Investigator;
- Ensure the completion of the 14-2C Sexual Abuse Incident Check Sheet; and
- Ensure prompt actions are taken to remedy any identified retaliation. (115.67 (c))

ii. The Medical Representative will:

- Ensure that the facility's medical staff respond appropriately in medically stabilizing an alleged victim before assessment by a community medical provider, if medically indicated; and
- Address any ongoing medical care needs following the incident.

iii. The Security Representative will:

- Ensure detainee safety needs are addressed, including separating the alleged victim and perpetrator; and
- Ensure employee responses to reports of sexual abuse are timely and consistent with policy.

iv. The Mental Health Representative will:

- Ensure the alleged victim is assessed; and
- Ensure mental health needs are addressed according to policy and local procedure.

v. The Victim Services Coordinator will:

- Attempt to obtain the services of a victim advocate from a rape crisis center to assist the alleged victim. Efforts to identify and utilize a victim advocate shall be documented on the 14-2C Sexual Abuse Incident Check Sheet via the Incident Reporting Database (IRD);
- In the absence of a victim advocate, and/or facility mental health services the Victim Services Coordinator will attempt to obtain confidential emotional support services related to sexual abuse for detainees;
- Ensure that detainees are aware they may access additional victim resources through community victim resource agencies; and
- Ensure that alleged victims are informed of their rights to care and protection from further victimization.

2. First Response

a. Any employee who discovers or learns of sexual abuse, or an allegation of sexual

abuse, shall ensure that the following actions are accomplished:

- i. 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))
 - ii. The Health Services Department is responsible for medical stabilization and assessment of the victim until transported to an outside medical provider, if medically indicated, for collection of evidence and any 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 SAFE or SANE provider is not available, the examination may be performed by other qualified medical practitioners.
 - iii. If the abuse occurred within a time period that still allows for the collection of physical evidence, employees shall, to the best of their ability, ensure that the victim does not wash, shower, remove clothing without medical supervision, use the restroom facilities, eat, drink or brush his/her teeth. (115.64 (a)(3)) **(ACI 4-4282)**
 - iv. 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. (115.64 (a)(2))
 - When the alleged perpetrator is a detainee, he/she is secured in a single cell (if available) in the event evidence collection is required.
 - All acquired information concerning the allegation is kept confidential by discussing the information with only those employees who have a direct need to know.
 - If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and notify security staff. (115.64 (b))
 - An incident statement is written in accordance with CoreCivic Policy 5-1 Incident Reporting.
- b. Upon notification of alleged sexual abuse, the highest ranking authority onsite shall ensure that the following actions are accomplished:
- i. When the alleged perpetrator is a detainee, in order to preserve any evidence, the alleged perpetrator should not be allowed to wash, shower, brush his/her teeth, use the restroom facilities, change clothes, or eat or drink while secured in segregation in a single cell (if available). (115.64 (a)(4))
 - ii. The PSA Compliance Manager and the Facility Administrator or ADO are immediately notified of the allegation.
 - iii. While in the Health Services Department, a brief statement is obtained from the alleged victim concerning the incident.
 - iv. Based upon the alleged victim's statement regarding the location and time of the incident, ensure any 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.
- c. If a victim of sexual abuse is transferred between facilities, the sending facility shall, as permitted by law, inform the receiving facility of the incident and the victim's potential need for medical or social services. (115.65 (c))
- d. The PSA Compliance Manager, Facility Administrator, or ADO, will ensure that the following is completed:
- i. The PSA Compliance Manager, Facility Administrator or designee shall immediately report all allegations of rape, sexual assault, or Employee-on-Detainee sexual misconduct to the appropriate law enforcement agency having jurisdiction for criminal investigation if the allegation (if proven true) would be considered a criminal act under federal, state, or local law. The reporting party should request guidance from the law enforcement agency in preserving the crime scene and coordinating an investigation.

