

 <p style="text-align: center;">ADMINISTRATIVE POLICIES AND PROCEDURES State of Tennessee Department of Correction</p>	Index #: 502.06.2	Page 1 of 9
	Effective Date: May 1, 2013	
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Approved by: Derrick D. Schofield		
Subject: PRISON RAPE ELIMINATION ACT (PREA) ALLEGATIONS, INVESTIGATIONS, AND SEXUAL ABUSE RESPONSE TEAMS (SART)		

- I. AUTHORITY: TCA 43-603, TCA 43-604, TCA 43-606, TCA 43-609, TCA 10-7-504, Title 28 CFR Part 115, and the Prison Rape Elimination Act of 2003.
- II. PURPOSE: To establish standardized procedures to request, approve, and govern the actions; reporting procedures; and authority of the Tennessee Department of Correction (TDOC) regarding Prison Rape Elimination Act (PREA) investigations and the role of Sexual Abuse Response Teams (SARTs).
- III. APPLICATION: All TDOC employees, inmates, Tennessee Rehabilitative Initiative in Correction (TRICOR) employees, and employees of privately managed institutions.
- IV. DEFINITIONS:
  - A. Facility/Site PREA Coordinator (FPC): Deputy Wardens of TDOC institutions and Associate Wardens of privately managed institutions who coordinate local PREA programming activities and reporting requirements and oversees the functions of the PREA Compliance Manager. The Director of Community Correction shall serve as the FPC for community confinement centers (residential transitional centers, halfway houses, etc. who are under contract with the TDOC)
  - B. First Responder: Any employee who has initially received information regarding a sexual abuse allegation.
  - C. Investigations Unit (IU) Special Agents: Agents specifically trained to perform criminal investigations and respond to information provided by SART members which may warrant additional investigation pursuant to potential criminal activity.
  - D. PREA Screening System Application: Computer application located on the TDOC intranet that is used to screen inmates upon intake and transfer for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. This application replaces the Sexual Aggressor/Victim Classification Screening (CR-3737 for females and CR-3638 for males). NOTE: residents of TDOC contracted residential and confinement facilities will still use CR-3737 for females and CR-3638 for males.
  - E. PREA Victim Advocate: Any employee designated by the Facility PREA Coordinator in concert with a qualified mental health professional who has been specially trained to support an alleged victim during the investigation of an alleged sexual assault.
  - F. Sexual Abuse Nurse Examiner (SANE): Specially trained personnel in the discipline of sexual response.
  - G. Sexual Abuse Response Team (SART): A coordinated response team comprised of medical and mental health practitioners, facility investigators, and facility security leadership.

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- V. POLICY: It is the policy of the TDOC to investigate all PREA sexual abuse and sexual harassment allegations in a timely, efficient, and confidential manner in accordance with federal guidelines (Title 28 CFR Part 115).

VI. PROCEDURES:

A. PREA Investigations:

1. The Department shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse. These include but are not limited to:
  - a. Reporting directly to staff
  - b. Facility PREA Tip Line (\*9222#)
  - c. Third-party reporting
  - d. Written communication
2. The Department shall provide at least one way for inmates to report abuse or harassment to an outside governmental entity that is not affiliated with the agency or that is operationally independent from agency leadership. Contact information is made available through the *Inmate Handbook*.
3. Staff shall accept reports made verbally, in writing, anonymously, and from third parties. All allegations shall be documented within 72 hours of receiving the allegation in the PREA Allegation System (PAS). Approval for selected staff to have security access for this system shall be requested by the Deputy Warden/Associate Warden to the state PREA Coordinator.
4. No information related to a PREA incident of sexual abuse or harassment shall be entered in TOMIS contact notes or conveyed by email. PREA Allegation System incident numbers shall be used for communication purposes.
5. Staff may privately report sexual abuse and sexual harassment of inmates to the Central Office PREA Tip Line (615-253-8178)

B. Responsibilities of First Responders:

1. If the first staff responder is not a security staff member, he/she is required to instruct the alleged victim not to take any actions that could destroy physical evidence and then immediately notify the shift commander (area Director at DCCO/field services offices). The alleged victim shall be instructed not to shower, brush teeth, change clothes, urinate, defecate, drink or eat.

