

ADULT PRISONS & JAILS



Auditor Information			
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Telephone number: (443) 248-9189			
Date of facility visit: August 10-11, 2015			
Facility Information			
Facility name: Atlanta City Detention Center			
Facility physical address: 254 Peachtree Street SW Atlanta Georgia 30303			
Facility mailing address: (if different from above)			
Facility telephone number: (404) 865-8060			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input checked="" type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input type="checkbox"/> Prison	<input checked="" type="checkbox"/> Jail	
Name of facility's Chief Executive Officer:			
Number of staff assigned to the facility in the last 12 months:			
Designed facility capacity: 1134			
Current population of facility: 445			
Facility security levels/inmate custody levels: Low, Medium, High			
Age range of the population: 17 - 77			
Name of PREA Compliance Manager: Tracey Elam		Title:	PREA Coordinator
Email address: TElam@Atlantaga.gov		Telephone number:	(404) 865-8060
Agency Information			
Name of agency: City of Atlanta Department of Corrections			
Governing authority or parent agency: (if applicable) Atlanta City Government			
Physical address: 254 Peachtree Street SW Atlanta Georgia 30303			
Mailing address: (if different from above)			
Telephone number: (404) 865-8060			
Agency Chief Executive Officer			
Name: Patrick Labat		Title:	Chief
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Agency-Wide PREA Coordinator			
Name: Tracey Elam		Title:	PREA Coordinator
Email address: TElam@Atlantaga.gov		Telephone number:	(404) 868-8060

AUDIT FINDINGS

NARRATIVE

The PREA audit of the Atlanta City Detention Center was conducted on August 10-11, 2015. The PREA coordinator, the compliance manager, and the auditor commenced audit preparation approximately six weeks prior to the audit. This audit preparation consisted of: delivering signage and auditor contact information to be posted in the facility, clarification of questions related to the pre-audit questionnaire and supporting documents and review of the pre-audit questionnaire and supporting documentation. The on-site portion of the audit consisted of a facility tour, documentation review, and observation of operational procedures; including video review, as well as inmate and staff interviews. During the on-site portion of the audit and after its completion, additional information was requested by the auditor and provided by the PREA coordinator.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Atlanta City Detention Center is located in the downtown area of Atlanta, Georgia. The agency consists of one facility which houses inmates charged as adults with various security levels including: low, medium, and high. Although the rated capacity of the facility is 1314, the operating capacity is 1183. The average population on the dates of the audit was 342. The population is made up of male, females, transgender and youthful offenders. The inmate population is comprised of pre-trial detainees, inmates convicted of misdemeanors serving up to one year, and federal detainees. The facility is an eight story building with 22 housing units, 12 of which were open during the on-site portion of the audit.

The facility was exceptionally clean and very well maintained. Housing units were bright and appropriately furnished to support inmate programming and leisure.

Programming and recreation areas are accessible to each housing unit. Visitation areas that support the inmates' right to confidential meetings are also located on the housing units. There is 24 hour medical care provided by the facility. The jail has a total of 210 surveillance cameras, 10 body cameras with an additional 130 body cameras to be deployed soon, all of which provide additional sight and sound supervision that heighten monitoring and provide for an additional level of administrative oversight. The surveillance cameras are monitored on all three shifts. Five vans used for inmate transportation are equipped with cameras that are activated when the vehicle's ignition is engaged. The cameras operate in a continuous recording mode until ten – fifteen minutes after the ignition is off.

Inmates may take advantage of numerous social, educational, and support programs, including but not limited to: religious services, library services, re-entry, life skills, health and wellness, GED, and drug and alcohol addiction. For those who have demonstrated responsibility, exhibited good behavior, and program completion the facility operates a work program that allows inmates to work within and outside of the facility on various work assignments. Inmates are afforded access to non-contact visitation as well as visits with attorneys and approved visits with clergy.

