

PREA AUDIT REPORT INTERIM FINAL
JUVENILE FACILITIES

Date of report: March 6, 2017

Auditor Information			
Auditor name: Robert Lanier			
Address: 1825 Donald James Road, Blackshear, GA 31516			
Email: rob@diversifiedcorrectionalservices.com			
Telephone number: 912-281-1525			
Date of facility visit: February 10, 2017			
Facility Information			
Facility name: Autauga Campus			
Facility physical address: 1601 County Road 57 , Prattville, AL 36067			
Facility mailing address: <i>(if different from above)</i> PO Box 66, Mt. Meigs, AL 36057			
Facility telephone number: 334-361-9161			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Correctional	<input type="checkbox"/> Detention	<input type="checkbox"/> Other
Name of facility's Chief Executive Officer: Alicia Faire			
Number of staff assigned to the facility in the last 12 months: 53			
Designed facility capacity: 72			
Current population of facility: 33			
Facility security levels/inmate custody levels: Secure			
Age range of the population: 13-21			
Name of PREA Compliance Manager: Alicia Faire		Title: PREA Compliance Manager	
Email address: alicia.faire@dys.alabama.gov		Telephone number: 334.361.9161	
Agency Information			
Name of agency: Alabama Department of Youth Services			
Governing authority or parent agency: <i>(if applicable)</i> State of Alabama			
Physical address: 1000 Industrial School Road, Mt. Meigs, AL 36057			
Mailing address: <i>(if different from above)</i> PO Box 66, Mt. Meigs, AL 36057			
Telephone number: 334.215.3800			
Agency Chief Executive Officer			
Name: Steven P Lafreniere		Title: Executive Director	
Email address: steven.lafreniere@dys.alabama.gov		Telephone number: 334.215.3800	
Agency-Wide PREA Coordinator			
Name: Robert (Bobby) Latham		Title: DYS PREA Coordinator	
Email address: bobby.latham@dys.alabama.gov		Telephone number: 205.836.6618	

AUDIT FINDINGS

NARRATIVE

Autauga Campus, operated by the Alabama Department of Youth Services, is a short term program located on 65 acres of land located outside the city of Montgomery in a rural setting. The focus of the facility is to provide a highly intensive structured program for troubled children who enter the custody of the Alabama Department of Youth Services, or who continue or remain on probation status with the courts throughout the state of Alabama. Residents sent to this facility do not need medium or maximum secure treatment.

Notices of the PREA Audit, along with contact information, were posted six weeks prior to the on-site audit. This was confirmed by an email from the agency PREA Coordinator. Notices were posted in areas accessible to staff, youth, visitors, interns, contractors and volunteers. Photos identifying locations of notices were provided to the auditor following posting. A flash drive containing the Autauga Campus Pre-Audit Questionnaire, Department of Youth Services Mission Statement, agency policies, and documentation to support each substandard of each standard was forwarded to the auditor 30 days prior to the onsite audit.

The format of the information on the flash drive was interesting and very effective, enabling the auditor to easily review the information contained on it. Each standard file was set up to include "Process Indicators" or supporting documentation, "Protocols" which included the DYS Policies and a Form entitled, "PREA Juvenile Justice Standard Compliance Checklist" that provided the verbiage of the standard as well as references for addressing standards/sub-standards on the Pre-Audit Questionnaire. The auditor reviewed the information for each standard. The facility provided multiple samples of documents to support the facility practices related to specific substandards. The information was comprehensive, detailed and each file provided documentation to support compliance with each substandard. A list of documents was posted on one page that enabled the auditor to easily track each substandard's documentation. The information on this flash drive was the most informative, comprehensive and most easily tracked the auditor has had the pleasure of reviewing. The organization of material, as well as the numbers of documents provided as samples, enabled the auditor to understand the agency and facility's processes. This flash drive should be considered a model or best practice for submitting information to the auditors. The auditor communicated with the Facility Director to discuss the logistics and a tentative agenda for the on-site audit. Too, the auditor requested Human Resources provide documentation to confirm that PREA Questions are being asked of applicants and to confirm background checks are conducted for newly hired staff, staff who are promoted and to document "five year" checks.

The auditor met the evening prior to the on-site audit with the Agency's Deputy Director of Institutional Services, the Administrator of Institutional Services, the Agency PREA Coordinator, Facility Director and the PREA Compliance Manager. The purpose of this dinner meeting was to introduce the auditor to staff and to discuss tentative plans for the onsite audit the next day. The commitment of the agency was apparent by the attendance of the Deputy Director and the Administrator of Institutional Services.

By prior agreement, the auditor arrived at the facility at approximately 5:20AM to interview overnight shift staff prior to their departure at 6:00AM. Following those interviews the auditor proceeded with the facility tour, accompanied by the Facility Director and Agency PREA Coordinator.

This facility consists of four housing wings, classrooms, medical department, administration, food services, kitchen and dining area all under one roof. The facility was clean, neat and orderly. Youth were observed well dressed and cared for. Staff were professionally dressed and were observed actively engaging and supervising youth. Youth were observed under the direct supervision of staff.

The layout of this facility is open and lends itself to supervision of youth. Most of the space is open and blind spots are few and limited. Cameras are strategically located to enhance supervision. This facility also has security staff in addition to direct care staff providing an additional level of supervision and control. The facility is replete with windows enabling viewing in areas, offices, and spaces. Solid doors out of view of the camera, were secured and locked. In addition, these doors had signs restricting access to staff only.

Youth are housed on separate wings in double occupancy bedrooms. Bedroom doors have to remain open at all times to enable staff to be able to view inside the room when making rounds and supervising youth. Each bedroom has two beds, a restroom and shower. A solid door to the restroom/shower area provides privacy. Additional privacy is provided by shower curtains.

A wide variety of attractive and "eye catching" PREA Posters were observed throughout the campus, living units and program

areas. These Posters are unique and the graphic designs and bright colors draw attention to them. These posters contain valuable PREA Information including contact numbers and ways to report.

The facility is not secured by a fence.

Following the tour, interviews with staff continued. All specialized staff and randomly selected staff representing all shifts were interviewed. Ten youth, randomly selected from each housing unit, were interviewed. Interviews indicated that facility staff, both specialized and randomly selected staff were very knowledgeable of PREA, the Zero Tolerance Policy and reporting and responding. Staff were professional and indicated they were very serious about providing a sexually safe environment for the youth at this facility.

After completing interviews with staff and youth and reviewing documentation the facility provided, an exit briefing was conducted with the Agency PREA Coordinator, Facility Director, PREA Compliance Manager and Facility Team Leader.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Autauga Campus is part of the Alabama Department of Youth Services Residential Programs. The campus is located on 65 acres of land located outside the city of Montgomery in a rural setting. The focus of the facility is to provide a highly intensive structured program for troubled children who enter the custody of the Alabama Department of Youth Services, or who continue to remain on probation status with the courts throughout the state of Alabama. Residents have been determined to not need medium or maximum secure treatment.

The facility has a total of ten security staff who are assigned the responsibility to assure protection of the facility and to maintain calm throughout the facility. These staff are in addition to the direct care staff.

The facility is not secured by a fence and security is maintained by interactions between staff and residents as well as face-to-face contact during the awaking hours. The facility utilizes twenty-six cameras within the facility and three outside the facility. The cameras inside the building primarily focus on hallways. Security staff use hand held radios in the event they need to communicate with the control center or among other security staff located throughout the facility. Finally, each door is equipped with an alarm.

The program is short term in nature and last approximately 28 days. Residents may be required to repeat a week if they do not benefit from the lessons of the program. The regimen is to provide education, recreation and physical training and to provide consistent structure to those residents served. The goal is for residents to leave the facility and to return to their homes while having been provided structure and immediate consequences for having been in the program.

The campus has one building. The four housing wings, classrooms, medical department, administration, food services, kitchen and cafeteria are located in this one building. Three of the sleeping wings have twenty residents (ten rooms on each hall) in each wing while one wing houses eighteen residents (9 rooms on this hall). Immediately off each sleeping wing is a dayroom equipped with desks, chairs, television, and VCR/DVD. Next to each dayroom is a small laundry room which has a washer and dryer. Each sleeping room has a bathroom that includes a shower/bathtub combination, toilet, and sink with hot and cold running water. The sleeping rooms have two beds in each room and there is ample natural and artificial lighting. The building is very well suited for the program mission of the Autauga Campus and provides adequate space for programming and all other services required to meet the goals of the program. The building was purchased in 1994 from a private agency that provided drug rehabilitation.

Social services is a major component of the program and staff provides education, medical services, sex education, substance abuse education, individual and group counseling, and staff assist in the preparation of life skills.

The facility employs one case manager, one counselor I (Team leader), five shift supervisors, 29 youth service aides and childcare workers, one RN, three LPNs, one lead teacher and three classrooms teachers. The staffing ratio during the awaking hours is 1:8 while during the sleeping hours it is 1:12. The facility contracts for medical care (dentist and medical doctor), food service and laundry service (linens).

SUMMARY OF AUDIT FINDINGS

An initial review of the Alabama Department of Youth Services Policies and supporting documentation, which was provided to the auditor on a flash drive, clearly indicated that the Department takes PREA seriously. Policies and Procedures and especially the PREA Policy are comprehensive, detailed and address the facility's approach to prevention, detecting, responding to and reporting allegations of sexual abuse and sexual harassment. An initial review and evaluation of information provided on the flash drive documented that the facility's policies and procedures were in compliance with the PREA Standards. Supporting documentation included samples to illustrate compliance with DYS Policies and Procedures and the DOJ Standards. The flash drive was organized to include "process indicators" or examples of "practice" and "protocols" which were the Agency's Policies. Also included was a form entitled, "PREA Juvenile Justice Standard Compliance Checklist" that provided the verbiage of the standard and references for addressing standards/sub-standards on the Pre-Audit Questionnaire. Minimal additional documentation was requested to provide clarification and to increase the sample sizes.

The Agency has developed a very thorough and detailed Institutional Plan that addresses virtually all of the PREA Standards related to Prevention Planning, Responsive Planning, Training and Education, Screening for the Risk of Sexual Victimization and Abusiveness, Official Response Following a Juvenile Report, Investigations, Discipline, Medical and Mental Health Care and Data Collection. Following each standard related topic/statement, the plan identifies the Department of Youth Services Policies that address the statement/plan as well as any DYS Forms associated with the statement. The depth and scope of this document indicates the seriousness with which this Department takes regarding sexual safety and its commitment to the PREA Standards.

The auditor interviewed a total of 10 youth representing all living units. There were no youth in the facility during the audit who identified as being gay, bisexual or transgender. There were no youth at the facility who were disabled or limited English proficient nor were there any youth in the facility who had reported sexual abuse while in this facility. Specialized staff including the Agency's Deputy Director for Institutional Services, the Facility PREA Compliance Manager, medical and mental health staff, the retaliation monitor, upper level and intermediate level staff, first responders, an advocate, staff performing intake and victimization screening, staff serving on the incident review team, staff from the Lighthouse, and a volunteer. Staff representing all shifts were interviewed. Interviews indicated that staff have been educated on PREA and were especially knowledgeable of the agency's Zero Tolerance for any form of sexual activity, responding to allegations, suspicions and knowledge of sexual assault or abuse, protecting the evidence and reporting. Staff were professional and enthusiastic about their work and their PREA Knowledge. Staff related they have been trained to take all suspicions, knowledge or reports of sexual abuse seriously regardless of how the information was received. Staff were well aware of their roles as mandated reporters. The Agency's Deputy Director demonstrated, enthusiastically, the agency's commitment to sexual safety for each resident and staff in DYS facilities and programs. The PREA Compliance Manager, a certified PREA Auditor, was very informed and articulated detailed responses to all questions. All of the youth who were interviewed were able to articulate at least 6 ways to report sexual abuse, sexual harassment or retaliation if it occurred. They were the most educated youth the auditor has ever interviewed. All reported feeling safe.

The auditor's methodology included, reviewing every item provided on the facility's flash drive, reviewing additional information and documentation provided on site, observations made during the tour, including cameras, secured doors, staff supervision of youth, staff interactions with youth and through interviews with 10 youth representing all living units, interviews with 10 random staff, twelve (12) interviews with specialized staff, including the agency's Deputy Director for Institutional Services, and additional documentation reviews.

Forty-One (41) PREA Standards were evaluated. Eight (8) Standards were rated Exceeds. These included 115.311 Zero Tolerance of Sexual Abuse and Sexual Harassment, PREA Coordinator; 115.315, Limits to Cross Gender Viewing and Searches; 115.321 Evidence Protocol and Forensic Medical examinations; 115.333 Resident Education; 115.334 Specialized Training: Investigators; 115.351 Resident Reporting; 115.353 Residents Access to Outside Confidential Support Services; 115.364 First Responding and 115.365 Coordinated Response. The remaining thirty-three (33) standards were rated as "met".