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2. If the alleged sexual abuse occurred within a 72-hour time period of reporting, the security shift supervisor who is notified of the allegation shall initiate the Sexual Abuse Incident Check Sheet, CR-3776.
  3. Security shall separate the alleged victim and abuser.
  4. Security shall preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
  5. Security staff shall notify SART
- C. SART Response: The facility shall coordinate actions taken in response to an incident of alleged sexual abuse or harassment among staff first responder(s) and SART, which includes medical and mental health practitioners, institutional investigator(s), and facility leadership.
1. Medical and mental health protocols related to allegations shall be followed and documented relative to community standards of care. In the event of a rape allegation, SART members shall determine if SANE response is indicated at outside medical facilities with SANE personnel. Alleged victim shall be transferred only to medical facilities trained and equipped with SANE personnel whenever possible. PREA Victim Advocate(s) shall be available to the alleged victim when requested.
  2. Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the following requirements and coordinated by the unit management team.
    - a. Inmates at high risk for sexual victimization may be placed in involuntary segregated housing only after an assessment of all available alternatives has been made, and then only until an alternative means of separation from likely alleged abuser(s) can be arranged.
    - b. Inmates placed in segregated housing for this purpose shall have access to programs, education, and work opportunities to the extent possible.
    - c. The facility shall not ordinarily assign such an inmate to segregated housing involuntarily for a period exceeding 30 days.
    - d. If an extension is necessary, the SART member(s) shall clearly document in the PREA Allegation System application:
      - (1) The basis for concern for the inmate's safety
      - (2) The reason why no alternative means of separation can be arranged
      - (3) The need for emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperation with investigations

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- e. Every 30 days, the facility staff shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.
- D. SART Investigations: These investigations shall be conducted within 72 hours of receiving the allegation. SART team members who have received special training in sexual abuse investigations shall investigate all allegations of sexual abuse, including third-party and anonymous reports. Investigations Unit Special Agents shall be contacted immediately when circumstances warrant further actions pursuant to criminal findings.
1. IU Special Agents shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.
  2. When the quality of evidence appears to support criminal prosecution, the Department shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.
  3. The credibility of a victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff.
- E. Monitoring for Retaliation: For at least 90 days following a report of sexual abuse, the Department shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse for any changes that may suggest possible retaliation by inmates or staff. Items to be monitored include but not limited to, the following:
1. Inmate disciplinary reports
  2. Inmate housing or programming changes
  3. Negative performance reviews or reassignments of staff
- If any other individual who cooperates with an investigation expresses a fear of retaliation, the Department shall take appropriate measure to protect that individual against retaliation. The Department's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.
- F. Administrative Investigations: These investigations shall include an effort to determine whether staff actions or failures to act facilitated the abuse and shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative findings.
- G. Criminal Investigations: These investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

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1. Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution.
2. Such investigative records shall be retained for as long as the alleged abuser is incarcerated or employed by the Department, plus five years.
3. The departure of the alleged abuser or victim from the employment or control of the facility or Department shall not provide a basis for terminating an investigation.
4. The Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse are substantiated.

H. Reporting the Status of Allegations to Inmates:

1. Following an investigation into an inmate's allegation that he or she suffered sexual abuse in a facility, the Department shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.
2. Following an inmate's allegation that a staff member has committed sexual abuse, the Department shall subsequently inform the inmate whenever:
  - a. The staff member is no longer posted within the inmate's unit
  - b. The staff member is no longer employed at the facility
  - c. The staff member has been indicted on a charge related to sexual abuse within the facility
  - d. The staff member has been convicted on a charge related to sexual abuse within the facility
3. The requirement to inform an inmate shall not apply to allegations that have been determined to be unfounded.

I. Disciplinary Sanctions for Staff: Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual touching only after conclusion of investigation. Sanctions shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of the Department's sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies.