SUMMARY OF AUDIT FINDINGS

The on-site portion of the audit of the Atlanta City Detention Center took place on the dates of August 10 - 11, 2015. The auditor arrived at the facility at 8:00 a.m. on both days and departed at 5:30 p.m. on Monday and 2:00 p.m. on Tuesday. An entrance conference was held on the morning of August 10, 2015. In attendance were Chief Labat, and 12 members of his staff including the Assistant Chief and Deputy Chiefs, Chief of Staff, PREA Coordinator and the facility Compliance Manager. The entrance conference consisted of an explanation of the on-site process and afforded an opportunity for questions or pertinent discussion relevant to the audit. After the entrance conference a facility tour was conducted. During the tour, staff members were observed performing their daily routine and providing supervision of inmates during various activities; including the intake process, sick calls, meals service and recreation. During the course of the on-site portion of the audit 40 randomly selected and specialized staff as well as 19 inmates was interviewed. Live and recorded footage of the surveillance cameras was viewed by the auditor. The responses of staff and inmates during their interviews confirmed that all had received PREA training and were knowledgeable related to the federal requirements. Staff members were interviewed from all shifts. A random sampling of inmate files was reviewed. A random sampling of other facility documentation was reviewed. This sampling included, but was not limited to: logs, shift reports, incident reports, policies and procedures, training records/logs and training curriculum. The auditor found the staff and inmates to have a clear awareness and understanding of PREA. The staff understood their responsibilities to ensure a safe facility. They were also aware of reporting responsibilities, preservation of evidence, as well as how to appropriately respond to victims of sexual assault and/or harassment. Staff was appropriately trained on how to identify signs of sexual assault and or harassment as well as the right of any person reporting sexual abuse/harassment to be free from retaliation for making reports. All personnel were very professional, engaged and helpful throughout the audit process. An exit meeting was held on August 11, 2015. Chief Labat, the Assistant Chief and Deputy Chiefs, and the PREA Coordinator were among the staff at the exit conference.

Total standards:	43
Number of standards exceeded:	04
Number of standards met:	38
Number of standards not met:	00
Number of standards not applicable:	01

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Atlanta City Detention Center has a written policy that mandates zero tolerance of all forms of sexual abuse and sexual harassment. The agency employs an upper level staff person as the PREA Coordinator/Compliance Manager who reports directly to the Director. Policy 400-13 provides the required PREA definitions and outlines the agency's approach to implementing PREA standards as well as the guidelines and procedures for implementing the agency's approach to preventing, detecting and responding to sexual abuse and sexual harassment. It also addresses Conduct and Performance, contains prohibited behaviors for staff, and includes sanctions for employees and inmates who have participated in the prohibited behaviors.

Standard 115.12 Contracting with other entities for the confinement of inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)
- Not applicable

The Atlanta City Detention Center has not entered into or renewed a contract for the confinement of inmates since August 20, 2012 and does not contract with other agencies for the confinement of inmates.

Standard 115.13 Supervision and monitoring

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

A review of the agency staffing plan indicates the agency has adequate resources to meet its needs. The PREA Coordinator reviewed and approved the staffing plan. The review included facility physical layout, an assessment of the video monitoring system, telephone access, radio access, composition of the inmate population, and staffing levels. The facility never operates below the mandatory staffing level. Policy 400-13 supports compliance with this standard. In addition to the 210 surveillance cameras; some of which provide both sight and sound supervision with pan, tilt, and zoom abilities; the facility deploys body cameras as an additional monitoring and supervision measure. Interviews with staff and inmates indicate that unannounced rounds are regularly conducted. Documentation of unannounced rounds that cover all shifts was reviewed; both the documentation review and a review of video confirmed the practice.

Standard 115.14 Youthful inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.01 addresses this standard. While there were no inmates under the age of 18 in the facility at the time of the audit a review of documentation and staff interviews indicated a facility with policies, procedures and preparedness to ensure the highest standards of safety for the most vulnerable population. The facility prohibits the placement of youthful inmates in a housing unit in which a youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. Housing units to which youthful inmates are assigned provide the sight and sound separation required by the standard. The facility used three housing units during the past twelve months to comply with this standard. During that time, 183 youthful inmates were housed separately from adult inmates. The Department uses its Jail Management System to immediately notify key staff; specifically, the Shift Commander on duty and the PREA Coordinator, when a youthful inmate is booked into the facility. This notification system assists in the monitoring of youthful inmates by creating a digital tracking system of their movements that ensures youthful inmates are kept separate from adult inmates as required by the standard. This additional monitoring mechanism establishes checks and balances that substantially exceed the requirement of the standard.