Number of standards exceeded: 8

Number of standards met: 33

Number of standards not met: 0

Number of standards not applicable: 0

Standard 115.311 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

The State of Alabama Department of Youth Services Policy and Procedures, PREA Regulatory Guidelines and a variety of additional reviewed documentation, requires Zero Tolerance for all forms of sexual abuse and sexual harassment. It also describes the agency's response to preventing, detecting, responding to and reporting all allegations of sexual abuse or sexual harassment. PREA definitions were provided in the reviewed documentation. Zero Tolerance is communicated to youth during orientation, through continued education and all reviewed documents listed in standard 115.333. A memo dated May 21, 2014, from the Executive Director of the Department of Youth Services, designated the individual to serve as the Agency's PREA Coordinator along with a brief description of his overall responsibilities. The memo also confirmed the agency's commitment to Zero Tolerance. The agency provided an Agency Organizational Chart confirming that the Agency PREA Coordinator reports directly to the agency Director of Licensing and Standards. The facility provided a memo from the Autauga Campus, dated January 28, 2014, designating the Campus PREA Compliance Manager. The memo reiterated the Agency's commitment to the Zero Tolerance Policy. On January 4, 2017, the Campus Administrator acknowledged in a memo to the PREA Auditor, that she will serve as the interim PREA Compliance Manager until a full time person may be identified or hired. The Agency has a very comprehensive and extremely detailed approach to prevention, detection, responding and reporting and the procedures that have been implemented exceed the standard. The Agency has developed forms for quarterly reporting of various occurrences covered by the standards and has gone above and beyond in developing detailed procedures and processes to keep youth sexually safe. Zero Tolerance posters are located throughout the facility.

Interviews:

The agency's commitment to PREA was evidenced to this auditor by extensive discussions with the Agency Deputy Director for Institutional Services. It was apparent from her interview that the agency has taken PREA seriously since its inception. Her knowledge, not only of PREA, but of details of facility operations was impressive. In addition, her concern for the safety of all youth in DYS's care was just so apparent. The Agency PREA Coordinator, a Certified PREA Auditor, was extremely knowledgeable of the PREA Standards and it was evident that he was committed to PREA and in implementing PREA in Alabama Youth Services Facilities. He related that he is directly responsible for three Facility PREA Compliance Managers and assists and provides guidance to private providers who serve Alabama DYS youth. He also related that he has the support needed to implement PREA and has the time to fulfill his PREA responsibilities. He related that the Department requires direct care staff to youth ratios of 1:8 during awake hours and 1:12 at night. An interview with the facility's PREA Compliance Manager indicated that she is one of the most knowledgeable PREA Compliance Managers this auditor has had the pleasure of working with and interviewing. She is a certified PREA auditor and during her interview responses, she addressed, without notes, the PREA standards and substandards. Staff were also very knowledgeable of PREA and their responsibilities under PREA. They have been trained, refreshed, receive PREA topics during shift briefings and meetings and PREA posters throughout the facility keep PREA before staff and youth. Interviewed youth actually referred to zero tolerance and their general knowledge of PREA was impressive as well. When asked what PREA was and what it was for, the following are some responses they gave that indicated they have been provided PREA information regularly: "zero tolerance", "to eliminate rape and sexual assault", "You can't consent", "You should protect the evidence" and "It tells how to report it.". Every interviewed youth named at least 6 or more ways they would be able to report sexual abuse, sexual harassment or retaliation.

This standard is rated "exceeds" because of the of the commitment of this Department to Zero Tolerance. This is evidenced, not only by the comprehensive, detailed and specific policies and procedures promulgated by this Department to address each substandard and more in the agency's approach to prevention, detection, reporting and responding but also the fact that these have been not just implemented but "institutionalized" into the fabric of agency and facility operations. This was verified by reviewed documentation, observations, interviews with the DYS Deputy Director, Agency PREA Coordinator, Facility Director, Facility PREA Compliance Manager, and with both random and specialized staff. Interviews with youth indicated

these youth have been exposed to PREA in the facilities they have resided in and at Autauga. They have not only been exposed to it, they have had it so much, they have retained this information. Interviewed youth knew more about PREA than the responses to the questions developed by the PREA Resource Center. Because they appeared to be knowledgeable, the auditor went a step further by asking the youth to tell him everything they knew about PREA and their knowledge was amazing. Residents mentioned zero tolerance, 6 or more ways they could report, protecting evidence, to eliminate rape and sexual assault and they said, "to keep us safe". Additionally, the agency has a graphics arts staff who has taken the PREA Information staff, youth, visitors and contractors need to know and developed the most attractive and "eye catching" posters the auditor has seen. But, it is not just the graphics. Posters in this facility address Reporting, Outside Support Agencies; Contact Information, Red Flags; Staff Announcing their presence and a host of other PREA related information. This information was not sporadically sprinkled here and there but was in every area of the facility. The most interesting thing about this approach to the auditor is that with the multitude of topics covered, a wide variety of PREA related information is available to staff, youth, volunteers and contractors continuously. One youth said, "we get bored, so we just go around reading those posters." This agency has the most complete approach to prevention, detection, responding and reporting the auditor has ever seen.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Coordinator Designation and Qualifications Memo (May 21, 2014)
- ✓ Resume for Agency PREA Coordinator
- ✓ Agency Organizational Chart
- ✓ Memos from Autauga Campus Administrators designating PREA Compliance Manager

Standard 115.312 Contracting with other entities for the confinement of residents

- 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

The Pre-Audit Questionnaire (PAQ) indicated that the agency has 13 contracts for the confinement of residents that the agency entered into with private entities or other government agencies on or after August 20, 2012. The PAQ stated that all of the agency contracts for the confinement of youth contain the requirements that the contractor adopt and comply with all of the DOJ PREA Standards and also that they will allow the Alabama Department of Youth Services to monitor compliance. One contract with four residential facilities was provided for review. The contract contained in section 14, all requirements that the contractor adopt and comply with all Juvenile Facility PREA Standards established by the United States Department of Justice. Specifically, the language is as follows: "Contractor will comply with the Prison Rape Elimination Act of 2003 and with all applicable PREA Standards, DYS Policies related to PREA and Standards related to PREA for preventing, detecting, monitoring, investigating and eradicating any form of sexual abuse within DYS Facilities/Programs/Offices owned, operated or contracted. Contractors acknowledge that, in addition to "self monitoring requirements" DYS will conduct announced or unannounced, compliance monitoring to include "on-site" monitoring. Failure to comply with PREA, including PREA Standards and DYS Policies may result in termination of the contract. Agency contracts also include "self-monitoring requirements". Policy also requires that all DYS and contract service provider facilities, with whom DYS contracts for the confinement of juveniles, will be audited by a certified PREA Auditor according to the PREA Audit schedule, and found compliant following the 180-day corrective action plan in order for DYS to be able to continue to utilize their services.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.312 Contract Private Provider Receipt of PREA
- ✓ Contract Review Report #50210148 (August 2014)
- ✓ Contract Review Report #60210148 (August 2015)
- ✓ Professional Service Contract Between Alabama Department of Youth Services and Sequel TSI of Alabama, LLC

Standard 115.313 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Alabama DYS Policy requires DYS and Contract service provider facilities to develop, implement and document a staffing plan that provides adequate levels of staffing and, where feasible, video monitoring to protect juveniles from sexual abuse. Staff to youth ratios required are 1:8 during awake hours and 1:12 during sleeping hours. These ratios are required to be maintained except during limited exigent circumstances which are required to be thoroughly documented. Policy also requires male and female staff ratios to be maintained with at least one staff every shift of the same sex as the juveniles being housed in the units. Staffing at the Autauga Campus is predicated upon the designed Facility capacity of 72 beds. Although the rated capacity was 72, the Pre-Audit Questionnaire stated that since August 20, 2012, or the last PREA Audit, whichever is later, the average number of residents on which the staffing plan was predicated is 48 and the average daily number of residents during that period is 30 residents. The facility is obligated to maintain staffing ratios of a minimum of 1:8 during resident awake hours and 1:12 during resident sleeping hours. The annual staffing assessment, dated May 6, 2016, submitted as a part of the facility documentation, required Autauga Campus to maintain staffing ratios of a minimum of 1:8 and 1:12, except during limited and exigent circumstances, which are fully documented. Reviewed documentation, interviews with staff and youth and observations made during the on-site audit indicated the facility is maintaining the minimum staff to youth ratios as required. The facility provided “Staffing Patterns” for the past twelve months documenting those staff who are assigned to each unit. Multiple shift schedules were provided and reviewed. Additionally, they provided multiple Security Count Affidavits identifying the numbers of staff and youth in the facility, identified by levels.

The facility has documented its best efforts to protect youth from sexual abuse through a staffing pattern with ratios of staff to youth of 1:8 during awake hours and 1:12 in sleeping hours, through the use of video monitoring, positioning of staff to mitigate blind spots and through conducting unannounced rounds. When staffing ratios cannot be maintained, staff may be held over or staff may be paid overtime. Deviations from the staffing pattern are required to be documented. The facility provided a sample of “staffing affidavits” documenting staffing ratios for individual living units. There were no deviations reported on any of the reviewed Security Affidavits.

The reviewed Annual Facility Staffing Assessment, dated May 6, 2016, documented that Autauga Campus meets the staffing ratios of 1:8 during juvenile waking hours and 1:12 during sleeping hours, except in limited exigent circumstances which are fully documented. The facility documented on the Pre-Audit Questionnaire there were no deviations from the staffing plan during the past twelve months. In calculating staffing ratio requirements, the facility documented that it considered each of the items required in the PREA Standards. The assessment also documented that video surveillance was last updated in 2014. Additional cameras were not identified as being needed. The Annual Facility Staffing Assessment also indicated that staffing

ratios are maintained with “few exceptions” and any deviations documented on the Security Count Affidavit Form. Cameras are strategically placed throughout the facility. The design of the facility included a number of large windows enabling viewing inside of classes, rooms and offices. Where solid doors were outside of camera view, signs restricting access were posted.

Staff conduct quarterly Secure Facility Vulnerability Assessments. These include assessments of lighting and surveillance camera assessments, blind spots, common areas, radio communications, classrooms, office areas, bathroom areas, visitation areas, as well as an assessment of supervision of juveniles.

Staff are required to maintain continual supervision of all assigned youth, to conduct face to name headcounts, control movement of youth on and off campus and to maintain the required ratios of one staff to eight youth during 1st and 2nd shifts (out of room time) and one staff to twelve youth on the night shift. Specially trained security staff conduct searches and deal with supervision and security issues. Youth Services staff also provide supervision. This facility consists of bedrooms with two beds and a restroom and shower. There is a door to both the room, the bathroom and shower. Shower curtains afford additional privacy. Local operating procedures require that during showers, one youth showers while the other sits in the hall. Doors are left open during the sleeping hours. If a youth needs to use the restroom, the youth holds his arm outside the room until the staff addressed him. Once permission is given and staff is aware the youth is out of bed, the youth uses the restroom and when finished, puts his arm back outside his room, waiting until the staff gives him permission to return to his bed. During the tour the staffing ratios were less than 1:8, exceeding the required ratios, and youth were actively engaged with staff and no youth was out of sight and sound supervision of the staff.

To supplement supervision, cameras are strategically located throughout the facility. Where there are solid doors out of view of the camera, the doors often had signs stating, “Staff Only”. Also, access to these areas are controlled through restricting keys. Staff were observed actively supervising and engaging youth throughout the audit.

The auditor reviewed 18 documented Supervisory Monitoring Log Sheets documenting unannounced rounds. Although the facility has documented unannounced rounds on all shifts and is in compliance with the standards the auditor suggested that Third Shift Rounds include times other than those between 5:30AM and 5:50 AM. This practice tends to communicate to staff that rounds on third shift will consistently be made just prior to their departures. These rounds should be unpredictable. Also consideration should be given to documenting what was observed and that the documentation is made in the staff’s handwriting rather than typing.

Each Monitoring Log Sheet contains a statement confirming whether or not staff alerted other staff. All of them documented that in no cases were staff alerted that unannounced rounds were being conducted.

Interviews:

The Facility Director affirmed the facility adheres to a ratio of 1:8 during awake hours and 1:12 during sleeping hours. She stated if staff are called in and were not able to come to work, the facility would hold staff over or call staff in but the minimums are always complied with. She stated she and her staff review the staffing plan annually and consider all of the items required by the PREA standards. Documentation of review was provided. Interviews with the Facility Director and intermediate and higher level staff confirmed unannounced rounds are being made and are documented. Interviews with both staff and youth confirmed the ratios are maintained. In addition, youth explained to the auditor that these staff move around all the time and “are up in your business” all the time. Youth confirmed, in their interviews, the showering/restroom practices.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Staffing Pattern
- ✓ Complete Facility Staff Work Schedules
- ✓ Daily Population Reports
- ✓ Security Count Affidavits
- ✓ Facility Vulnerability Assessments
- ✓ Facility Rosters
- ✓ Group Counseling Schedules
- ✓ Facility Activity Schedule (All Dorms)
- ✓ Annual Survey of Sexual Victimization (DOJ 2014 Survey of Sexual Victimization Summary Form/Report)
- ✓ Security Count Affidavit
- ✓ PREA Form 115.113 Supervisory Monitoring Log

- ✓ Annual Review of Staffing Assessment (DYS 115.332)

Standard 115.315 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Alabama Department of Youth Services Policy and Procedures prohibits Autauga Campus Staff from conducting cross-gender strip or cross-gender visual body cavity searches on residents. According to Pre-Audit Questionnaire (PAQ), during the audit period there were no cross-gender strip or cross-gender visual body cavity searches. Reviewed documentation indicated that the facility does not permit cross-gender pat-down searches of residents, absent exigent circumstances. Occurrence Reports were provided for review. Occurrence Reports document the number of occurrences of an act during a quarterly period. Occurrence Reports reflected there were no occurrences of cross gender searches in any quarter during the period January through December 2016. The Pre-Audit Questionnaire reported no cross gender pat down searches or strip or visual body cavity searches of residents during the past twelve months. This was confirmed through interviews with youth and staff.