J. Disciplinary Sanctions for Inmates:

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1. Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.
2. Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.
3. The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.
4. If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.
5. An inmate may be disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such contact.
6. 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.
7. Any prohibition on inmate-on-inmate sexual activity shall not consider consensual sexual activity to constitute sexual abuse.

K. Upon request, all employees shall fully cooperate with IU Special Agents conducting an authorized investigation, including but not limited to participating in interviews and providing truthful testimony. Failure to do so will constitute insubordination and shall result in disciplinary action, up to and including termination. Administrative Warning, CR-3640, shall be utilized by agents to document this action.

L. IU operation shall be governed by this policy and IU operational protocols approved by the Commissioner.

M. Each institution shall develop a written policy and procedure to coordinate actions take in response to an incident of sexual abuse and to ensure compliance with the mandates of this policy. This policy and procedure is to be approved by the Assistant Commissioner of Prisons.

VII. ACA STANDARDS: 4-4281-1; 4-4281-3; 4-4281-5; 4-4406.

VIII. EXPIRATION DATE: May 1, 2016.



**TENNESSEE DEPARTMENT OF CORRECTION**  
**FEMALE SEXUAL AGGRESSOR/SEXUAL VICTIM CLASSIFICATION SCREENING**

\_\_\_\_\_  
**INSTITUTION**

\_\_\_\_\_  
RESIDENT NAME (Please Print)

\_\_\_\_\_  
NUMBER

\_\_\_\_\_  
STAFF MEMBER(S) (Please Print)

\_\_\_\_\_  
DATE

**SEXUAL VICTIM FACTORS**

	<u><b>YES</b></u>	<u><b>NO</b></u>
1. Former victim of institutional ( <i>prison or jail</i> ) rape or sexual assault	<input type="checkbox"/>	<input type="checkbox"/>
2. Youthful Age (25 or younger) or elderly (60 or older) _____	<input type="checkbox"/>	<input type="checkbox"/>
3. Small in physical stature ( <i>less than 110 lbs.</i> )	<input type="checkbox"/>	<input type="checkbox"/>
4. Developmental disability/mental illness/medical issues which may contribute to victimization	<input type="checkbox"/>	<input type="checkbox"/>
5. First incarceration ever ( <i>prison or jail</i> )	<input type="checkbox"/>	<input type="checkbox"/>
6. Homosexual/Bi-sexual	<input type="checkbox"/>	<input type="checkbox"/>
7. History of prior sexual victimization	<input type="checkbox"/>	<input type="checkbox"/>
8. History of facility consensual sex	<input type="checkbox"/>	<input type="checkbox"/>
9. Prior history of protective custody ( <i>adult or juvenile</i> )	<input type="checkbox"/>	<input type="checkbox"/>
10. Conviction for sex offenses against an adult or child	<input type="checkbox"/>	<input type="checkbox"/>

Is the offender found to be a:

- ☐ **VICTIM** - If question #1 is answered yes, the offender is classified as a **victim** regardless of the other questions.
- ☐ **POTENTIAL VICTIM** - If 3 or more of questions #2 – 10 are checked, the offender is classified as a **potential victim**.
- ☐ **N/A** - If 2 or less of questions # 2-10 are checked, the classification designations are Not Applicable (**N/A**).

Do you recommend another victim finding level? ☐ YES ☐ NO

If yes, which level is recommended? ☐ Potential Victim ☐ N/A ☐ Monitoring ☐ YES ☐ NO

Explanation: \_\_\_\_\_

## FEMALE SEXUAL AGGRESSOR/SEXUAL VICTIM CLASSIFICATION SCREENING

*continued*

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INSTITUTION

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### SEXUAL AGGRESSOR FACTORS

	<u>YES</u>	<u>NO</u>
1. Any history of institutional ( <i>prison or jail</i> ) sexual aggressor behavior	<input type="checkbox"/>	<input type="checkbox"/>
2. Current or prior rape conviction	<input type="checkbox"/>	<input type="checkbox"/>
3. Any history of sexual abuse/sexual assault toward others	<input type="checkbox"/>	<input type="checkbox"/>
4. Any history of physical abuse toward others	<input type="checkbox"/>	<input type="checkbox"/>
5. Any history of domestic violence toward others	<input type="checkbox"/>	<input type="checkbox"/>
6. Confirmed gang affiliation	<input type="checkbox"/>	<input type="checkbox"/>

Is the offender found to be a:

- ☐ **SEXUAL AGGRESSOR** - If question #1 is yes, the offender is classified as a **sexual aggressor** regardless of the other questions.