Standard 115.15 Limits to cross-gender viewing and searches

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

This standard is covered and reviewed with staff in the Department's required PREA training as well as Policy 400 – 13.06D. All staff reported that they received cross-gender pat search training they also reported a clear understanding of searching transgender and intersex inmates in a professional and respectful manner consistent with security needs. Further, a SGT is assigned the role of LGBTI liaison and works to ensure that the facility maintains the highest level of the PREA standards related to ensuring the safety of the LGBTI population through staff and inmate training, policy implementation and consistency in protocols. The addition of the role of this liaison demonstrates an increased commitment to ensuring the vulnerabilities and risks usually associated with the LGBTI population are minimized at this facility. Interviews of staff and inmates indicate that inmates are allowed to shower, dress, and use the toilet privately, without being viewed by staff of the opposite gender. Opposite gender staffs announce their presence verbally when entering housing units with inmates of the opposite gender. These announcements were observed by the auditor during the tour of all areas of the facilities and confirmed by staff and inmates. Staff reported a clear awareness of the prohibition of searching transgender or intersex inmates to determine genital status. PREA posters were clearly posted throughout the facility and on each housing unit. Posters were in English and Spanish. The inmate orientation video is also provided in English and Spanish. Inmates requiring interpreter services are afforded such through a contracted vendor.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Atlanta City Detention Center takes appropriate steps to ensure inmates with disabilities and inmates with limited English proficiency have an opportunity to participate in and benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. PREA posters were clearly posted throughout the facility and on each housing unit. Posters were in English and Spanish. The inmate orientation video is also in English and Spanish. Inmates requiring interpreting services are afforded such through a contracted vendor. PREA handouts, postings and inmate handbooks are in English and Spanish. Inmates requiring interpreter services are provided these services through the Department's contract with Language Line. The facility employs staffs who are certified bi-lingual and assist in the communication and education of the inmate population during the intake and training process. Further, the facility uses interpreter services provided by Language Line in the event staff are unavailable or unable to effectively meet the communication needs of an inmate. Inmate and staff interviews confirmed the Department's practices. Staffs interviewed were all aware that under no circumstances are inmate interpreters or assistants to be used in dealing with any PREA related matter.

Standard 115.17 Hiring and promotion decisions

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 700-47 addresses this standard. Background checks are conducted by designated Department staff assigned to the Office of Professional Standards. An interview was conducted and confirmed that all components of this standard have been met. All employees, contractors, and volunteers have had background checks completed. All applicants are required to disclose misconduct prior to selection for promotion. Background checks are required before approving a promotion. A tracking system is in place to ensure that updated background checks are conducted every five years. False information submitted by applicants is grounds for termination.

Standard 115.18 Upgrades to facilities and technologies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The facility has an extensive video and visual monitoring system in place. There have been substantial expansions or updates of existing facilities since August 20, 2012. The agency made strategic steps to ensure all updates increased the agency's ability to protect inmates from sexual abuse. A total of 210 security cameras are utilized within the facility to enhance monitoring of inmates; these cameras provide sight and audio to staff monitoring them. The facility also currently deploys body cameras to supplement the stationary cameras and heighten the facility's ability to supervise and monitor inmates. Further, vehicles that are used to transport inmates are equipped with cameras that provide another layer of supervision and monitoring. The facility has plans to continue technological upgrades which include deploying an additional 130 body cameras which will be worn by all custody staff on each shift during their tour of duty.

Standard 115.21 Evidence protocol and forensic medical examinations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.02 addresses this standard. The Facility partners with Grady Memorial Hospital and the Atlanta Police Department to ensure full compliance with all aspects of this standard. Medical and custody staff was interviewed concerning this standard. Staff reported knowledge of the facilities' procedures to obtain usable physical evidence if sexual abuse is alleged. Each staff in the facility wears a badge outlining the duties of the first responders. Staff was keenly aware of the protocol. Specific actions and clinical decisions are required to determine if an inmate is to be transported to a local hospital to receive a SAFE exam. No SAFE exams were conducted within the last year. The inmate will not be charged for any services related to PREA compliance. The facility has in place a Memorandum of Understanding with a Grady Rape Crisis Center to provide outside confidential support services related to sexual abuse and harassment as well as victim advocacy services.

Standard 115.22 Policies to ensure referrals of allegations for investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.05 addresses compliance with this standard by ensuring all sexual abuse and sexual harassment allegations are immediately documented and investigated. All criminal investigations are handled by the Atlanta Police Department. All investigations are initiated immediately upon referral. During the past twelve months four allegations of sexual abuse and sexual harassment were received and they all resulted in administrative investigations. During the past twelve months one allegation was referred for criminal investigation. Agency policy regarding the referral of allegations of sexual abuse or sexual harassment is made publicly available.