The facility prohibits staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status. The PAQ indicated no searches occurred during the audit period. Policy requires the facility to implement procedures that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia. The facility provided an occurrence report for searches and/or examinations of transgender or intersex youth. The occurrence reports for each quarter of 2016 documented there were no instances of any search of a transgender or intersex youth for the purpose of determining their genital status. The Pre-Audit Questionnaire reported there were no searches or examinations of any transgender or intersex youth for the sole purpose of determining their genital status conducted by any staff, including medical. This was confirmed through interviews with randomly selected and specialized staff.

The facility documented that 100 per cent of the Autauga Staff have been trained to conduct cross-gender pat down searches and searches of transgender and intersex residents in a professional and respectful manner, consistent with security needs.

Juveniles are required, by policy, to be able to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks or genitalia, except in Exigent Circumstances or when such viewing is incidental to routine room checks. This facility consists of bedrooms housing two youth. There is a restroom and shower in each room. Privacy is afforded youth when showering or using the restroom. There is a solid door to the restroom and shower. Additionally, the showers have shower curtains affording additional privacy. When a youth is in the shower, the roommate is required to sit out in the hall.

Staff of the opposite gender are required to announce their presence before entering a living unit housing youth of the opposite gender. During the tour of the facility, female staff were observed announcing their entry into and presence on the unit.

Interviews:

One hundred percent (100%) of the randomly selected staff stated that staff are prohibited from conducting any form of cross gender searches. The Autauga Campus is staffed with security staff and youth services workers. Security staff conduct searches. Staff also related they are prohibited from searching transgender or intersex youth to determine their genital status. Each interviewed female staff stated they have never searched a male youth. They indicated there are always male staff on duty and if necessary they would watch the youth and supervise them until a male staff was available. All of the male staff stated they have never seen a female search a youth. One hundred percent (100%) of the ten (10) interviewed youth, representing the different living units, related that they have never been searched by a female staff nor have they ever

witnessed a cross gender search by a female staff. Staff confirmed the showering process and stated youth are never in view of staff while naked, either in the showers or while using the restroom. Female and male staff stated that anytime a female enters the living unit she always announces her presence by saying, "female on the unit" or she announces her name to alert youth that she is on the unit. Ten of 10 interviewed youth related that they are able to shower, dress and use the restroom without any staff viewing them.

Based on observations of the bedrooms, showers and restrooms enabling youth to shower behind a door and a shower curtain as well as a door on the restroom, interviews with multiple youth and staff and the local operating procedures this standard is rated exceeds.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus Pre-Audit Questionnaire (Juvenile Facilities)

- ✓ PREA Form 115.315 Cross Gender Strip Searches
- ✓ PREA Form 115.315 Cross Gender Visual Body Cavity Searches
- ✓ PREA Form 115.315 Cross Gender Pat-Down Searches
- ✓ Shift Duty Assignments
- ✓ Medical Reports (Medical Examination of Transgender or Intersex Juvenile)
- ✓ Security Training Records (Searches)
- ✓ Occurrence of Cross Gender Visual Body Cavity Searches Zero from January 1, 2016 through December 31, 2016.
- ✓ Occurrence of physically examining a transgender or intersex juvenile for the sole purpose of determining the juvenile's genital status during the reporting period

Standard 115.316 Residents with disabilities and residents 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Alabama Department of Youth Services Policy and Procedures requires the Autauga Campus to establish procedures to provide disabled residents equal opportunity to participate in and benefit from all aspects of facility efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

The DYS PREA Policy, Section III. Juvenile PREA Orientation (115.333), requires that facilities shall provide Juveniles orientation in formats accessible to all Juveniles, including those who are Limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to Juveniles who have limited reading skills. It further provides that each facility shall take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of DYS's efforts to prevent, detect, and respond to Sexual Abuse and Sexual Harassment. Policy states that these steps shall include, when necessary to ensure effective communication with Juveniles who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, facilities are required to ensure that written materials are provided in formats or through methods that ensure effective communication with Juveniles with disabilities, including Juveniles who have intellectual disabilities, limited reading skills, or who are blind or have low vision.

The PREA Policy, III., Juvenile PREA Orientation also prohibits facilities from relying on resident interpreters, resident readers, or other types of Juvenile assistants except in limited circumstances where an extended delay in obtaining an PREA Audit Report

effective interpreter could compromise the Juvenile's safety, the performance of first-responder duties, or the investigation of the Juvenile's allegations. (115.316)

The Facility provided a copy of the contract between the Alabama Department of Youth Services and Deep South Language Services to provide Interpreter/Translator Services in three DYS Campus/Schools including the following: Mt. Meigs; Autauga and Vacca. The reviewed contract provides for interpretive services for residents who may speak Spanish, Guatemalan (Various dialects), Chinese, Vietnamese and/or Korean. The contract requires that these services are available 24/7, 365 days a year. Additionally, it requires that interpreters possess the appropriate training/education and credential/licensure/certification. The renewed contract with Deep South Interpreter/Translator Services was provided and reviewed. The effective date was October 1, 2016 and ends September 30, 2017.

The facility provided PREA brochures in Spanish and one designed for limited readers. The facility has special education teachers who could also serve to provide orientation and other assistance with a variety of disabilities. Youth and staff reported that information given during orientation is read to them and residents are given the opportunity to ask questions to clarify anything that is unclear to them.

Staff and any disabled residents also have access to ADAP for any assistance they might need as a result of a disability.

The Autauga Campus Pre-Audit Questionnaire indicated that the use of resident interpreters, resident readers, or other types of resident assistants is prohibited except in limited circumstances where an extended delay may result in a youth being unable to report an incident of sexual abuse or where delay could compromise the safety of the youth.

Interviews:

100 per cent of the interviewed random and specialized staff confirmed staff would not rely on a resident interpreter, reader or other resident assistant to assist a resident in making a report of sexual abuse or sexual harassment.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.333 Juvenile Receipt of PREA
- ✓ PREA Form 115.331 Staff Receipt of PREA
- ✓ Access to Interpreter
- ✓ PREA Form 115.333LF
- ✓ PREA Form 115.333S
- ✓ Observation

Standard 115.317 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Alabama Department of Youth Services Policy and Procedures prohibits Autauga Campus from hiring or promoting anyone

who may have contact with residents, and prohibits enlisting the services of any contractor who have contact with residents, who engaged in sexual abuse, or have been convicted of engaging or attempting to engage in sexual activity or has been civilly or administratively adjudicated to have engaged in the sexual abuse activities. The facility provided a sample of Pre-Employment PREA Questions documenting that applicants complete and sign the PREA Employment Questions Form. The PREA Written Institutional Plan – Autauga Campus, reiterates the requirements of DYS Policy related to hiring and promotion decisions. This information is located in Paragraph # 10, Page 5 and references DYS Policy 3.1, Recruitment and Section and DYS Form 115.317 PREA Employee Questionnaire.

DYS PREA Policy requires facilities to conduct criminal background records checks at least every four years on current employees and contractors who may have direct contact with juveniles. "Facilities shall set up a spreadsheet sorted by driver's license expiration dates, and after the initial background check, run the background checks again the month after the driver's license expires." The following procedures are required to be followed in DYS facilities in Alabama where Alabama Law requires drivers' licenses to be renewed every four years:

(1) Run an initial background check on all the employees on a campus in the year of an initial PREA Audit. (2) Input all the information into an Excel Spreadsheet. (3) Sort the spreadsheet by Driver's License Expiration Date. (4) Run the background checks again one month after the driver's license expiration date. This process was established to ensure that employees have a current driver's license and meets PREA standards that require a criminal background records check on employees every five years.

The facility provided a roster reflecting background clearance dates and results for newly hired staff, staff who were promoted during the year and for contractors. An additional roster was provided documenting staff having been cleared following a check of the Child Abuse and Neglect Registry.

Interviews:

The PREA Coordinator, in a previous interview, described the hiring and promotion process. The process described is thorough and consistent with the PREA Standards.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.317 Pre-employment Questionnaires
- ✓ Occurrence of hiring or promoting employees

Standard 115.318 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Alabama Department of Youth Services Policy and Procedures require that the facility, when designing or acquiring any new facility and in planning any expansion or modification of existing facilities, DYS and private service providers are required to consider the effect of all these elements on the agency's ability to protect juveniles from sexual abuse.

The PREA Policy also requires that when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, DYS and private contract providers shall consider how such technology may enhance the ability

to protect juveniles from sexual abuse.

The facility's Pre-Audit Questionnaire documented there were no substantial expansions or modifications to the existing facility since the last PREA Audit nor has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.

Interviews:

An interview with the Facility Director indicated the facility has been approved for an upgrade to the video monitoring technology enabling her to view the cameras from her desk computer in order to conduct "spot checks" The DYS Deputy Director of Institutional Services clearly articulated the agency's commitment to keep youth safe. She indicated that the agency takes sexual safety seriously and when considering new facilities or modifications to existing ones, as well as placement of cameras and when installing or upgrading monitoring technology, the Agency involves a lot of people to make the best decisions in order to attempt to eliminate blind spots and enhance viewing and supervision. These would include state office staff, facility staff, maintenance, the architects and others.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Surveillance System Schematic:

Standard 115.321 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

DYS Policy 1.29, Special Investigation Unit, Paragraph E., states that the Special Investigation Unit (SIU) is responsible for investigating certain allegations of Sexual Abuse/assault/harassment following a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. When it appears that allegations of Sexual Abuse, sexual assault, and Sexual Harassment are supported by evidence of criminal behavior, the SIU ensures that the allegations are referred for investigation to law enforcement. All referrals are documented. Also, the responsibilities for conducting investigations is published on the DYS PREA website.

Autauga Campus facility is responsible for conducting administrative sexual abuse investigations including resident-on-resident sexual abuse or staff sexual misconduct. The facility has a MOU between the Alabama Department of Youth Services and the Autauga Sheriff's Office. According to the MOU, it is agreed and understood that the Autauga County Sheriff's Office will provide investigative services to residents and staff of the Autauga Campus of the Alabama Department of Youth Services pursuant to standard 115.321 (Evidence Protocol & Forensic Medical Examinations), standard 115.334 (Special training: Investigations), and standard 115.371 (Criminal and Administrative Agency Investigations) on a 24 hours a day basis. These services, according to the MOU, include responsibility for investigating allegations of sexual abuse by qualified staff screened for appropriateness to serve in this role and who have received training concerning sexual assault and forensic examination issues in general. The agreement addressed each substandard of investigations.

DYS Policy and the Autauga Campus offer residents of sexual abuse access to forensic medical examinations. Where
PREA Audit Report

possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). The organization providing forensic exams for this campus is the Lighthouse (STAR – Standing Together Against Rape), a stand alone facility, operating 24/7. The organization provides sexual assault exams provided by Sexual Assault Nurse Examiners/Forensic Examiners. The reviewed MOU indicated that STAR agrees to provide 24 hour crisis intervention services for victims of sexual assault. Forensic exams are provided by trained SANEs who have received training that follows the International Association of Forensic Nurse guidelines. Also, the MOU affirms that the examiners will follow the National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents recommended by the Justice Department under the PREA Standards. Forensic medical examinations are offered without financial cost to the victim or victim's family. The auditor reviewed contracts with STAR/The Lighthouse for the past three years. The most recent contract/agreement covers the period 2016-2017. That contract specifies that the Lighthouse will provide the following:

- Respond immediately and directly to DYS to any potential requests for an exam
- Schedule a rape exam within 45 minutes after an official request has been made
- Perform a rape kit examination
- Provide chain of custody for the kit to the respective investigating agency
- Provide a copy of STAR's forensic medical record to the DYS representative
- With proper notice (subpoena) be available for any litigation processes as needed
- Ensure the credentials and professional liability insurance for any nurses conducting the sexual assault exam are current
- Ensure that all personnel, including nursing personnel, possess current unrestricted licenses to provide services in the state of Alabama
- Comply with all security requirements of DYS, as necessary
- Protect the identity and confidentiality of all sexual assault victims referred to STAR from DYS
- If necessary, provide the camera equipment required for collecting any digital images
- Seek the participation of DYS representative in Sexual Assault
- Provide such services within the time frames required.

The Pre Audit Questionnaire indicated that there have been no incidents requiring forensic medical exams during the past 12 months.

If requested by the victim, a victim advocate, or qualified facility staff member will accompany and support the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals as indicated. The facility provided staff certificates of training from the Alabama Coalition Against RAPE, indicating that staff have been trained in victim advocacy in a training session entitled: "Understanding The Needs of Sexual Assault Victims: A Seminar for Those Working in Correctional Settings". This standard exceeds the requirements because of the work the agency has done to secure a MOU with a stand-alone RAPE Crisis Center, the Lighthouse, who provides forensic exams and other services to victims of sexual assault, including advocates for victims, but the agency went a step further and trained selected staff to serve as advocates for youth. The facility exceeds the standard because in addition to the services provided by "The Lighthouse" the agency has been proactive and entered into a contract with "The Lighthouse" to ensure that those services are provided expeditiously and that both parties know the responsibilities of the other. Three reviewed contracts confirm that these services have been available since 2014.