AT THIS FACILITY, ALLEGATIONS OF SEXUAL ABUSE/ASSAULT ARE REPORTED TO THE FOLLOWING LAW ENFORCEMENT AGENCY:

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- ii. Ensure the alleged perpetrator is secured in segregation in a single cell (when possible) pending an investigation into the allegation. Ensure the alleged victim is separated/isolated from the alleged perpetrator until completion of the investigation.
- iii. Victims shall not be held for longer than five (5) days in any type of Administrative Segregation.
- iv. If the allegation involves an employee, ensure steps are taken to place this person in a non-detainee contact role.
- v. All allegations of sexual abuse or assault shall be immediately and effectively reported to ICE/Enforcement and Removal Operations (ERO). In turn, ICE/ERO will report the allegation as a significant incident, and refer the allegation for investigation.
- vi. As instructed by the ICE Field Office Director, the facility will comply with any requirements for coordination with the ICE OPR for investigation or referral of incidents of sexual assault to another investigative agency, and discipline and prosecution of assailants.
- vii. Ensure that medical and mental health referrals are completed. Documentation of medical and mental health evaluations and treatment, crisis intervention counseling and recommendations for post-release follow-up treatment and/or counseling shall be retained in the detainee's medical file in accordance with an established schedule.
- viii. Ensure that an investigation is initiated and documented; however, investigations into allegations of sexual abuse must be investigated by an employee who has received training in the investigation of sexual abuse cases.

- ix. Ensure appropriate incident reports are completed in accordance with CoreCivic Policy 5-1 Incident Reporting.
 - x. Review any video recordings of the alleged crime scene from the time period implicated by the allegation. Ensure all video recordings are secured and preserved from the time period implicated by the allegation.
- e. A preliminary review of the incident and the response shall be conducted telephonically within seventy-two (72) hours (excluding weekends and holidays) following reportable PREA incidents of Employee-on-Detainee Sexual Abuse (excluding Voyeurism) and Detainee-on-Detainee Sexual Abuse. Upon receipt of the 5-1 Incident Report, the review will be convened by FSC Security Manager responsible for the facility.
- **Employee-on-Detainee Sexual Abuse (excluding Voyeurism)**
 - Required Participants
 - Managing Director/designee;
 - FSC PREA Coordinator/designee;
 - Facility Administrator;
 - Facility PSA Compliance Manager; and
 - Facility Investigator.
 - Optional Participants
 - Staff identified by the Facility Administrator if their participation is necessary to provide specialized information essential to complete the review; and
 - FSC PREA Committee Members.
 - **Detainee-on-Detainee Sexual Abuse**
 - Required Participants
 - FSC PREA Coordinator/designee;
 - Facility Administrator;
 - Facility PSA Compliance Manager; and
 - Facility Investigator.
 - Optional Participants
 - FSC Managing Director;
 - Staff identified by the Facility Administrator if their participation is necessary to provide specialized information essential to complete the review; and
 - FSC PREA Committee Members.
 - **Voyeurism, Employee-on-Detainee Sexual Harassment, and Detainee-on-Detainee Sexual Harassment**
 - Incidents with these categories will be reviewed for compliance by the Facility Administrator and FSC PREA Coordinator/designee upon receipt of the electronic 5-1 Incident Report.
 - These incidents do not require a telephonic review, unless in the judgement of the Facility Administrator or FSC PREA Coordinator, the details or nature of the incident require this level of review.

- Upon receipt of the electronic 5-1 Incident Report, incidents in these categories will be reviewed by, at a minimum, the Facility Administrator, FSC PREA Coordinator/designee, facility PSA Compliance Manager, and Facility Investigator.
- These incidents do not require a telephonic review unless, in the judgment of the Facility Administrator or FSC PREA Coordinator, the details or nature of the incident require this level of review.
- If a telephonic review is required, additional report recipients may be invited.