Standard 115.31 Employee training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.03 addresses this standard. The agency provided documentation that demonstrated compliance. Staff must sign verifying they understand the training received. Staff interviews confirmed that they have a clear understanding of the zero tolerance policy and their roles in the preventing, detecting, reporting and responding to a sexual assault or sexual harassment incident and the dynamics of sexual abuse and harassment in a confinement setting. The agency contracted for specialized training by Department of Justice Certified PREA auditors to deliver PREA training to all employees, volunteers and contractors who have contact with inmates. Further ongoing training efforts include electronic and online training platforms for staff, including testing and evaluation of their knowledge on the PREA standards, implementation of protocols and Department policies. Thus, all training and its efficacy delivered through this platform is documented and tracked digitally. Supervisors and the Training and PREA Coordinators are able to electronically monitor, even on a daily basis if needed, the status of staff training as well as compliance with this standard.

Standard 115.32 Volunteer and contractor training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.03 addresses this standard. All contractors and volunteers who have contact with inmates received the facility-wide, specialized training conducted by two contracted PREA auditors; they have been trained on their responsibilities under the agency's policy related to the prevention, detection, and response to sexual abuse and sexual harassment prevention. Contractors and volunteers are required to sign an acknowledgement of understanding related to the training they receive. This documentation is maintained by the Department. Interviews with contracted staff confirmed their knowledge of PREA and their responsibilities related to PREA compliance.

Standard 115.33 Inmate education

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Compliance with this standard is addressed in policies 400-13.01 and 400-13.03. Inmates receive PREA information during the intake process. During the past twelve months 1,012 inmates received comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake. The facility maintains a list of bi lingual personnel to assist in the appropriate delivery of information to inmates. The Department contracts with a vendor for outside interpreting services for inmates who are not proficient in English. These services are available 24 hours a day, seven days a week; the availability of these services provide for proper delivery of information to inmates who may not be English proficient. In addition to the initial information inmates receive at intake, inmates watch a video which provides relevant information. Signs and Posters are clearly exhibited throughout the facility which relay zero tolerance, hotline and crisis/advocacy information. Interviews of the inmates confirmed that they had received the information at intake and watched the PREA video. Additionally inmates confirmed their understanding of their rights to be free from sexual harassment and abuse as well as their right to be free from retaliation for reporting incidents of sexual harassment and abuse. Various staff interviews also supported compliance with this standard.

Standard 115.34 Specialized training: Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.03 addresses compliance with this standard. While criminal investigations are conducted by the Atlanta Police Department, Atlanta City Detention Center staff have received relevant training related to conducting sexual abuse investigations in a confinement setting. Documentation of training was presented to the auditor upon request and is maintained by the facility.

Standard 115.35 Specialized training: Medical and mental health care

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.03 addresses this standard. Documentation shows that the medical and mental health staff members have completed training required by policy. The facility nurses do not conduct forensic medical examinations. Interviews with medical, mental health staff and facility leadership support that they have a full understanding of the training they received as well as their roles and responsibilities as they relate to PREA response.

Standard 115.41 Screening for risk of victimization and abusiveness

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policies 400-13.04 and 400-13.06 outline that all inmates are assessed during intake and receive a screening for their risks of being sexually abused by other inmates or sexually abusive towards other inmates. Policy requires this assessment to be completed within eight hours of admittance to the facility. Policy also outlines guidelines for reassessment of inmates for risk. No inmates required reassessment during the past 12 months. The intake process was reviewed and observed by the auditor. The intake process was in keeping with the PREA standards. The screening tool included questions regarding disabilities and whether or not the inmate disclosed their sexual orientation/gender identity. The tool also asked whether inmates had previously experienced sexual victimization. The perception of the inmate regarding his or her vulnerability was also considered. The screening and intake process was very organized and expertly managed. Information gathered from the intake process was maintained confidentially and only disclosed to those staff with a need to know basis.