The facility provided documentation confirming the training staff Victim Advocates received. That training included: the following:

- Understand the PREA and how it pertains to juvenile facilities
- DYS Policy 13.8.1 (DYS PREA Policy)
- DYS has a zero tolerance for sexual abuse and sexual harassment
- The victim advocate, qualified agency 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
- A qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general
- How to fulfill individual responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures
- The right of juveniles to be free from sexual abuse and sexual harassment
- The right of juveniles and employees to be free from retaliation for the reporting of sexual abuse and sexual harassment

- The dynamics of sexual abuse and sexual harassment in confinement
- The common reactions of sexual abuse and sexual harassment victims
- How to detect and respond to signs of threatened and actual sexual abuse
- How to avoid inappropriate relationships with juveniles
- How to communicate effectively and professionally with juveniles, including lesbian, gay, bisexual, transgender, intersex or gender nonconforming juveniles
- Recognizing red flags
- Understanding first responder duties
- Understanding shared information guidelines

Staff trained as victim advocates signed acknowledgments that they received the above training and understand it. These were provided to the auditor for review.

This standard is rated exceeds because the facility has a Specialized Investigation Unit who conducts investigations. If the allegation appears to be criminal the facility would call the Autauga County Sheriff's Department. The facility has gone above and beyond by making contact with the Sheriff and his staff and explaining PREA and the standards as they apply to evidence protocols. The Sheriff signed a Memorandum of Understanding confirming investigations would be conducted by qualified and trained investigators who would follow the established protocol and who would have had specialized training for conducting sexual abuse investigations in confinement settings.

In addition, the facility has gone above and beyond by having several staff trained to serve as advocates for youth, if requested. The training was provided by the Lighthouse staff.

Interviews:

A previous interview with the Director of Programming at the Lighthouse Counseling Center indicated that this organization is a "stand alone" facility operating 24/7 providing sexual assault forensic exams. Services include "head to toe exams", forensic exam/collection of evidence, std prophylaxis, contraception information, pregnancy tests for females and discharge orders for continued care. The facility, according to the Director, has one full time examiner and eight (8) contract examiners. An interview with the Nurse Manager at Autauga Campus was knowledgeable of actions to take in response to an incident of sexual assault, including the steps he would take to preserve the evidence.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.321 Victim Advocate Receipt of PREA
- ✓ Victim Advocate Certification of Completion (Alabama Coalition Against RAPE)
- ✓ Credentials for Criminal Investigators (NIC PREA: Investigating Sexual Abuse in a Confinement Setting)
- ✓ Certificate of Attendance (Specialized Training: Investigating Sexual Abuse in Correctional Setting/Moss Group LLC)
- ✓ Agreement Between Autauga Campus of the Alabama Department of Youth Services and the Autauga County Sheriff's Office
- ✓ Multiple Contracts with STAR/The Lighthouse for Crisis Intervention, Forensic Exams, and Advocacy

Standard 115.322 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific

corrective actions taken by the facility.

Summary:

Alabama Department of Youth Services Policy, 1.29, Special Investigations Unit, states that DYS has a special unit (Specialized Investigations Unit) for investigating all allegations of sexual abuse, sexual harassment or any sexual conduct alleged in DYS operated facilities. Investigators are required, by policy, to follow a uniform evidence protocol that maximizes the potential for obtaining physical evidence for administrative proceedings and criminal prosecution. Also, when it appears that allegations are supported by evidence of criminal behavior, the SIU investigators ensure the allegations are referred for investigation to law enforcement. Alabama Department of Youth Services Policy and Procedures require the facility to ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Policy requires allegations of sexual abuse or sexual harassment to be referred for investigation to an agency with the legal authority to conduct criminal investigations. That agency is the Autauga County Sheriff's Office. The reviewed Memorandum of Understanding between the facility and Autauga County Sheriff's Office confirms and acknowledges the roles of the Sheriff's Office and the facility. The MOU, states that the Sheriff's Office will provide services "on a 24 hour a day basis" and that the services they will provide include the responsibility for investigating allegations of sexual abuse by qualified staff screened for appropriateness to serve in that role and who have received training concerning sexual assault and forensic exam issues generally. All referrals of allegations of sexual abuse or sexual harassment for criminal investigations are documented. In addition to referrals to the Autauga County Sheriff's Office simultaneously to the DYS Investigator through the Alabama DYS General Counsel. DYS Investigators make a determination of whether or not the allegation is criminal and should be referred to the Sheriff's Office or whether the allegation is administrative in nature. Allegations that are administrative will be investigated by the DYS Investigator.

The facility provided occurrence reports documenting that during all four quarters of 2016 there were no allegations of sexual abuse, sexual harassment or misconduct.

The facility website provides viewers information related to reporting allegations of sexual abuse and sexual harassment and advises them of the investigation process.

The DYS website is one of the most informative websites this auditor has ever seen. It provides a variety of information related to PREA. Specific to this standard, the agency has posted information about investigations as follows: (From DYS Policy 13.8.1) "The Special Investigation Unit (SIU) is responsible for investigating all allegations of sexual abuse/assault/harassment following a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

The Pre Audit Questionnaire indicated that there were no allegations of sexual abuse and sexual harassment.

Interviews:

A previous interview with a DYS Special Investigator indicated that he was very knowledgeable of the responsibilities of his agency relative to investigating allegations of sexual abuse and sexual harassment. He related that DYS Investigations are done at the direction of the Alabama Department of Youth Services General Counsel. He stated that incident reports from the facility go to Legal, the unit responsible for the investigation unit, who then refers them on to investigations. The investigator stated if the allegation was a "rape" a call would go to the General Counsel and he would call investigations with instructions regarding conducting an investigation. If the allegation is criminal, the DYS Special Agent stated that all of the DYS information would be given to the Autauga County Sheriff's Office Investigator. Interviews with the PREA Coordinator, Facility PREA Compliance Manager and Facility Director indicated that all reports, regardless of how they are received are referred for investigation.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campue PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Website Publication
- ✓ Occurrence Referrals to Law Enforcement for Criminal Investigation during 2016 (None)
- ✓ Occurrence of Referrals for Administrative Investigations during 2016 (None)

Standard 115.331 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Alabama Department of Youth Services Policy, 13.8.1, Prison Rape Elimination Act(PREA) Regulatory Guidelines,I. Training and Education of Staff specifies the training requirements for professional specialist, child care staff and security staff. Policy addresses all of the items and information required by the standards. Training is tailored to the unique needs and attributes of the residents of the facility and to the gender of the residents. Training is required to be documented on PREA Form 115.331, Staff Receipt of PREA Training.

Alabama Department of Youth Services Policy and Procedures require Autauga Campus to train all employees who may have contact with residents on 11 different topics required by the PREA Standards. The facility uploaded the Training Curriculum and identified the page and section on the Pre-Audit Questionnaire enabling the auditor to easily review each requirement. The reviewed training curriculum was comprehensive and addressed the facilities approach to prevention, detection, responding and reporting. In addition to the training provided from the Training Curriculum, the facility has staff posters in Spanish and English and staff brochures.

An excellent PREA Brochure, entitled "What Staff Should Know About Sexual Misconduct With Juveniles" is available to staff. This brochure discusses such topics as sexual misconduct, including sexual harassment, disciplinary actions, abuse of power, understanding how juveniles may use their sexuality, boundaries and other vital areas.

Between trainings the facility provides employees with refresher information about current policies regarding sexual abuse and harassment. The frequency with which employees receive refresher training on PREA requirements is twice per year and as needed.

The Pre Audit Questionnaire documented that 48 staff currently employed by Autauga Campus who have contact with youth were trained or retrained on the PREA requirements. The facility provided samples of documentation that indicated staff were and are trained as stated and required. These included samples of the form entitled "Staff Receipt of PREA". Staff acknowledge, by their signatures, that they have received and understand the 17 identified areas and topics listed on the form. The staff acknowledge having received the training to include: 1) Understanding the Prison Rape Elimination Act and how it pertains to juvenile facilities 2) DYS Policy 13.8.1 (PREA Regulatory Guidelines) 3) Zero Tolerance Policy 4) How to fulfill individual responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures 5) How to comply with laws related to mandatory reporting 6) Red Flags 7) Rights of juveniles to be free from sexual abuse and sexual harassment 8) Rights of juveniles to be free from retaliation 9) Dynamics of sexual abuse 10) Common reactions to sexual abuse 11) Detecting and responding to threatened or actual sexual abuse 12) How to avoid inappropriate relationships 13) Relevant laws regarding age of consent 14) Communicating effectively and professionally with LGBTI and gender non-conforming youth 15) First Responder Duties 16) Understanding shared information guidelines and 17) PREA written institutional plan

Interviews:

Randomly selected staff, as well as specialized staff, were knowledgeable of PREA. Specialized Staff were especially articulate in being able to relate their understanding of PREA and the topics that they were trained in. Direct Care staff demonstrated their knowledge of PREA and were consistently able to articulate their responsibilities to report all suspicions, knowledge, allegations or reports of sexual abuse and they would report it regardless of how the allegation was received. They were well aware of the Zero Tolerance Policy and youth and staff's rights to be free from retaliation for reporting. They were articulate about their roles as first responders and how to protect evidence.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Code of Alabama 1975 Section 26-14-3
- ✓ Employee Training Curriculum
- ✓ PREA Form 115.331 Staff Confirmation of Receipt of PREA
- ✓ PREA Pamphlet 115.331.1 What Staff Should Know About Sexual Misconduct with Juveniles
- ✓

Standard 115.332 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

DYS Policy PREA Regulatory Guidelines, dated March 31, 2014, page 6, Paragraph E. Volunteers and Contractors, subparagraph 1, requires the facility to ensure that all volunteers and contractors who may have contact with youth have been trained on their responsibility under the Agency’s Sexual Abuse and Sexual Harassment prevention, detection and response policy and procedures. Subparagraph 2 also requires that all volunteers shall be notified of the Agency’s Zero Tolerance Policy and informed how to report. Policy requires that training is based on services provided and level of contact with juveniles however policy requires that all are notified of the agency’s zero tolerance policy and how to report incidents of sexual abuse or sexual harassment.

Training is provided via a power point presentation that includes the following: PREA Definitions, Policy Statement, prohibitions, reporting requirements and then the volunteers and contractors sign an acknowledgment. The auditor reviewed the power point presentation.

Training is documented on PREA Form 115.332, Volunteer and Contractor Receipt of Training. This document/form addresses “policy” via a policy statement that discusses DYS’s commitment to prevention and elimination of sexual abuse within DYS operated and contracted facilities. It also advises the volunteers/contractors that violations of the PREA Policy may result in disciplinary sanctions and/or criminal prosecution. Definitions, prohibited behaviors and reporting requirements are also discussed. The facility provided a sample of 30 PREA Forms 115.332 confirming volunteers and contractors receiving the required training. Four (4) additional PREA Forms 115. 332 documented “Interpreters” having received the required training as well. By signing the acknowledgement the volunteer or contractor acknowledges receiving DYS Policy 13.8.1, Protection from Sexual Abuse and Assault and having received training on the above information (noted above). They also, agree, by signing the acknowledgment to comply with the provisions of DYS Policy 13.8.1.

Interviews:

An interview with a facility volunteer indicated he has been trained in the PREA Policy, including the Zero Tolerance Policy and how to report. He also acknowledged that he is a mandated reporter. He also related that he volunteers in the adult correctional system and has had PREA training from them as well.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.332 Volunteer and Contractor Receipt of PREA

- ✓ PREA Form 115.311 PREA Fact Sheet
- ✓ Occurrence of new volunteer training being conducted.

Standard 115.333 Resident 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

DYS Policy 13.8.1, Prison Rape Elimination Act (PREA) Regulatory Guidelines, III. Juvenile PREA Orientation, requires that during the intake process juveniles will receive the following information related to PREA: 1) Information explaining the zero tolerance policy 2) How to report sexual abuse and sexual harassment and 3) The “What You Should Know Brochure”. Policy requires staff to read the brochure to all juveniles individually or in groups. The agency provided three (3) versions of the brochure. One version is in English, one in Spanish and one in English developed for lower functioning youth. The Student Handbook, which youth are given access to, thoroughly discusses PREA and PREA related information. On page 11 of the program manual, youth are advised of their rights to be free from sexual violence, definitions, prohibited behaviors, how to report incidents of sexual misconduct or sexual assault. This section of the manual also provides contact information for youth who are detained solely for civil immigration purposes, what to do if the youth is assaulted, and honesty in filing an allegation.

DYS Policy requires that within 10 days comprehensive and age appropriate education must be provided either in person or through video. The information provided in these sessions must include the following: Information in the Youth Handbook, the PREA Form 115.333, the “What You Should Know Brochure”, the DYS Safety Guide, the power point presentation, and the DYS Facts Sheet. The facility maintains documentation of resident participation in PREA education sessions by having the resident to complete the Juvenile Confirmation of Receipt of PREA. As information is provided, the staff reading the information as well as the youth, initial each block of PREA related information. The facility provided a sample of the “Juvenile Confirmations of Receipt of Prison Rape Elimination Act (PREA)”. Each block of information (16 PREA Items/Topics) was initialed by both staff and the youth.