- **Review Protocol**

At a minimum, the review shall include:

- Discussion of the incident, and whether the incident response meets applicable standards;
 - Appropriate categorization of the incident report;
 - Completion of required notifications;
 - A request for law enforcement involvement (if appropriate);
 - Whether employee actions or failures to act contributed to the sexual abuse; and
 - Initial discussion as to whether the incident is Substantiated, Unsubstantiated, Unfounded or will remain pending.
- f. If the allegation of sexual abuse involves events that took place while the alleged victim was not in CoreCivic custody (e.g. while housed at another provider's facility, or state, or federal facility), the Facility Administrator of the facility that received the allegation shall ensure that the following actions are taken
- i. Contact the facility head or appropriate office of the facility where the alleged abuse took place as soon as possible, but no later than seventy-two (72) hours after receiving the allegation. (115.63 (a)(b))
 - ii. Determine from the facility administration at that facility whether the allegation was reported and investigated.
 - iii. If the allegation was reported and investigated by the appropriate officials, the receiving facility shall document the allegation, the name and title of the person contacted, and that the allegation has already been addressed. Under this circumstance, further investigation and notification need not occur.
 - iv. If the allegation was not reported or not investigated, a copy of the statement of the detainee shall be forwarded to the appropriate official at the location where the incident was reported to have occurred.
 - v. All such contacts and notifications shall be documented on the 5-1B 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. (115.63 (c))
 - vi. If an allegation is received from another facility, he/she will ensure the allegation is investigated.
3. Protection Against Retaliation
- a. Staff, contractors, volunteers, and detainees shall not retaliate against any person, including a detainee, who reports, complains about, or participates in an

investigation into an allegation of sexual abuse, or for participating in sexual abuse as a result of force, coercion, threats, or fear of force. **(ACI 4-4281)**

- b. For at least ninety (90) days following a report of sexual abuse, the facility shall monitor to see if there are facts that may suggest possible retaliation by detainees or staff, and shall act promptly to remedy any such retaliation. Items the facility should monitor include any detainee disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The facility shall continue such monitoring beyond ninety (90) days if the initial monitoring indicates a continuing.
- c. The facility shall take care to place detainee victims of sexual abuse in a supportive environment that represents the least restrictive housing option possible. (115.68)
 - i. Detainee victims shall not be held for longer than five days in any type of administrative segregation, except in unusual circumstances or at the request of the detainee.
 - ii. A detainee victim who is in protective custody after having been subjected to sexual abuse shall not be returned to the general population until completion of a proper re-assessment
- d. The PSA Compliance Manager shall ensure that thirty/sixty/ninety (30/60/90) day retaliation monitoring is conducted by the designated staff, following a report of sexual abuse, to protect against potential retaliation against detainees or employees. This shall include periodic status checks of detainees and review of relevant documentation.
 - i. Monitoring is documented on the 14-2D PREA Retaliation Monitoring Report (30/60/90) form.
 - ii. Monitoring shall continue beyond ninety (90) days if the initial monitoring indicates a continuing need. (115.67 (c))

M. HEALTH CARE AND MENTAL HEALTH SERVICES

1. Procedures

- a. Detainee victims of sexual abuse and assault shall have timely, unimpeded access to emergency medical treatment and crisis intervention services, including emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care. (115.82 (a)) **(ACI 4-4406M; 4-ALDF-4D-22-6M)**
- b. Transportation of an alleged victim for emergency care or other services provided offsite shall be arranged in a manner that takes into account the special needs of victimized detainees.
- c. The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all detainees who have been victimized by sexual abuse while in immigration detention. 115.83 (a) **(4-ALDF-4D-22-4)**
- d. The facility shall provide victims with medical and mental health services consistent with the community level of care. (115.83 (c))
- e. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. (115.83 (b)) **(4-ALDF-4D-22-4)**

- f. Detainee victims of sexually abusive vaginal penetration by a male abuser while incarcerated shall be offered pregnancy tests. If pregnancy results from an instance of sexual abuse, the victim shall receive timely and comprehensive information about lawful pregnancy-related medical services and timely access to all lawful pregnancy-related medical services. (115.83 (d)) **(ACI 4-4406M; 4-ALDF-4D-22-6M)**
- g. Detainee victims of sexual abuse while detained shall be offered tests for sexually transmitted infections as medically appropriate. (115.83 (e)) **(ACI 4-4406M; 4-ALDF-4D-22-6M)**
- h. The facility shall attempt to conduct a mental health evaluation of all known Detainee-on-Detainee abusers within sixty (60) days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners. (115.83 (g)) **(4-ALDF-4D-22-3; ACI 4-4406M; 4-ALDF-4D-22-6M)**
- i. All treatment services, both emergency and ongoing, shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The facility shall provide such victims with medical and mental health services consistent with the community level of care. (115.82 (b) and 115.83 (f))