Standard 115.42 Use of screening information

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.06 addresses the requirements of this standard. A review of the risk screening form indicated the facility uses the information from the screening tool to determine housing, cell, education, work, and program assignments. The facility's goal is to keep inmates at high risk of being sexually victimized separate from those who are at a high risk of being sexually abusive. Guidelines on housing and program assignments and for the management of transgender and intersex inmates are outlined in this policy and are in keeping with the expectations of the standard. Inmates identified as LGBTI were interviewed. Their interviews supported the policy guidelines. All housing and program assignments are made on a case by case basis. Interviews with staff and inmates confirmed compliance with the facility's policy and this standard.

Standard 115.43 Protective custody

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency Policy 400-13.06 states inmates at high risks for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. Reviews of protective custody status will take place at least every seven days. One inmate was held in involuntary segregated housing for one to 24 hours while awaiting the completion of an assessment in the past twelve months. No inmates were assigned to involuntary segregated housing in the past twelve months for longer than 30 days while awaiting alternative placement.

Standard 115.51 Inmate reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Atlanta City Detention Center provides multiple internal ways for inmates to report sexual abuse, sexual harassment and incidents of retaliation. Inmates and staff interviews confirm that inmates are able to make reports verbally, in writing, anonymously and through third party reporting. Staff interviews also confirmed that they were aware of that they could privately report incidents of sexual abuse, sexual harassment, and incidents of retaliation privately. Inmates may make calls through the inmate phone system where they have access to both internal and external hotlines.

Standard 115.52 Exhaustion of administrative remedies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.05 addresses compliance with this standard. The facility has an administrative process for responding to inmate grievances. Inmates are not required to use an informal grievance process or to attempt to resolve grievances with staff alleged to have participated in abuse against the inmate. In addition to receiving this information at intake the inmate handbook contains information regarding the grievance system. A locked box is located in each housing unit and is accessible to the inmates. Grievance forms are located on each housing unit. Management staff checks the grievances boxes frequently. Policy states that inmates will not be referred to the staff member who is the subject of the complaint. Policy further states that there is no time limit for an inmate to submit a grievance regarding an allegation of sexual misconduct. There were no grievances alleging sexual abuse during the last twelve months. There were no regular or emergency grievances alleging a substantial risk of imminent sexual abuse filed in the past 12 months. Policy allows an inmate to submit a grievance without going through a staff member who may be involved in that grievance.

Standard 115.53 Inmate access to outside confidential support services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.05 demonstrates compliance with this standard. The Rape Crisis Center at Grady Memorial Hospital is used for confidential reporting and outside confidential support services. The inmates have access to contact information for crisis intervention, advocacy, and support services. Interviews found that inmates were aware that services were available and provided to them free of charge if they requested them. The memorandum of understanding was presented to and reviewed by the auditor. Additionally, interviews with Center personnel confirmed their commitment to provide said services to the inmates. The memorandum stated that the crisis center will provide advocacy including accompaniment to the hospital. The facility is able to provide counseling and referrals for inmates having previously experienced sexual assault and or abuse. The willingness and availability of the Rape Crisis Center to provide support and services to the facility in various capacities establishes a concrete support system for the inmates.

Standard 115.54 Third-party reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Atlanta City Detention Center provides avenues to notify the public with information detailing how they may report sexual abuse, sexual harassment or incidents of retaliation on behalf of inmates housed by the Department. These avenues include information on the Department's website as well as information at the facility which is accessible to visitors. The accessibility of information for those closest to the inmates provides them specifics on how they can report actual or suspected abuse. By using the website and making accessible additional information the Department ensures the information is widely disseminated. Staff and inmate interviews revealed all were aware of an inmate's right to report sexual abuse or sexual harassment to others outside of the facility and the fact that the third party could make a report on behalf of the inmate.

Standard 115.61 Staff and agency reporting duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

All staff is required by Policy 400-13 to immediately report any knowledge, suspicion or information they receive regarding sexual abuse and harassment, retaliation against inmates or staff who report any incidents, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Interviews with staff verified that their awareness of their responsibility to report and further supported compliance with this standard.

Standard 115.62 Agency protection duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.02 requires staff to take immediate action to protect an inmate when he/she is identified as being subject to substantial risk of imminent sexual abuse. There were no inmates identified as being at risk for sexual abuse in the past 12 months. Interviews with staff and the Chief confirmed compliance with this standard.

Standard 115.63 Reporting to other confinement facilities

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.02 supports compliance with this standard. Policy requires the Chief of Corrections to notify the head of the other facility or appropriate office or agency where the alleged abuse or harassment occurred within 72 hours of receiving an allegation that an inmate was sexually abused while confined at another facility. During the past 12 months, there were no allegations received from other facilities that an inmate was abused while confined at Atlanta City Detention Center. During the past 12 months there were no allegations received by the facility that an inmate was abused while confined at another facility.