The facility provided multiple examples of youth acknowledgements (Juvenile Confirmation of Receipt of PREA) confirming youth have received the required PREA information. That acknowledgment is comprehensive and requires youth to receive and acknowledge receiving information on the following: 1) Zero Tolerance 2) Sexual assault can happen to males and females. 3) Sexual abuse can occur physically or verbally. 4) Physical sexual abuse occurs when a person physically touches or tried to touch another person’s private part, either on top or under the clothes 5) Verbal sexual abuse occurs when a person verbally threatens to touch the private parts of another person. 6) Private parts include the penis, vagina, inner thigh, buttocks or breast. 7) Sexual assault can be reported to a friend, a staff member or someone you trust. 8) Sexual assault can be reported by utilizing the grievance box. 9) Sexual assault can also be reported by calling the Alabama DYS Sexual Assault Hotline at 855-332-1594. 10) All persons are expected to immediately report any sexual assault; even if the assault happens to another person. 11) Reporting a sexual assault is a serious allegation. 12) Anyone who sexually assaults another person will face criminal charges. 13) Retaliation against a victim or the person who reported the sexual assault will not be tolerated. 14) All victims and informants will be protected. 15) False reporting of sexual assault will have consequences.

The brochures given to youth are also colorful and “eye catching”. The “What You Should Know” brochure, colorfully designed, informs youth what sexual assault is, what sexual abuse is, how to avoid rape, “tell a staff member and don’t be afraid to say No or Stop It Now, what to do if you are sexually assaulted, facts about sexual assault, and what you should know if you sexually assault another youth. The address and phone number for the Alabama Department of Youth Services is also provided. Yet another pamphlet entitled, “Check in for Your Safety” discusses the mission of the Alabama DYS. This pamphlet reiterates the Department’s Zero Tolerance for any and all abusive behavior. It advises youth that if a youth or staff is abusive DYS will investigate and hold the person accountable. It also includes, things the youth may do to remain safe, How to Report

Abuse, including the number for the DYS Sexual Assault Hotline, What to do if Abuse Happens and What Will Happen If “I” Make a False Report.

The facility also ensures the key information about PREA is continuously and readily available or visible through posters, resident handbooks, and PREA Pamphlets and multiple “eye catching” posters include “Ways to Report”(Sexual Assault Hotline Number Provided), “Help Us Protect You”, “You Have the Right to be Free from Sexual Abuse” (Know the Law and Know Your Rights), “Report Sexual Abuse” (Hotline Number provided), “Speak Out – Be Voice of Courage” (Hotline Number Provided) and “Stop Assault” (Hotline Number Provided).

The facility requires residents who are transferred from one facility to another receive PREA education regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding facility procedures for responding to incidents. The facility has done an excellent job of educating the youth and although youth were not able to articulate information about outside agencies, that information is provided to them in multiple ways and they have the names and addresses of those organizations and are able to access them easily, if needed.

Interviews:

One hundred percent (100%) of the interviewed youth were not just informed about PREA, they were very knowledgeable about PREA, including the Zero Tolerance Policy, their rights to be free of sexual abuse and harassment, their right to be free of retaliation for reporting as well as multiple ways to report, both internally and externally. Youth consistently related they felt safe in this facility and all of them stated they have staff they trusted enough to make a report to. Interviews with youth indicated they have not only received PREA information at this facility, they have also received it at other DYS facilities previously, but more important than just receiving the information these youth knew it. They easily related 6 ways they could report sexual abuse and said they understood they could make reports verbally, in writing, anonymously and through third parties. They also related they could report through the grievance process, the advocate, using the hotline, telling their caseworker and their parents. When asked if their attorneys were able to visit if they had one or if they could access them via phone all youth stated they would be allowed to call their attorneys and that they would be allowed to visit them. All of the interviewed youth also related they were given PREA related information during intake and later in education sessions. They also related they signed PREA Acknowledgments. When asked to tell the auditor what they knew about PREA besides how to report it , youth said things like these: “Zero Tolerance”, “Can’t consent”, “Protect evidence”, “You should say, NO, STOP IT”, “You can get in trouble for making false reports”.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Juvenile Handbook Orientation on Sexual Assault
- ✓ PREA Form 115.333 Juvenile Receipt of PREA
- ✓ PREA Pamphlet 115.333 What You Should Know About Sexual Abuse and Assault
- ✓ PREA Pamphlet 115.333F (Limited Reading Skills)
- ✓ PREA Pamphlet 115.333.1 DYS Youth Safety Guide
- ✓ Power Point Presentation 115.333 PREA Orientation
- ✓ Power Point Presentation 115.333.1 PREA Facts Every Juvenile Should Know
- ✓ Posters and other Visual Aides
- ✓ Professional Leadership Certificate (State of Alabama Department of Education)

Standard 115.334 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific

corrective actions taken by the facility.

Summary:

Alabama Department of Youth Services Policy and Procedures, 13.8.1, Prison Rape Elimination Act (PREA) Regulatory Guidelines, B. Special Investigations, requires investigators to complete, in addition to the required PREA Training, Specialized Training that includes the following: 1) Conducting sexual abuse investigations in confinement settings 2) Proper use of the Miranda and Garrity Warnings 3) Sexual abuse evidence collection in confinement settings and 4) The criteria for substantiating a case for administrative action or prosecution referral. Documentation was provided to document receipt of specialized training. Policy also requires that when outside agencies conduct the investigations the agency is required to inform the law enforcement agency of the training requirements under PREA for conducting an investigation in a corrections setting. The facility has a MOU between the Autauga Campus and the Autauga County Sheriff's Office. According to the MOU, it is agreed and understood that the Sheriff's Office will provide investigative services to resident and staff of the Autauga Campus pursuant to standard 115.321 (Evidence Protocol and Forensic Medical Examinations), 115.334 (Special Training:Investigations) and 115.371 (Criminal and Administrative Agency Investigations). These services include responsibility for investigating allegations of sexual abuse by qualified staff screened for appropriateness to serve in the role and who have received training concerning sexual assault and forensic examination issues in general. The MOU requires the investigators are trained and appropriately qualified.

Additionally, the investigators signed acknowledgments of understanding PREA related requirements and items enumerated on the Special Investigators Receipt of PREA forms. These forms identify 20 PREA related items/topics including the following: conducting sexual abuse investigations in confinement settings, techniques for interviewing juvenile sexual abuse victims, evidence collection in juvenile confinement settings, criteria to substantiate a case for administrative action or prosecution and proper use of Miranda and Garrity Warnings. By signature, the DYS Special Investigator acknowledges receiving and understanding information on the Prison Rape Elimination Act regarding the 20 enumerated items/topics.

All referrals for allegations of sexual abuse or sexual harassment for criminal investigations are documented. In addition to referrals to the Autauga County Sheriff's Office, they are submitted to the Alabama Department of Youth Services. This standard is rated exceeds because, in addition to agency investigations, the agency went above and beyond to secure a Memorandum of Understanding with the Autauga County Sheriff's Office, identifying what the agency would provide as well as the services provided by the local sheriff's office. Reaching out the local law enforcement ensures that both are on the same "sheet of music" regarding investigating allegations or reports of sexual abuse within the facility. Too, the MOU documents the agency's expectation that investigators are appropriately trained including specialized training.

Interviews:

A previous interview with an agency investigator indicated he was imminently qualified and very knowledgeable of DYS Policy and investigative procedures. He has completed the Specialized Training for investigators investigating allegations within confinement settings provided by the National Institute of Corrections.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Credentials for Criminal Investigators (NIC PREA: Investigating Sexual Abuse in a Confinement Setting)
- ✓ Certificate of Attendance (Specialized Training: Investigating Sexual Abuse in Correctional Setting/Moss Group LLC)
- ✓ Agreement Between Autauga Campus of the Alabama Department of Youth Services and the Autauga Campus
- ✓ PREA Form 115.334 Special Investigator Receipt of PREA
- ✓ Certification of DYS Special Investigators (Administrative)

Standard 115.335 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

The facility has a policy related to the training of medical and mental health practitioners who work regularly with the residents. DYS Policy 12.11 Alabama Licensure Requirements, require appropriate licensure, state and federal, certifications or registration requirements and restrictions apply to personnel who provide health care services to students in the DYS System. Additionally, the DYS PREA Policy, Page 5, Paragraph C, Medical and Mental Health Staff, subparagraph 1, requires that each facility ensure that all full time and part time medical and mental health care practitioners have been trained in the following areas: Detecting and assessing signs of sexual abuse and sexual harassment, preserving evidence, Responding effectively and professionally to juvenile victims and reporting. Subparagraph 3 requires the facility to maintain documentation that medical and mental health practitioners have received required training using PREA Form 115.335, Medical and Mental Health Care Staff Receipt of PREA Specialized Training. The facility provided certificates of specialized training confirming staff received the required training through the National Institute of Corrections. The Pre-Audit Questionnaire documented 100 percent of the medical and mental health staff have completed the required specialized training.

The medical staff at the facility do not conduct forensic medical exams.

The facility also provided additional documentation, a Contract with the Lighthouse – Standing Together Against Rape (STAR), a 24- hour crisis intervention service for victims of sexual assault. This facility, centrally located in Montgomery, Alabama, continues to exist as the sole provider of forensic exams for alleged sexual assault victims. The director of the STAR program confirmed in the contract that the Sexual Assault Nurse Examiners have received specific training that follows the International Association of Forensic Nurses guidelines. Contracts for the year 2014-2015, 2015 thru 2016 and 2016 through 2017 were reviewed and contained documentation of the availability of trained and qualified nurse examiners.

Interviews:

Interviews with medical and mental health staff indicated they have received the specialized training required by the PREA Standards. The interviewed medical staff related that all of the Autauga Campus Medical Staff, including full time, contract and part time staff have received the NIC Specialized Training for Health Care Providers in Confinement Settings. An interview with the Program Director for the Lighthouse (STARS) indicated that her staff are qualified and have completed the training that follows the International Association of Forensic Nurses Guidelines.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Alabama Board of Nursing Certification/Licenses
- ✓ PREA Form 115.335 Medical and Mental Health Receipt of PREA
- ✓ PREA Form 115.335.1 DYS Contract Medical and Mental Health Receipt of PREA
- ✓ Rape Crisis Center/Child Advocacy Center Memorandum of Understanding (Lighthouse Counseling Center, Inc.) Date September 12, 2014
- ✓ MOU with STAR 24-hour Crisis Intervention/ Sexual Assault Nurse Examiners (SANEs) dated August 1, 2014
- ✓ Contract Review Report between Alabama Department of Youth Services and Lighthouse Counsel Center, Inc. (August 2014)
- ✓ Discharge Notes
- ✓ NIC PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting (Certificate)
- ✓ There were no forensic examinations done during audit cycle.

Standard 115.341 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

DYS Policy 13.8.1, Section IV, Screening Sexual Assault and/or Sexual Victimization, subparagraph A, requires that all juveniles shall be screened within 24 hours of admission to a Facility or transfer to another Facility for risk of Sexual Abuse and Sexual Victimization or Sexual Abusiveness toward other Juveniles. The Agency PREA Form 115.341, Intake Screening for Assaultive Behavior, Sexually Aggressive Behavior and Risk for Sexual Victimization is administered to identify potential vulnerabilities or tendencies of acting out with sexually aggressive behavior. Housing assignments are made accordingly. A case manager is required to conduct this interview at intake to ascertain information about a Juvenile's personal history and behavior to reduce the risk of Sexual Abuse by or upon a Juvenile. At a minimum, facilities are required to attempt to ascertain information about: Prior Sexual Victimization or abusiveness; any gender nonconforming appearance or mannerisms, or self-identification as lesbian, gay, bisexual, transgender, or intersex, and whether the Juvenile may, therefore, be vulnerable to Sexual Abuse; current charges and offense history; age; Level of emotional and cognitive development; physical size and stature; mental illness or mental disabilities; Intellectual or developmental disabilities; physical disabilities; the Juvenile's own perception of vulnerability; and; any other specific information about individual Juveniles that may indicate a heightened need for supervision, additional safety precautions, or separation from certain other Juveniles.

The facility uses Alabama Department of Youth Services Screening for Assaultive Behavior, Sexual Aggressive Behavior and Risk for Sexual Victimization. The reviewed instrument addresses all requirements of this standard.

The policy also requires that the resident's risk level be reassessed periodically throughout the resident's confinement. Risk reassessments are documented using the PREA Risk Reassessment form. The facility uses an objective screening instrument provided by the Alabama Department of Youth Services.

Sampled Screening for Assaultive Behavior and Sexually Aggressive Behavior and for Sexual Assault instruments were provided and reviewed. The reviewed sampled documents contained all of the information required by the standards. Examples of reassessments were also provided and reviewed. This facility is a "28 day" program therefore reassessment rarely occurs but would occur if a significant event occurred or if the resident was at the facility for longer than 28 days.

The agency Guidelines for PREA Shared Information requires that any sensitive information ascertained through conversations with a student (s) involved in a sexual assault is used only for program purposes and will not be exploited or casually discussed among staff or students and failure to comply will result in progressive discipline.