2. Victim Advocates

- a. CoreCivic shall maintain or attempt to enter into Memorandums of Understanding (MOU) or other agreements with community service providers or, if local providers are not available, with national organizations that provide legal advocacy and confidential emotional support for immigrant victims of crimes. (115.53 (a)) Before developing or attempting to enter into an MOU, the facility shall contact the FSC Assistant General Counsel, Vendor Contracts. CoreCivic shall maintain copies of agreements or documentation showing attempts to enter into such agreements.
- b. Each facility shall establish, in writing, procedures to include outside agencies in the facility's sexual abuse prevention and intervention protocols, if such resources are available. (115.53 (b))
- c. Detainees shall be provided access to outside victim advocates for emotional support services related to sexual abuse by giving detainees mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations. Such information shall be included in the facility's Detainee Handbook. The facility shall enable reasonable communication between detainees and these organizations and agencies, in as confidential a manner as possible. (115.53 (c))
- d. Detainees shall be informed, prior to giving them access, of the extent to which such 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 (d))
- e. As requested by the victim, the presence of his or her outside or internal victim advocate, including any available victim advocacy services offered by a hospital conducting a forensic exam, shall be allowed for support during a forensic exam and investigatory interviews (115.21 (d))

N. INVESTIGATIONS

1. Administrative and Criminal Investigations

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

i. Administrative Investigation

The administrative investigation shall include an effort to determine whether staff actions or failures to act 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:

- Investigative facts (i.e. specific details about what actually happened);
- Physical evidence (e.g. clothes collected, medical evidence, etc.);
- Testimonial evidence (e.g. witness statements);
- Review of prior complaints and reports of sexual abuse involving the suspected perpetrator;
- 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 person's status as a detainee or employee.); (115.71(c)(iv))
- Investigative findings (i.e. discovery or outcome of the investigation); and
- Whether actions and/or failures of staff to act contributed to the incident, including an explanation as to what determined the conclusion.

ii. Administrative Investigation Procedures include:

- Preservation of direct and circumstantial evidence, including any available physical DNA evidence and any available electronic monitoring data;
- Interviewing alleged victims, suspected perpetrators, and witnesses;
- Reviewing prior complaints and reports of sexual abuse or assault involving the suspected perpetrator;
- Assessment of the credibility of an alleged victim, suspect, or witness, without regard to the individual's status as detainee, staff, or employee and without requiring any detainee who alleged sexual abuse or assault to submit to a polygraph;
- An effort to determine whether actions or failures to act at the facility contributed to the abuse;
- Documentation of each investigation by written report, which shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings;
- Retention of such reports for as long as the alleged abuser is detained or employed by the agency or facility, plus five (5) years; (**ACI 4-4-4281-7**) and
- Coordination and sequencing of administrative and criminal investigations to ensure that a criminal investigation is not compromised by an internal administrative investigation.

iii. Criminal Investigation

- The facility shall enter into a written Memorandum of Understanding (MOU) with the 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 Contracts. CoreCivic shall maintain copies of agreements or documentation showing attempts to enter into such agreements.
- When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. (115.71 (f))
- The Facility Investigator, as delegated by the PSA Compliance Manager and/or Facility Administrator, shall establish a relationship with local law enforcement agencies and prosecutors to develop a clear understanding of the investigative guidelines and procedures during a criminal investigation of an alleged sexual abuse incident.
- Discussions with state or local law enforcement should articulate a delineation of roles of the Facility Investigator and the law enforcement investigator.
- 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.

iv. Contracting Governmental Agencies with Required Internal Investigation Processes

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

v. 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 Forensic Medical Examinations, as outlined below. If the facility is not responsible for investigating such allegations, the facility shall request that the responsible outside agency or entity (i.e. state or local law enforcement, contracting agency, etc.) comply with these requirements. (115.21 (e))