Any inmate classified as SEXUAL AGGRESSOR is to be monitored quarterly for a minimum of one calendar year and is to be re-evaluated for monitoring purposes at annual re-class.

- ☐ **POTENTIAL SEXUAL AGGRESSOR** - If 2 or more of questions #2 – 6 are checked, the offender is classified as a **potential sexual aggressor**.

- ☐ **N/A** - If 1 or less of questions # 2 6 are checked, the classification designations are Not Applicable (**N/A**).

Do you recommend another aggressor finding level? ☐ YES ☐ NO

If yes, which level is recommended?

☐ Potential Sexual Aggressor ☐ N/A ☐ Monitoring ☐ YES ☐ NO

- ☐ **LS/CMI Review (if available)** especially sections 1.8 and sections 2 (perpetrator and victim) and section 4 (other client issues).

Explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_





**TENNESSEE DEPARTMENT OF CORRECTION  
MALE SEXUAL AGGRESSOR/SEXUAL VICTIM CLASSIFICATION SCREENING**

\_\_\_\_\_  
**INSTITUTION**

\_\_\_\_\_  
RESIDENT NAME (Please Print)

\_\_\_\_\_  
NUMBER

\_\_\_\_\_  
STAFF MEMBER(S) (Please Print)

\_\_\_\_\_  
DATE

**SEXUAL VICTIM FACTORS**

	<u><b>YES</b></u>	<u><b>NO</b></u>
1. Former victim of institutional ( <i>prison or jail</i> ) rape or sexual assault	<input type="checkbox"/>	<input type="checkbox"/>
2. Youthful Age (25 or younger) or elderly (60 or older) _____	<input type="checkbox"/>	<input type="checkbox"/>
3. Small in physical stature ( <i>less than 5'5" and/or less than 150 lbs</i> )	<input type="checkbox"/>	<input type="checkbox"/>
4. Developmental disability/mental illness/medical issues which may contribute to victimization	<input type="checkbox"/>	<input type="checkbox"/>
5. First incarceration ever ( <i>prison or jail</i> )	<input type="checkbox"/>	<input type="checkbox"/>
6. Homosexual/Bi-sexual/Effeminate	<input type="checkbox"/>	<input type="checkbox"/>
7. History of prior sexual victimization	<input type="checkbox"/>	<input type="checkbox"/>
8. History of facility consensual sex	<input type="checkbox"/>	<input type="checkbox"/>
9. Prior history of protective custody ( <i>adult or juvenile</i> )	<input type="checkbox"/>	<input type="checkbox"/>
10. Conviction for sex offenses against an adult or child	<input type="checkbox"/>	<input type="checkbox"/>

Is the offender found to be a:

- ☐ **VICTIM** - If question #1 is answered yes, the offender is classified as a **victim** regardless of the other questions.
- ☐ **POTENTIAL VICTIM** - If 3 or more of questions #2 – 10 are checked, the offender is classified as a **potential victim**.
- ☐ **N/A** - If 2 or less of questions # 2-10 are checked, the classification designations are Not Applicable (**N/A**).