Standard 115.64 Staff first responder duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.02 encompasses the first responder duties and requires staff to take specific steps to respond to a report of sexual abuse including; separating the alleged victim from the abuser; preserving any crime scene within a period of time that still allows for the collection of physical evidence; request the alleged victim not take any action that could destroy physical evidence; and ensure that the alleged abuser does not take any action to destroy physical evidence, if the abuse took place within a time period that still allows for the collection of physical evidence. In the past twelve months there were three allegations that an inmate was sexually abused, all three times security staff members responding to the allegation separated the alleged victim and abuser. In the past twelve months notification of allegations of sexual abuse were made within a time period that still allowed for the collection of physical evidence. All three times, security staff followed the proper protocol in an effort to preserve usable physical evidence. There were no instances in the past twelve months that a first responder was a non-security staff. Interviews with random and specialized staff confirmed that staff is aware of their responsibilities when it comes to their duties as first responders.

Standard 115.65 Coordinated response

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.02 outlines the written plan that coordinates actions to be taken in response to an incident of sexual assault among staff first responders; Sexual Assault Response Team (SART), medical, mental health, PREA Coordinator, and others as designated by facility leadership. The plan was reviewed and is in compliance with this standard. Interviews with the Chief and other staff revealed that they are knowledgeable of their duties in response to an allegation of sexual abuse and their response is in keeping with the facility's coordinated response plan.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Atlanta City Detention Center has not entered into or renewed any collective bargaining agreement or another agreement since August 20, 2012.

Standard 115.67 Agency protection against retaliation

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.02 requires the Chief to ensure the protection of inmates and staff who have reported sexual abuse or harassment or who have cooperated in a sexual abuse or sexual harassment investigation. Policy states specifically: "The department will monitor the behavior and treatment of inmates and staff who have reported sexual abuse and inmates who were reported to have experienced sexual abuse. The Inmate Services Unit Supervisor or designee will monitor retaliation. Monitoring will last for at least 90 days and will focus on observing for changes that indicate possible retaliation by inmates and staff. The monitoring will continue after the initial 90 days period if it is found that ongoing monitoring is needed. The department will cease monitoring if it concludes that an allegation is unfounded. However, monitoring for unsubstantiated allegations will continue." The agency has multiple protection measures to employ in its efforts to protect staff and inmates. There were no incidents of retaliation in the past 12 months.

Standard 115.68 Post-allegation protective custody

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.06 prohibits post-allegation protective custody. Policy states that if an inmate who is alleged to have experienced sexual abuse is placed in segregated housing for protection, staff must follow the requirements for protective custody listed below:

- **Placement in involuntary segregated housing (protective custody) can be done only when no other way to separate the victim from the abuser (s) exists.**
- **Inmates in segregated housing must have as much access as possible to programs, privileges, education and work opportunities.**
- **Inmates requesting voluntary segregated housing must be checked every 30 days to determine if the inmate needs to be kept separate from the general population.**

NOTE: Victims shall not be held for longer than five (5) days in any type administrative segregation, except in highly unusual circumstances or at the request of the victim. No inmate has alleged sexual abuse in the past 12 months, protective custody has not been necessary.

Standard 115.71 Criminal and administrative agency investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.05 requires criminal investigations to be conducted by the Atlanta Police Department. All substantiated investigations shall be referred for prosecution. Policy further requires staff members to cooperate with all investigations. There was one substantiated allegation of conduct that appeared to be criminal that was referred for prosecution since August 20, 2012.

Standard 115.72 Evidentiary standard for administrative investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.05 demonstrates compliance with this standard. The policy states the agency shall impose a standard of preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated.

Standard 115.73 Reporting to inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.05 addresses compliance with this standard. The facility also provided several documents demonstrating compliance with this standard. Policy requires that after an allegation of sexual abuse the inmate shall be informed as to whether the allegation was substantiated or unsubstantiated. All such notifications and attempts of notifications shall be documented. In the last twelve months there were two investigations completed by the agency and two inmate notifications as to the results of the investigations. In the last twelve months there was one investigation of alleged inmate sexual abuse in the facility that was completed by an outside agency.