- The investigating entity shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. (115.21 (a))
- The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the 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. (115.21 (a))

- 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 evidentiary or medically appropriate. Such examinations shall be performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) where possible. If SAFEs or 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)) (**ACI 4-4406M; 4-ALDF-4D-22-6M**)
- The investigating entity shall attempt to make available to the victim a victim advocate from a rape crisis center. The investigating entity may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a non-governmental entity that provides similar victim services. (115.21 (b))
 - 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.
 - The investigating entity shall document efforts to secure services from rape crisis centers.
- As requested by the victim, either the victim advocate, a qualified investigating entity staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. (115.21 (d))

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

2. Incident Classification

- a. Following completion of the investigation, the allegation will be classified as follows:
- i. **Substantiated** – An incident shall be classified as substantiated if the results of the investigation determine that the allegation did occur.
 - ii. **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.
 - iii. **Unfounded** – An incident shall be classified as unfounded if the results of the investigation determine the allegation did not occur.

- v. A detainee may be disciplined for sexual conduct with an employee only upon a finding that the employee did not consent to such contact. (115.78 (e))
- c. Deliberate False Allegations
 - i. For the purpose of disciplinary action, a report of sexual abuse or assault made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.
 - ii. Detainees who deliberately allege false claims of sexual abuse can be disciplined. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. (117.78(f))
 - iii. The Facility Administrator or designee should contact law enforcement to determine if a deliberately false accusation may be referred for prosecution.
- 2. Employees
 - a. Staff suspected of perpetrating sexual abuse shall be removed from all duties requiring detainee contact pending the outcome of an investigation. (115.66)
 - b. Employees shall be subject to disciplinary sanctions up to and including termination for violating CoreCivic's sexual abuse policies. Termination is the presumptive disciplinary sanction for staff who have engaged in, attempted, or threatened to engage in sexual abuse. (115.76 (a)(b)) **(ACI 4-4281-6; 4-ALDF-4D-22-5)**
 - c. Disciplinary sanctions for violations of CoreCivic policies relating to sexual abuse (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the employee's disciplinary history, and the sanctions imposed for comparable offenses by other employees with similar histories. (115.76 (a)) **(ACI 4-4281-6; 4-ALDF-4D-22-5)**
 - d. All terminations for violations of CoreCivic sexual abuse policies, or resignations by employees who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies, to the extent known. (115.76 (c) and (d))
 - e. The facility shall also report all such incidents of substantiated abuse, removals, or resignations in lieu of removal to the ICE Field Office Director, regardless of whether the activity was criminal, and shall make reasonable efforts to report such information to any relevant licensing bodies, to the extent known.
- 3. Civilians/Contractors/Volunteers
 - a. Contractors and civilians suspected of perpetrating sexual abuse shall be removed from all duties requiring detainee contact pending the outcome of an investigation. (115.66 and 115.77 (b)) **(ACI 4-4281-6; 4-ALDF-4D-22-5)**
 - b. Any contractor or volunteer who has engaged in sexual abuse or assault shall be prohibited from contact with detainees. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with

detainees by contractors or volunteers who have not engaged in sexual abuse or assault, but have violated other sexual abuse policies.

- c. Incidents of substantiated sexual abuse by a contractor or volunteer shall be reported to law enforcement agencies, unless the activity was clearly not criminal. The facility shall also report such incidents to the ICE Field Office Director regardless of whether the activity was criminal, and shall make reasonable efforts to report such incidents to any relevant licensing bodies, to the extent known.