Do you recommend another victim finding level? ☐ YES ☐ NO

If yes, which level is recommended? ☐ Potential Victim ☐ N/A ☐ Monitoring ☐ YES ☐ NO

Explanation: \_\_\_\_\_

## MALE SEXUAL AGGRESSOR/SEXUAL VICTIM CLASSIFICATION SCREENING

*continued*

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INSTITUTION

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### SEXUAL AGGRESSOR FACTORS

	<u>YES</u>	<u>NO</u>
1. Any history of institutional ( <i>prison or jail</i> ) sexual aggressor behavior	<input type="checkbox"/>	<input type="checkbox"/>
2. Current or prior rape conviction	<input type="checkbox"/>	<input type="checkbox"/>
3. Any history of sexual abuse/sexual assault toward others	<input type="checkbox"/>	<input type="checkbox"/>
4. Any history of physical abuse toward others	<input type="checkbox"/>	<input type="checkbox"/>
5. Any history of domestic violence toward others	<input type="checkbox"/>	<input type="checkbox"/>
6. Confirmed gang affiliation	<input type="checkbox"/>	<input type="checkbox"/>

Is the offender found to be a:

- ☐ **SEXUAL AGGRESSOR** - If question #1 is yes, the offender is classified as a **sexual aggressor** regardless of the other questions.

Any inmate classified as SEXUAL AGGRESSOR is to be monitored quarterly for a minimum of one calendar year and is to be re-evaluated for monitoring purposes at annual re-class.

- ☐ **POTENTIAL SEXUAL AGGRESSOR** - If 2 or more of questions #2 – 6 are checked, the offender is classified as a **potential sexual aggressor**.

- ☐ **N/A** - If 1 or less of questions # 2 6 are checked, the classification designations are Not Applicable (**N/A**).

Do you recommend another aggressor finding level? ☐ YES ☐ NO

If yes, which level is recommended?

☐ Potential Sexual Aggressor ☐ N/A ☐ Monitoring ☐ YES ☐ NO

- ☐ **LS/CMI Review (if available)** especially sections 1.8 and sections 2 (perpetrator and victim) and section 4 (other client issues).

Explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**TENNESSEE DEPARTMENT OF CORRECTION**  
**SEXUAL ABUSE INCIDENT CHECK SHEET**  
**PRISON RAPE ELIMINATION ACT (PREA) OF 2003**

\_\_\_\_\_  
INSTITUTION

Alleged Victim (Name/Number): \_\_\_\_\_  
Alleged Aggressor (Name/Number - if Inmate) \_\_\_\_\_

**INITIAL REPORT OR ALLEGATION OF SEXUAL ABUSE**

DATE	TIME	NOTIFICATIONS	DATE	TIME	REQUIRED ACTIVITIES
		Notifies Shift Supervisor			First responder ensures safety of inmate from alleged aggressor
		Shift Supervisor notifies the Deputy Warden and SART			Security escorts inmate to Health Services immediately.
		Deputy Warden or facility investigator notifies LEU			Inmate is not allowed to shower, remove clothing (without medical supervision), use the restroom, or consume any liquids (in order to preserve evidence.
		Health Services notifies the SART medical representative and mental health/ victim services coordinator.			Health Services stabilizes/ assesses victim.
		The Deputy Warden/designee notifies the hospital of need for Sexual Abuse Nurse Examiner (SANE) service where available.			If the alleged perpetrator is an inmate, security staff ensures they are placed in a single cell. The inmate is not allowed to wash, shower, or change clothes.
					If report is within 72 hours of physical abuse/ penetration, shift supervisor and/or investigator preserves the crime scene by sealing access.
					Shift Supervisor or investigator obtains a brief statement from the alleged victim, while in the Health Services Department.
					If report is within 72 hours of physical abuse / penetration, shift supervisor and medical staff ensure victim is transported to outside medical provider for evidence collection/ treatment.
					The Deputy Warden/designee assures documentation is completed within 24 hours of the initial allegation of sexual abuse on the PREA Allegation Screen (PAS).

**INITIAL PREA REVIEW (48 TO 72 HOURS AFTER REPORT)**

		For allegations referred to LEU Special Agent, Warden/ designee convenes a preliminary review of the response to the incident involving the Warden, Deputy Warden, facility investigator, and the State PREA Coordinator
		If the alleged incident involves a staff aggressor, confirm the employee has been separated from inmate contact, and / or placed on administrative leave pending investigation.

SART Coordinator Signature: _____	
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