Standard 115.76 Disciplinary sanctions for staff

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.05 outlines the agency's disciplinary response related to violations of the PREA policy by staff. Specifically, disciplinary sanctions for staff may include termination. The policy states "Violations of departmental policies on sexual abuse and sexual harassment will result in sanctions, up to and including dismissal from employment and referral for criminal prosecution". In the past 12 months, no staff has been terminated or has resigned for violating the facility's PREA policies; as such, no staff has been reported to law enforcement or licensing boards following termination. Nor has any staff been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policy in the past 12 months.

Standard 115.77 Corrective action for contractors and volunteers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.05 states "Any contractor or volunteer who engages in sexual abuse will be prohibited from contact with inmates and will be reported to law enforcement agencies ,unless the activity was clearly not criminal, and to relevant licensing bodies. The facility will take appropriate remedial measures, and will consider whether to prohibit further contact with inmates, in the case of any other violation of department sexual abuse or sexual harassment policies by a contractor or volunteer." During the past 12 months, no contractor or volunteer has been reported to law enforcement or any agency for allegations of sexual abuse.

Standard 115.78 Disciplinary sanctions for inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.05 supports compliance with this standard. The policy prohibits all inmate sexual conduct. Inmates will 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 a criminal finding of guilt for inmate-on-inmate sexual abuse. These sanctions will be imposed in accordance with departmental policies. Sanctions will 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. In the past twelve months there were eight administrative findings of inmate-on-inmate sexual abuse that occurred at the facility. There was one criminal finding of guilt for inmate-on-inmate sexual abuse occurring at the facility in the past 12 months.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.04 supports compliance with this standard. Inmates who disclosed prior sexual victimization are offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. Medical and mental health staff maintains secondary materials documenting compliance with this standard. Inmates who disclosed previously perpetrating sexual abuse are offered a follow-up meeting with a mental health practitioner. Interviews with medical and mental health staff confirm that informed consent is obtained from inmates who disclose prior victimization that did not occur in an institutional setting if the inmate is over the age of 18.

Standard 115.82 Access to emergency medical and mental health services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Inmate victims of sexual abuse receive timely and unimpeded access to emergency medical treatment, crisis intervention services. Victim advocacy services through Grady Memorial Hospital are also available to inmate victims. The nature and scope of these services are determined by medical and mental health practitioners according to their professional judgement. The facility uses Grady Memorial Hospital for emergency medical services and they have a memorandum of understanding with the hospital to provide crisis intervention services. Treatment services are 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.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13.02A-033 addresses this standard. Services provided by the Atlanta City Detention Center are consistent with community level of care without financial cost to the inmate. The facility uses Grady Memorial Hospital for emergency medical services and employs mental health staff for the well-being of inmates. The Department also maintains a memorandum of understanding with Grady Hospital's Psychiatric Services for additional mental health and emotional support. Compliance with this standard was further supported by interviews with medical and mental health staff as well as document reviews.

Standard 115.86 Sexual abuse incident reviews

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13 outlines compliance with this standard and provides information regarding the incident review team and its role in responding to and reviewing incidents. The facility employs a Sexual Abuse Response Team (SART). The Policy details the make-up of the sexual abuse incident review team, which will include the SART, command staff and others. The policy also outlines the elements to be considered in the assessments of incidents. Interviews with staff revealed that they understand the purpose of the incident review team and the process by which they are to follow in conducting the reviews.

Standard 115.87 Data collection

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy 400-13 supports compliance with this standard. The agency collects accurate uniform data for every allegation of sexual abuse using a standardized instrument. The data is used to prepare an annual report. The PREA Coordinator reviews aggregate data on an annual basis and presents the findings to the Chief for use in determining whether changes may be needed to existing policies and practices in order to further the goal of eliminating sexual abuse. The facility's aggregate data, after approval by the Chief/designee is made publicly available.

Standard 115.88 Data review for corrective action

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Atlanta City Detention Center reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies. The PREA Coordinator will review the collected and aggregated data to assess and improve the effectiveness of the PREA related efforts and initiatives. This standard is supported by Policy 400-13.

Standard 115.89 Data storage, publication, and destruction

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The aggregated PREA data is reviewed and all personal identifiers are removed. Data is properly stored, maintained and secured. Access to data is tightly controlled.

AUDITOR CERTIFICATION

I certify that:

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



Auditor Signature

September 8, 2015

Date