P. SEXUAL ABUSE INCIDENT REVIEWS, DATA COLLECTION AND AUDITS

1. Incident Review Requirements

- a. The facility shall conduct a sexual abuse and assault incident review at the conclusion of every investigation of sexual abuse or assault.
- b. For any substantiated or unsubstantiated allegation, the facility shall prepare a written report within thirty (30) days of the conclusion of the investigation recommending whether the allegation or investigation indicates that a change in policy or practice could better prevent, detect, or respond to sexual abuse and assault.
- c. The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so, in a written response. Both the report and response shall be forwarded to the ICE Field Office Director, or his or her designee, for transmission to the ICE PSA Coordinator. The facility shall also provide any further information regarding such incident reviews as requested by the ICE PSA Coordinator.
- d. The review team shall consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility.
- e. The facility shall conduct an annual review of all sexual abuse investigations and resulting incident reviews to assess and improve sexual abuse intervention, prevention, and response efforts. If the facility has not had any reports of sexual abuse during the annual reporting period, then the facility shall prepare a negative report. The results and findings of the annual review shall be provided to the Facility Administrator and ICE Field Office Director, or his or her designee, for transmission to the ICE PSA Coordinator.

2. Incident Review Procedures

- a. The Facility Administrator will ensure that a post investigation review of a sexual abuse incident is conducted at the conclusion of every sexual abuse investigation and, where the allegation was not determined to be unfounded, prepare a written report within thirty (30) days of the conclusion of the investigation. (115.86 (a))
- b. In addition to the 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. The review team shall:
 - i. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (115.86 (a))

- ii. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; LGBTI and/or Gender Non-Conforming identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; and (115.86 (b))
 - iii. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.
 - c. All findings and recommendations for improvement will be documented on the 14-2F-DHS Sexual Abuse Incident Review Report. Completed 14-2F-DHS forms will be forwarded to the Facility Administrator, the PSA Compliance Manager, and the FSC PREA Coordinator. (115.86 (d)(6))
 - d. The facility shall implement the recommendations for improvement or shall document reasons for not doing so. Both the report and response shall be forwarded to the FSC PREA Coordinator and the ICE Prevention of Sexual Assault Coordinator. (115.86 (e))
 - e. Each facility shall conduct an annual review of the all sexual abuse investigations and resulting incident reviews to assess and improve sexual abuse intervention, prevention and response efforts. If the facility has not had any reports of sexual abuse during the annual reporting period, then the facility shall prepare a negative report. The results and findings of the annual review shall be provided to the Facility Administrator, FSC PREA Coordinator, and the ICE PSA Coordinator. (115.86 (c))
3. Data Collection
 - a. Internal

All case records associated with claims of sexual abuse, including incident reports, investigative reports, 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 (a)) **(ACI-4-4281-8; 4-ALDF-4D-22-8)**

 - i. The Facility Administrator must maintain two types of files.
 - General files include:
 - The victim(s) and assailant(s) of a sexual assault;
 - Crime characteristics; and
 - All formal and/or informal action taken.
 - Investigative files include:
 - All reports;
 - Medical forms;
 - Supporting memos and videotapes; and
 - Any other evidentiary materials pertaining to the allegation.
 - ii. The Facility Administrator shall maintain these files chronologically in a secure location.
 - iii. Allegation Tracking
 - Each facility will ensure that incidents of sexual abuse are entered into the IRD as required by CoreCivic Policy 5-1 Incident Reporting

and 14-2BB PREA 5-1 IRD Incident Reporting Definitions. (115.87 (a))

- At least annually, CoreCivic shall aggregate the incident-based sexual abuse data. (115.87 (b))
 - The date, time, location, and nature of the incident;
 - The demographic background of the victim and perpetrator (including citizenship, age, gender, and whether either has self-identified as gay, lesbian, bisexual, transgender, intersex or gender nonconforming);
 - The reporting timeline for the incident (including the name of the individual who reported the incident and the date and time the report was received);
 - Any injuries sustained by the victim;
 - Post-report follow up responses and action taken by the facility (e.g. housing placement/custody classification, medical examination, mental health counseling, etc.); and
 - Any sanctions imposed on the perpetrator. (115.67 (d)(1-6))
- Upon request, CoreCivic will provide all data described in this section from the previous calendar year to the Office for Civil Rights and Civil Liberties no later than June 30. (115.67 (e))
- Data collected for this purpose shall be securely stored and retained in accordance with CoreCivic Policy 1-15 Retention of Records. (115.89 (a))
- The PSA Compliance Manager is responsible for an annual review of the aggregate data (omitting personally identifying information) and shall present the findings to the field office director and ICE/ERO headquarters.