Interviews:

Interviews with the intake staff and staff responsible for performing screening for risk of victimization and abusiveness indicated staff are complying with DYS Policy and that they are aware of the importance of securing vital information during this process to ensure the youth's safety. Staff reported that the risk screening takes place within 24 hours and usually within a short time after arrival. They indicated that they would consider information from a variety of sources including information that comes to the facility with the resident, social histories, transfer documentation, information that is accessible via the departmental data base system, information secured from the resident, mental health or medical screenings if available, and observation. Youth identified as either a high risk for being an aggressor or a victim would result in the youth being placed in a single bedroom and in a room close to the staff desk.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.341 Intake Screening for Assaultive Sexual Aggressive Behavior and Risk for Sexual Victimization
- ✓ Medical Intake-Physical Exam Documentation
- ✓ Intake – Screening/Immunizations/Lab Results
- ✓ Intake – Screening History & Observations
- ✓ PREA Risk Reassessment
- ✓ PREA Form 115.341.1 PREA Risk Reassessment

- ✓ PREA Form 115.341.2 Guidelines for PREA Shared Information

Standard 115.342 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

After conducting the screening, the facility uses this information to inform housing, bed, work, education, and program assignments with the goal of keeping all residents safe and free from sexual abuse. An individualized determination is made about how to ensure the safety of each juvenile. Alabama Department of Youth Services Policy and Procedures require residents at risk of sexual victimization be placed in isolation only as a last resort if less restrictive measures are inadequate to keep them and other residents safe, and only until an alternative means of keeping all residents safe can be arranged.

The Pre-Audit Questionnaire and interviews with staff and youth indicated that the facility has not had any residents at risk of sexual victimization who were placed in isolation during the past 12 months.

Alabama Department of Youth Services Policy prohibits placing lesbian, gay, bisexual, transgender, or intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status. The policy prohibits considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator of likelihood of being sexually abusive. Housing and program assignments for transgender or intersex residents are based on a cases-by-case basis. Alabama Policy and Procedures require that if a resident at risk of sexual victimization is held in isolation, the resident is afforded a review every 30 days to determine whether there is a continuing need for separation from the general population.

Interviews:

Interviews with randomly selected staff, the PREA Coordinator, PREA Compliance Manager and the Facility Director confirmed that they have not used isolation to protect any residents at risk for sexual victimization during the past 12 months. They also stated identification or status is not considered as an indicator of the likelihood that the youth will be sexually abusive. Staff performing victimization/aggressor screening indicated the screening information would be used to determine housing and to ensure the youth was not to be placed in line next to an aggressor.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.342 Housing Unit Placement
- ✓ PREA Form 115.342.1 Isolation Activity Log
- ✓ Occurrence of Housing Unit Placement for Transgender or Intersex Juveniles
- ✓ Occurrence of Isolation

Standard 115.351 Resident 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Alabama Department of Youth Services Policy and Procedures requires Autauga Campus to establish procedures allowing for multiple internal ways for residents to report privately to officials regarding sexual abuse and sexual harassment; retaliation by other residents and/or staff for reporting sexual abuse and sexual harassment; and staff neglect or violation of responsibilities that may have contributed to incident. The documentation provided showed six ways for juveniles to report sexual abuse and sexual harassment or retaliation. These are:

1. Verbally
2. To a friend, a staff member or someone you trust
3. Utilizing the Grievance Box
4. Calling the Alabama DYS Sexual Assault Hotline
5. Anonymously
6. Third Parties

Reporting information is delivered to residents during the intake process, through the education process, in the resident handbook, pamphlets, and posters. During the intake/orientation process residents acknowledge on the Juvenile Confirmation of Receipt of Prison Rape Elimination Act they were provided the following information related to reporting: Sexual assault can be reported to a friend, a staff member or someone you trust; sexual assault can also be reported by calling the Alabama DYS Sexual Assault Hotline at 855-332-1594, by utilizing the grievance box and that all persons are expected to immediately report any sexual assault, even if the assault happens to another person. Staff are required to document verbal reports immediately and to complete an incident report by the end of each shift. Multiple posters were observed throughout the facility, all of them creatively produced to draw attention to them. One poster especially has been created with vivid color and consists of a megaphone. Emanating from the megaphone are five ways youth can report. Posters are placed liberally throughout the campus. Youth are not just informed how to report, they are encouraged to report.

The student handbook provides excellent PREA Information to youth including multiple ways to report. These include the following: "Tell a staff member as soon as possible if you or someone you know has been sexually assaulted, has been threatened, or are being asked to do something sexually. You can tell your Case Manager, Advocacy Representative, Psychologist, Chaplain, Campus Administrator, Shift Supervisor, Medical Staff, Dorm Manager, Teacher, or any other staff member". Sexual assault can also be reported by calling the Alabama DYS Sexual Assault Hotline at 855-332-1594. Staff members are instructed to keep the reported information confidential and only discuss it with the appropriate officials that have a need to know in order to perform their duties. Persons who report sexual misconduct will be free from retaliation. You may also report such incidents to their ADAP representative, who does not work for DYS."

An array of posters are prominently displayed throughout the facility. These are creatively displayed and the posters are "eye catching" and informative, ensuring that information about how to report is continuously displayed in view of students and staff. Not only is information on how to report provided through posters, youth are encouraged to report.

Autauga Campus residents are able to report sexual abuse and sexual harassment privately outside the facility by using the Alabama DYS Sexual Assault PREA Hotline Message (1-855-332-1594); ADAP – Alabama Disabilities Advocacy Program (1-800-826-1675). Additionally, the mailing address for the Alabama Disabilities Advocacy Program is provided; P.O. Box 870395, for Tuscaloosa, Alabama 35487-0395.

The state requires that residents detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security. Contact information is provided.

Multiple acknowledgment statements confirmed that youth were provided information on how to report.

Interviews:

All of the interviewed youth confirmed that they have received information through a number of venues instructing them how to report any allegations of sexual abuse, sexual harassment or retaliation. Without exception they stated they can report

verbally, in writing, anonymously and through third parties. Youth related that they would report to staff at the facility. Every interviewed youth knew how to access the hotline and most said, when asked how they could report, mentioned this. Youth were well aware of the grievance process. Youth related they can write their parents twice a week and more if they have their own stamps. They also related they would be allowed to phone or have a visit with their attorney if they requested it. Each interviewed youth related that they had confidence in the advocate who is not a facility staff person. Interviewed staff were also very knowledgeable of the multitude of ways youth and staff can report.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ DYS Form 1.28 DYS Youth Grievance Form
- ✓ Juveniles Report Abuse / Harassment to a Public / Private Entity / Office
- ✓ PREA Form 115.333 Juvenile Receipt of PREA
- ✓ PREA Form 115.351 Alabama Hotline Message
- ✓ Posters: 5 Ways of Reporting
- ✓ Occurrence of Juveniles submitting a Grievance Alleging Sexual Abuse, Sexual Harassment and/or Staff Neglect or Violation of Responsibilities (0) for the past twelve months

Standard 115.352 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Alabama Department of Youth Services Policy and Procedures has an administrative procedure for dealing with resident grievances regarding sexual abuse. The resident is allowed to submit a grievance regarding an allegation of sexual abuse at any time regardless of when the incident is alleged to have occurred.

Alabama Department of Juvenile Services Policy and Procedures, 1.28, Juvenile Grievance Process, provides for youth to file a grievance using DYS Form 1.28, DYS Juvenile Grievance Form. In the event that a resident grievance form is not available, a grievance may be written on any other paper and placed in a locked grievance box. During the tour of the facility, the auditor observed grievance forms available and accessible to youth throughout the facility.

Once a resident completes the grievance, the resident places the form in a locked grievance box. Grievance boxes are placed in common areas where residents have easy accessibility. Any resident grievance filed against a facility administrator/program director can be mailed directly to the Office of the Chief Advocate. Residents place their grievances in an envelope and address the envelope to the Chief Advocate and place it in the grievance box. Reviewed “Juvenile Confirmation of Receipt of PREA” forms confirmed that Item #8 on that form informs the student that sexual assault allegations may be reported utilizing the grievance box.

Retaliation or the threat of retaliation from any DYS or contract employee toward any resident for using the resident grievance process is strictly prohibited. Appropriate disciplinary actions are taken against any employee found to be in violation of the policy.

The Policy also provides for third party grievances and for allowing third parties to assist the youth in filing a grievance. If a resident declines to have third party assistance in filing a grievance alleging sexual abuse, the facility documents the residents’ decision to decline. Policy 1.28 allows parents or legal guardians of a resident to file a grievance alleging sexual

abuse, including appeals, on behalf of resident, regardless of whether or not the resident agrees to have the grievance filed on his behalf.

The facility provided samples of letters to parents. A section on the letter to parents/legal guardians advises them that third parties may assist a student in filing requests for administrative remedies related to allegations of sexual abuse and to file such a request on a student's behalf. However it also informs them that if anyone other than a parent/legal guardian files a request on behalf of a student, the facility may require the alleged victim agree to have it filed on their behalf. Parents may file a grievance regarding allegations of sexual abuse and it will be confidential and not conditioned upon the juvenile agreeing to have the request filed on his/her behalf.

The Pre-Audit Questionnaire, the reviewed "occurrence report" and interviews with staff and youth indicated that there were no grievances alleging sexual abuse that were filed during the audit period nor were there any emergency grievances alleging substantial risk of imminent sexual abuse that were filed during this audit period.

Interviews:

All of the interviewed youth mentioned they could report sexual abuse through the grievance process. They also indicated, in their interviews, that they trusted the DYS Advocate and believed that if they needed to file a grievance alleging sexual abuse the advocate would take it seriously and respond by taking action. None of the interviewed youth reported having ever filed a grievance at the facility. None of the interviewed youth reported they had filed a complaint alleging any form of sexual misconduct or sexual abuse. Youth did not list filing a grievance as a primary way they would report.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Juvenile Grievance and Response Form
- ✓ PREA Form 115.333 Juvenile Receipt of PREA
- ✓ PREA Form 115.354 Third Party Reporting
- ✓ Entrance Letter to Parents
- ✓ Occurrence a Juvenile submitting a grievance regarding an allegation of sexual abuse.
- ✓ Form Memo: Response to Complaint
- ✓ Occurrence of Third-party Reports of Sexual Abuse and Sexual Harassment

Standard 115.353 Resident 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Alabama Department of Youth Services Policy, Prison Rape Elimination Act (PREA) Regulatory Guidelines, XVII, Juvenile Access to Outside Support Services and Legal Representatives, requires that facilities provide juveniles access to outside victim advocates for emotional support services related to sexual abuse by posting mailing addresses and phone numbers, including toll free numbers when available, of local, state or national victim advocacy or Rape Crisis Organizations. The facility enables reasonable communication with these organizations and in as confidential manner as possible. Policy also requires the facility to facilitate contact and communications with the youth's attorneys and/or legal representation and parents/legal guardians.

Alabama Department of Youth Services Policy and Procedures provide residents with access to outside victim advocates for emotional support services related to sexual abuse by doing the following:

- Posting important numbers for residents to know to report sexual abuse:
 - o DYS Sexual Assault 24 Hours Hotline (1-855-332-1594)
 - o Lighthouse Rape Crisis Center 24 Hour Hotline (334-213-1227)
 - o ADAP – Alabama Disabilities Advocacy Program (1-800-826-1675) and mailing address; P.O. Box 870395, Tuscaloosa, Alabama 35487-0395
 - o For residents detained solely for Civil Immigration purposes – Alabama Department of Homeland Security at 1-334-353-3050.

The facility also provided a MOU with STAR/The Lighthouse who agreed to provide access to crisis intervention and advocacy services to provide emotional support. The reviewed agreement indicated The Lighthouse/STAR will be available 24/7 and provide crisis intervention, forensic examinations by SANEs, and access to community advocates for emotional support services.

Youth also have access to the Alabama Disabilities Advocacy Program (ADAP) 24/7 by dialing the posted toll free number.

Youth are able to write two letters a week to their parent(s)/legal guardian(s) at the Facility's expense and as many as they want if they have their own stamps. Youth have access to their DYS Case Managers, to the Agency Advocate who comes to the facility weekly and to their attorney's if needed.

Interviews:

Interviewed youth knew there were outside advocacy organizations for dealing with sexual abuse if they ever needed it. They said the services would probably be counseling. When prompted about the Lighthouse Organization, most youth stated they had seen that information on a poster. They believed the information they provided would be confidential and that no one would be listening to them. Most of the interviewed youth also mentioned ADAP as an outside organization they could contact. Youth were provided information on how to access the Rape Crisis Center for reporting sexual abuse and that the Lighthouse would provide advocates if they needed them.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Memorandum of Agreement with Rape Crisis Center/Child Advocacy Center
- ✓ Posters
- ✓ DYS Form 115.351 Alabama PREA Hotline Message
- ✓ Juvenile Handbook
- ✓ DYS Form 100.8 Informed Juvenile Verification
- ✓ PREA Form 115.333 Juvenile Receipt of PREA
- ✓ Important Numbers for Juveniles to Report Sexual Abuse:
 - o DYS Sexual Assault 24 Hour Hotline – 1-855-332-1594
 - o Lighthouse Rape Crisis Center 24 Hours Hotline – 334-213-1227
 - o ADAP Alabama Disabilities Advocacy Program – 1-800-826-1675
 - o Civil Immigration – 1-334-353-3050
- ✓ Access to Outside Support Services (ADAP)
- ✓ Memo: Student Phone Access to ADAP Representatives (Date April 20, 2011)

Standard 115.354 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

The Alabama Department of Youth Services Policy, Prison Rape Elimination Act (PREA) Regulatory Guidelines, VIII., Reporting an Allegation of Sexual Abuse or Sexual Harassment, E. and F. provide for third party reporting using DYS PREA Form, Reporting for Sexual Abuse or Sexual Harassment. This form is available to third parties on the DYS website. Policy (paragraph F.) requires staff to accept and document all reports of sexual abuse or sexual harassment made verbally, in writing, anonymously and through third parties using DYS Form 812 Critical Incident Report.

The Alabama Department of Youth Services has a great website publication for Third-Party Reporting. The Website states “If you suspect sexual abuse has happened at an ADYS/private contract service provider facility, you have several options for reporting. You may call the ADYS PREA Coordinator at 205-836-6618; or you may call the ADYS Sexual Assault Hotline at 1-855-332-1594. If you prefer, you may call and report to the Sheriff or Police Department in the location where the allegations occurred. You may also report using the **THIRD PARTY REPORTING FOR SEXUAL ABUSE/ASSAULT/ AND HARASSMENT FORM**. Reporters are encouraged to have any information or evidence available for the investigator who will be assigned to handle the case. All reports are taken seriously and investigated as outlined in PREA and ADYS rules and procedures.”

Third Parties can also report to the Sheriff or Police Department or online.

The facility documented on the Occurrence Forms there were no third party reports made during any quarter of 2016. This is also documented on the Pre-Audit Questionnaire and confirmed through interviews with staff.

Interviews:

Interviews with youth confirmed that they are aware of who third parties are. They are also aware that these individuals can report allegations or incidents of sexual abuse or sexual harassment on behalf of the resident. All of the interviewed staff related that they would accept a report from any source, orally or in writing, and would take it seriously regardless of the source. They also said they would verbally report it immediately followed by a written incident report completed prior to the end of the shift. Another indication youth had been trained was evident when the auditor asked if another resident or a friend or family member could report for them the youth stated ,”yes sir, that’d be a third party report”.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.354 Alabama PREA Third Party Reporting Form
- ✓ Agency Website Publication – Report Guidelines
- ✓ Occurrence of Third-Party Reports of Sexual Abuse and Sexual Harassment

Standard 115.361 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific

corrective actions taken by the facility.

Summary:

DYS Policy 13.16, Child Abuse Reporting, requires that all reportable incidents must be reported in accordance with the Code of Alabama, 1975, as amended (Code of Alabama 1975, Section 26-14-3). This policy also requires that employees comply with all other DHS policies regarding reporting incidents (DYS Policy 9.21) and critical incidents (DYS Policy 8.12). DHS Employees are mandated reporters.

Alabama Department of Youth Services Policy requires all staff to report immediately any knowledge, suspicion, or information they receive regarding any incident of sexual abuse or sexual harassment and retaliation against residents or staff that occurred in the facility. Policy also requires that staff report all verbal statements and document them by the end of the shift.

Autauga Campus reported in the DHS Policy 115.361, Staff and Agency Reporting Duties, in the Pre-Audit Questionnaire, and in the facility occurrence reports that there were no reports or allegations of sexual abuse or of a resident who was subject to substantial risk of imminent sexual abuse during the four quarters of 2016. Additionally, the form documented that there were no anonymous or third party reports during the entire reporting period, January 1, 2016 through December 31, 2016.

Interviews:

Interviewed staff, both random and specialized, articulated multiple ways staff could report and how they could report privately. Staff consistently related they would take all allegations seriously regardless of how they received the report. All staff were aware of their status as "mandated reporters". Staff stated they would immediately make a verbal report to their supervisor and complete a written report prior to the shift's end. A number of interviewed staff stated they would begin writing the report immediately to ensure they reported the facts accurately.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ DHS Form 8.12 Critical Incident Report
- ✓ PREA Form 115.331 Staff Receipt of PREA
- ✓ Confirmation of Parent/Attorney/Guardian Notifications
- ✓ PREA Form 115.381 Consent to Treatment
- ✓ PREA Form 115.341.2 Guidelines for PREA Shared Information
- ✓ DHR-FCS 1593 Child Abuse Reporting Form
- ✓ Anonymous Reports
- ✓ PREA Form 115.354 Third Party Reporting
- ✓ Medical Consent Form
- ✓ Occurrence of Mandatory Child Abuse Reporting

Standard 115.362 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

DYS Policy requires that when staff learn that a resident is subject to a substantial risk of imminent sexual abuse, they take PREA Audit Report

immediate action to protect the resident by housing unit reassignment or using a critical incident report for sexual assault. The report is made up the chain of command and staff is prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation and other security and management decisions (Prison Rape Elimination Act Regulatory Guidelines, 13.8.1 V. Agency Protection Duties).

The Pre-Audit Questionnaire indicated there were no youth that the facility determined was subject to substantial risk of imminent sexual abuse. Reviewed occurrence reports documented there were no youth subject to substantial risk of imminent sexual abuse during the past twelve months.

Interviews:

A previous interview with the Agency PREA Coordinator and interviews with the PREA Compliance Manager and the Facility Director, as well as randomly selected and specialized staff, indicated that the report or allegation would be taken seriously. They also related that the youth and alleged potential perpetrator would be separated until the report could be investigated after which the potential perpetrator may be moved to another unit or another facility. If the potential perpetrator was a staff, interviews confirmed that the staff would be placed on administrative leave until an investigation could be completed and if the allegation was substantiated the presumptive action would be termination. Staff stated the youth being threatened with sexual abuse would be moved to another living unit and single room closer to the security station. Residents confirmed the facility does not use isolation for disciplinary reasons or to protect a resident who is at risk of imminent sexual abuse. None of the interviewed youth reported having been at risk of imminent sexual abuse. They also affirmed they have not been the victim of sexual abuse at this facility.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ DYS Form 8.12 Critical Incident Form
- ✓ PREA Form 115.342 Housing Unit Placement Form
- ✓ PREA Form 115.342.1 Isolation Activity Log
- ✓ Occurrence of Risk of Imminent Sexual Abuse: zero from March 1, 2015 thru February 29, 2016.

Standard 115.363 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

DYS Policy requires that upon receiving an allegation that a Juvenile was Sexually Abused while confined at another Facility, the head of the Facility that received the allegation shall notify the head of the Facility or appropriate office of the Facility where the alleged abuse occurred and shall also notify the appropriate investigative Agency, using PREA Form 115.363, Reporting to Other Confinement Facilities. The Agency has developed a comprehensive reporting form to document the notification and to ensure that an investigation is made, if one has not already been completed. Notification is required to be provided and documented as soon as possible, but no later than 72 hours after receiving the allegation. The agency form entitled Reporting to Other Confinement Facilities is used to document reporting to other confinement facilities. This form states, “Upon receiving an allegation that a juvenile was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred and shall also notify the appropriate investigative agency. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.

The Facility administrator that receives such notification shall ensure that the allegation is investigated in accordance with PREA standards. The outcome of the investigation shall be provided to the Facility that initiated the allegation from the Juvenile.

The Pre-Audit Questionnaire indicated that there were no allegations of sexual abuse at another facility that the facility received during the past 12 months. The Alabama DYS Autauga Campus, 115.363 Reporting to Other Confinement Facilities Form, documented that there were no occurrences of a youth alleging sexual abuse at another confinement facility during the four quarters of 2016. Staff confirmed there were no reports from other confinement facilities that a juvenile was abused while at Autauga nor did Autauga receive any allegations from a youth that they were abused while at another facility.

Interviews:

Interviews with the Facility Director and Facility PREA Compliance Manager indicated that there were no allegations made by youth, during the past 12 months, that they had been the victim of sexual abuse at another facility while they were confined there. The interviewed staff were well aware of the requirements for reporting these incidents and were able to articulate them without hesitation.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.363 Reporting to Other Confinement Facilities
- ✓ Occurrence of receiving an allegation that a juvenile was sexually abused while confined at another facility

Standard 115.364 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

First Responder duties and expectations are articulated very clearly multiple times through the following: 1) DYS Policy 13.8.1, Prison Rape Elimination Act, 2) The First Responder Guidelines for Sexual Assault at Department of Youth Services Facilities and 3) First Responder Checklist and 4) The First Responder Flow Chart. Additionally, Item 15 on the Staff Receipt of PREA Acknowledgment Form documents understanding of first responder duties and Item 17, acknowledges that the staff understands the PREA Written Institutional Plan which is an extremely comprehensive plan containing narrative explanations and instructions regarding virtually every facet of the facility’s prevention, detecting, responding and reporting program. The agency has gone to great lengths to demonstrate through clearly written instructions, the expectations for each standard related to all of the PREA Standards, including First Responder Duties.

DYS Policy requires that upon learning of an allegation that a Juvenile was sexually abused, the first staff member to respond to the report shall be required to:

1. Separate the alleged victim and abuser
2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
3. If the abuse is reported within 72 hours and still allows for the collection of physical evidence, ensure that the alleged victim and the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
4. Request that the alleged victim not take any actions that could destroy physical evidence, and then notify his/her

supervisor.

5. Follow PREA Form 115.371, Process for Investigating an Allegation of Sexual Abuse and report up the chain of command as indicated.

The First Responder Guidelines for Sexual Assault at Department of Youth Services Facilities is very comprehensive and very detailed in instructing staff what to do in case of sexual assault. It also provides questions to ask the victim.

First responder duties for non-security staff are the same as security. The Pre-Audit Questionnaire indicated that the facility has not received any allegation that a resident was sexually abused. This standard is rated exceeds because every staff interviewed, including random and specialized staff, without hesitation, identified each step they would take in responding to an allegation or incident of sexual abuse. Their explanations were consistent with the agency policy.

Interviews:

Every staff interviewed, whether security or non-security, quickly and without hesitation, articulated each and every step they would take as first responders. Every one of the interviewed security/direct care staff reported they would simply ask the youth what happened but not ask detailed questions so as not to interfere with any investigation, immediately separate the victim from the aggressor, notify the shift supervisor, secure the scene to protect evidence, advise the victim not to change clothing, shower/wash, drink anything, brush their teeth or use the restroom and get the youth to medical and on to the hospital to get a forensic examination. Not one staff failed to identify each of the steps. Medical staff articulated their response if they were the first person to become aware of an incident of sexual assault.

Documents Reviewed:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.331 Staff Receipt of PREA
- ✓ PREA Form 115.364 First Responder Checklist
- ✓ PREA Form 115.364.1 First Responder Guidelines for Sexual Assault
- ✓ Flow Chart

Standard 115.365 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

DYS has developed multiple documents to communicate the roles of responders, including direct care staff, medical, mental health and administrators. These roles are addressed in the Coordinated Response Flow Chart, the Written Institutional Response Plan and the Guidelines for Sexual Assault at the Department of Youth Services Facilities.

This standard is rated exceeds because of the in-depth and comprehensive plan for approaching and implementing the prevention, detecting, response and reporting program for the facility and agency. Additionally, first responders have a flow chart describing the roles of each player in responding to an allegation or incident of sexual abuse. The First Responder Guidelines for Sexual Assault at Department of Youth Services Facilities is comprehensive and gives staff specific guidelines and even question to ask victims. All of these documents are written with great detail and provide clear instructions for staff.

Interviews:

Interviews with direct care staff, medical and mental health staff, the Rape Crisis Center Staff person, and administrators

indicated that each is knowledgeable of his/her responsibilities in responding to an incident or allegation of sexual assault.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Written Institutional Plan
- ✓ Coordinated Response Flow Chart

Standard 115.366 Preservation of ability to protect residents 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

The Agency PREA Coordinator provided a Memorandum dated April 15, 2016 entitled, 115.366 Preservation of ability to protect juveniles from contact with abusers. The memo stated the Agency or Facility is not involved in collective bargaining. It also states there is nothing that limits the agency’s ability to remove alleged staff sexual abusers from contact with juveniles pending the outcome of an investigation or a determination of whether and to what extent discipline is warranted. Lastly, the memo stated that Alabama is a right to work state and does not have any union employees.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Notification Letter
- ✓ Administrative Leave Letter
- ✓ Occurrence of Notification Letter
- ✓ Memo from the Agency PREA Coordinator re: 115.366 Preservation of Ability to Protect Juveniles from Contact with Abusers

Standard 115.367 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific

corrective actions taken by the facility.

Summary:

DYS Policy 1.29, Special Investigation Unit, established a zero tolerance for retaliation for reporting. DYS 13.8.1, Prison Rape Elimination Act, XV., Protection Against Retaliation, states that any employee or Juvenile of the Department of Youth Services is prohibited from retaliating against other employees or Juveniles for reporting allegations of Sexual Abuse or Sexual Harassment. Employees and/or juveniles who are found to have violated this prohibition shall be subject to disciplinary action. Facilities are required to act promptly to remedy any form of retaliation. The Agency protections from retaliation are to be afforded all Juveniles and staff who report Sexual Abuse or Sexual Harassment and who cooperate with Sexual Abuse or Sexual Harassment investigations. The Campus Administrator designated the PREA Compliance Manager as the staff person charged with monitoring retaliation. The Facility employs multiple protection measures, including housing changes or transfers for Juvenile victims or abusers, removal of alleged staff or Juvenile abusers from contact with victims, and emotional support services for Juveniles or staff that fear retaliation for reporting Sexual Abuse or Sexual Harassment or for cooperating with investigations. The agency uses the form entitled "Protections Against Retaliation" that states: DYS Policy 1.29 protects all juveniles and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other juveniles or staff. The Legal Division Special Investigator or his designee shall designate which staff member is charged with monitoring for retaliation. An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded. Another section documents the protective measures the agency has employed. Items to be considered are listed as well. Status check blocks are to be checked for 13 weeks and if monitoring is needed beyond 90 days that is to be documented on this form. Monitoring, at Autauga Campus continues in 30 day increments until at least 90 days following a report of Sexual Abuse and documented on the PREA Form 115.367 Protections against Retaliation however the facility goes beyond that time frame if the resident or staff needs that. The facility monitors Juvenile disciplinary reports, housing or program changes as well as negative performance reviews or reassignments of staff. In the case of Juveniles, monitoring will include periodic status checks, to determine if resident levels are lost for legitimate causes.