b. External

i. Any requests for information from an outside agency or entity (excluding the contracting governmental agency) regarding incidents of sexual abuse shall be forwarded to and reviewed by the FSC General Counsel or designee and the FSC Senior Director, PREA Programs and Compliance, prior to sending the response to the requesting entity.

ii. Public Access

- The FSC PREA Coordinator shall make all aggregated sexual abuse data available to the public at least annually through the CoreCivic website. (115.89 (b))
- Before making aggregated sexual abuse data publicly available, CoreCivic shall remove all personal identifiers. (115.89 (c))

c. Data Review

i. The FSC PREA Coordinator shall review all aggregated sexual abuse data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, to include:

- Identifying problem areas;
- Taking corrective action on an ongoing basis; and

- Preparing an annual report of findings and corrective actions for each facility, as well as CoreCivic as a whole. (115.88 (a)(1-3))
 - ii. Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of CoreCivic's progress in addressing sexual abuse. (115.88 (b))
 - iii. CoreCivic's report shall be approved by the company's Chief Corrections Officer and made readily available to the public through the CoreCivic website. (115.88 (c))
 - iv. Specific material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of a facility, but the nature of the material redacted must be indicated. (115.88 (d))
- 4. Internal/External Audits
 - a. Internal Audits

The FSC Quality Assurance Department shall conduct an annual audit of all CoreCivic facilities to ensure compliance with CoreCivic Policy, the PREA National Standards, and federal law and regulations.
 - b. External Audits

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

14-2.5 REVIEW:

This policy will be reviewed annually by the Vice President, Correctional Programs Division or qualified designee.

14-2.6 APPLICABILITY:

CoreCivic ICE-Contracted Facilities

14-2.7 APPENDICES:

14-2AA	2016 Preventing Sexual Abuse and Misconduct Brochure (English and Spanish)
14-2BB	PREA 5-1 IRD Incident Reporting Definitions
ICE 2.11C	Sexual Assault Awareness
ICE	Office of the Inspector General Hotline Poster

14-2.8 ATTACHMENTS:

14-2A-DHS	Policy Acknowledgement
14-2B-DHS	Sexual Abuse Screening Tool
14-2C	Sexual Abuse Incident Check Sheet
14-2D	PREA Retaliation Monitoring Report (30/60/90)
14-2E	Detainee Allegation Status Notification
14-2F-DHS	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 PLANT CONSIDERATIONS]
14-2H-DHS	Self-Declaration of Sexual Abuse/Sexual Harassment
14-2I-DHS	Annual PREA Staffing Plan Assessment
3-20-2A	Verification of Employment
5-1B	Notice to Administration (NTA)
5-1E	PREA Reporting
7-1B	PREA Physical Plant Considerations

14-2.9 REFERENCES:

CoreCivic Policy 1-15 Retention of Records
CoreCivic Policy 4-2 Maintenance of Training Records
CoreCivic Policy 5-1 Incident Reporting
CoreCivic Policy 9-18 Transportation and Offsite Post Operations
CoreCivic Policy 13-79 Sexual Assault Response
Prison Rape Elimination Act (PREA) of 2003
PREA National Standards – Title 6 of the Code of Federal Regulations, Part 115
Department of Homeland Security (DHS) Standards to Prevent, Detect, and Respond to Sexual Abuse and Assault in Confinement Facilities (Federal Register 79, 13100, March 7, 2014)
ICE 2011 Performance-Based National Detention Standard (PBNDS) 2.11 Sexual Abuse and Assault Prevention and Intervention, Revised December 2016
Bureau of Justice Statistics (BJS) Survey of Sexual Violence (SSV)
American Correctional Association (ACA) Standards, Adult Correctional Institutions (ACI) and Adult Local Detention Facilities (ALDF):
ACI 4-4084 and 4084-1
ACI 4-4277
ACI 4-4281-1 through 8
ACI 4-4282
ACI 4-4406M
4-ALDF-2A-29
4-ALDF-4D-22-1 through 8
4-ALDF-6B-02
4-ALDF-7B-08
4-ALDF-7B-10 and 10-1