The Pre-Audit Questionnaire indicated that there were no incidents of retaliation that occurred during the audit period. Additionally, this was documented on the DYS Form, 115.367, Agency Protection Against Retaliation. These forms documented that there were no incidents of retaliation during the four quarters of 2016. However, staff articulated the requirements of the policy and the standards.

Interviews:

The facility PREA Compliance Manager serves as the agency retaliation monitor. She related she would immediately make contact with the victim upon learning of an incident or allegation of sexual abuse, sexual harassment or retaliation. It is the expectation of the Agency that the youth would be monitored for at least 90 days or until the youth's release. The PREA Compliance Manager was very knowledgeable of actions to take relative to retaliation. She related that she would initiate contact with the youth and provide measures to protect the youth. She stated that some of those actions would include separating the youth by changing living units, changes the youth's position in line and maybe changes in the youth's classes. She indicated the potential victim would be placed in a room close to the security station until the allegation is investigated and in a single room if the youth needed it. She said she would possibly transfer the offending youth to another facility. If the retaliation involved a staff the staff could be placed on another living unit having no contact with the youth or on administrative leave until the investigation was over. She also related that although there have been no cases of retaliation, she would monitor the youth for 30 days and continue for an additional 30 days up until 90 days and then as long as necessary to protect the youth. Interviewed youth were aware that they have the right to make a report or allegation of sexual abuse or sexual harassment and a right to be free from retaliation for reporting.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.342 Housing Unit Placement Form
- ✓ PREA Form 115.367 Protections Against Retaliation
- ✓ Treatment Notes
- ✓ PREA Form 115.171 Investigative Outcomes
- ✓ Occurrence of Housing Unit Placement based on retaliation zero from March 1, 2015 thru February 29, 2016.
- ✓ Occurrence of Protections against Retaliation zero from March 1, 2015 thru February 29, 2016.

Standard 115.368 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

DYS Policy 13.8.1, Prison Rape Elimination Act (PREA) Policy, provides for juveniles at risk of sexual victimization, or those juveniles alleging sexual assault, to be isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other juveniles safe, and then only until an alternative means of keeping all juveniles safe can be arranged.

The PREA Policy also requires that if a juvenile is held in isolation for protective reasons, a statement documenting the basis for the facility's concerns for the juvenile's safety as well as the reason why alternative means of separation cannot be arranged will be documented and placed in the juvenile's administrative file. Additionally, if a youth is placed in isolation for protection, during any period of isolation, the facility shall not deny the resident daily large-muscle exercise and any legally required educational programming or special education services. A medical or mental health care clinician is also required to conduct daily visits to the isolated resident. Policy requires that juveniles also have access to other programs and work opportunities to the extent possible. If a youth were to be held in isolation beyond thirty (30) days because of being at risk of sexual victimization, a case review to determine whether there is continuing need for separation from the general population. The DYS Autauga Campus "Occurrence of a Housing Unit Placement of a Juvenile" documented that there were no youth placed in isolation for protective care in the four quarters of 2016.

The Autauga Campus does not use isolation for either disciplinary reasons or for protective custody. Youth requiring or requesting protection would be moved to a single occupancy room nearer to the security station.

The Pre-Audit Questionnaire also documented that there were no youth isolated for protective care during the audit period.

Interviews:

Interviews with specialized staff, randomly selected staff, the PREA Compliance Manager and PREA Coordinator confirmed that youth are not placed in protective custody/care as a result of an allegation of sexual abuse. Staff indicated the alleged perpetrator would be moved to another unit or transferred to another facility. Staff indicated the youth would be placed in a room closer to the staff post. Interviewed youth related they had never been placed in isolation for any reason.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.342 Housing Unit Placement Form
- ✓ PREA Form 115.342.1 Isolation Activity Log
- ✓ Occurrence of a Housing Unit Placement of a Juvenile who to have suffered sexual abuse zero from March 1, 2015 thru February 29, 2016.

Standard 115.371 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

DYS Policy 13.8.1 Prison Rape Elimination Act (PREA), describes in detail the processes for ensuring that all allegations of sexual abuse and sexual harassment are investigated. Policy requires that the DYS Special Investigation Unit (SIU) is responsible for investigating all allegations of Sexual Abuse (Assault), Sexual Harassment, or any Sexual Conduct that is alleged in DYS operated facilities and that they will do so following a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. When it appears that allegations of Sexual Abuse and Sexual Harassment are supported by evidence of criminal behavior, the SIU investigators ensure that the allegations are referred for investigation to law enforcement. The Alabama Department of Youth Services (Autauga Campus) has a Memorandum of Agreement with the Autauga County Sheriff's Office that specifies that administrative and criminal investigations will be conducted pursuant to the requirements of PREA Standard 115.371. According to the MOU, the Autauga County Sheriff's Office will provide investigative services to residents and staff of the Autauga Campus of the Alabama Department of Youth Services pursuant to standard 115.321 (Evidence Protocol & Forensic Medical Examinations), standard 115.334 (Special training: Investigations), and standards 115.371 (Criminal and Administrative Agency Investigations) on a 24 hours a day basis. The MOU services provided by the Autauga County Sheriff's Office includes investigating allegations of sexual abuse by qualified staff screened for appropriateness to serve in this role and who have received training concerning sexual assault and forensic examination issues in general. All referrals shall be documented. The responsibilities for conducting investigations is published on the Agency PREA website.

The facility does not terminate investigations solely because the source of the allegation recants the allegation. Any substantiated allegations of conduct that appear to be criminal are referred for prosecution. The facility retains all written reports pertaining to administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the facility plus five years.

DYS provided a flow chart, "Process for Investigating Sexual Assault Allegation (Reported within 73 Hours of Alleged Incident)" that depicts the flow of the investigation process from allegation to reporting the outcome to the juvenile. This chart tracks and documents the flow of the allegations administrative in nature and a separate track for allegations that appear to be criminal.

The Autauga Campus Pre-Audit Questionnaire and occurrence reports as well as interviews with staff indicated that there were no allegations of conduct that appear to be criminal that were referred for prosecution during the audit period.

Interviews:

The DYS Investigator is an experienced and very knowledgeable investigator. In a previous interview the DYS Special Investigator indicated that DYS investigates all allegations of sexual abuse and sexual harassment. He related that the incident reports go to the DYS General Counsel who refers the allegations for investigation. At that point the special investigator begins the investigative process. If the allegation is criminal, the investigation is in tandem with the Autauga County Sheriff's Office Investigators. He stated that the facility has a Memorandum of Understanding with the Sheriff's Office. His description of the investigative process was consistent with DYS Policy 13. 8.1 Prison Rape Elimination Act.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.371 Process for Investigating Sexual Assault Allegation
- ✓ PREA Form 115.371.1 Investigating Outcome
- ✓ Credentials of Investigators

Standard 115.372 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

DYS Policy 13.8.1 Prison Rape Elimination Act (PREA) states that the facility shall not impose a standard higher than a preponderance of the evidence for determining whether allegations of sexual abuse or sexual harassment are substantiated.

Interviews:

A previous interview with an agency special investigator related that the standard for determining whether or not an allegation is substantiated is no higher than a preponderance of the evidence.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)

Standard 115.373 Reporting to residents

- 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

DYS Policy 13.8.1, Prison Rape Elimination Act (PREA) Policy requires that following an investigation into a Juvenile's allegation of Sexual Abuse by a staff member, the investigator/designee will inform the Juvenile as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded; whenever the staff is no longer assigned within the juvenile's living unit; no longer employed in the facility or has been indicted or convicted on a charge of sexual abuse within the facility. Additionally, it requires that juveniles who have been the victim of a Sexual Abuse and Sexual Harassment shall receive notification of determined outcomes documented using PREA Form 115.373, Juvenile Notification of Investigative Outcome. The Juvenile Notification of Investigative Outcome is submitted to the facility PREA compliance manager, who will share the outcome with the juvenile, obtaining his signature as proof of receipt, before the form is placed in the juvenile's administrative file as documentation of the notification.

The facility has not had any allegations of sexual abuse or sexual harassment during the past twelve months. This was documented on the Pre-Audit Questionnaire, on the occurrence reports and through interviews with staff. None of the interviewed youth reported having been sexually abused while in this facility.

If the facility did not conduct the investigation, the facility requests relevant information from the investigative agency in order to inform the resident. All notifications or attempted notifications are documented.

Interviews:

An interview with the PREA Compliance Manager indicated that youth are notified of the results of an investigation. The process described was consistent with the Agency's Policies.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ DYS Policy Number 1.29, Special Investigation Unit
- ✓ DYS Policy Number 13.8.1, Protection from Sexual Abuse and Assault
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.371 Process for Investigating Sexual Assaults
- ✓ PREA Form 115.373 Juvenile Notification of Investigative Outcome

Standard 115.376 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Alabama Department of Youth Service Policy and Procedures require that staff are subject to disciplinary sanctions up to and including termination for violating facility sexual abuse or sexual harassment policies. Termination is the presumptive disciplinary sanction for staff who engaged in sexual abuse. All terminations for violations of facility sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

The Autauga Campus Pre-Audit Questionnaire indicated that there were no staff that were terminated for violating agency sexual abuse or sexual harassment policies during the audit period.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ DYS Policy Number 1.29, Special Investigation Unit
- ✓ DYS Policy Number 13.8.1, Protection from Sexual Abuse and Assault
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Disciplinary Sanctions for Sexual Misconduct

Standard 115.377 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Autauga Campus requires that any contractor or volunteer who engages in sexual abuse is reported to law enforcement agencies and to relevant licensing bodies. The Pre-Audit Questionnaire indicated that there were no contractors or volunteers reported to law enforcement for engaging in sexual abuse of residents. This was confirmed through reviewed occurrence reports as well as interviews with staff.

Interviews:

The Facility Director, in an interview, stated that the facility would immediately get the contractor or volunteer off campus and would not allow them to return until the completion of an investigation. She related that she would immediately report the incident as required in policy.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.332 Volunteers and Contractor Receipt of PREA
- ✓ DYS Form 8.12 Critical Incident Report
- ✓ Occurrence of Volunteer Orientation for new Volunteers
- ✓ Occurrence of Violation of Sexual Abuse or Sexual Harassment Policies by a contractor Volunteer

Standard 115.378 Disciplinary sanctions for residents

- 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Autauga Campus complies with the DYS Policy that states residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident on resident sexual abuse. If a disciplinary sanction for resident on resident sexual abuse results in the isolation of a resident, the facility requires that residents in isolation have daily access to large muscle exercise, legally required educational programming, and special education services, and receive daily visits from a medical or mental health care clinician.

The Pre-Audit Questionnaire, submitted for Autauga Campus as well as reviewed occurrence reports indicated that there were no residents placed in isolation as a disciplinary sanction for resident-on-resident sexual abuse. Autauga Campus does not use isolation or segregation as a disciplinary measure for rule violations.

The facility prohibits disciplinary action for a report of sexual abuse allegation made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Interviews:

The Facility Director stated the facility does not use isolation. Sanctions, as a result of a substantiated case of sexual abuse or sexual harassment would most likely involve loss of privileges and additional time at the facility. She indicated that disciplinary action would include referral for prosecution if the allegations were sustained. She indicated too that the facility does not use isolation or disciplinary segregation.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ DYS Form 8.12 Critical Incident Report
- ✓ DYS Form 8.12.1 Critical Incident Initial Debriefing
- ✓ DYS Form 8.12.2 Critical Incident Two Week Follow-up Debriefing Report
- ✓ Student Disciplinary Report
- ✓ Student Disciplinary Hearing Report
- ✓ PREA Form 115.342 Housing Unit Placement Form
- ✓ Crisis Intervention Treatment Notes
- ✓ PREA Form 115.371.1 Investigative Outcome

Standard 115.381 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

The Alabama Department of Youth Services and Autauga Campus requires residents at the facility who have disclosed any prior sexual victimization during a screening pursuant to 115.341 are offered a follow-up meeting with a medical or mental health staff. If the screening indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff ensure that the resident is offered a follow-up meeting with a medical or mental health staff within 14 days of the intake screening. Medical and mental health staff obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting.

Autaga Campus reported, on the Pre-Audit Questionnaire, that 100 per cent of the youth reporting prior victimization were offered a follow-up within 14 days of admission. The facility provided reports in which three youth, at intake, reported prior victimization. Documentation was provided to confirm that these three youth were seen by mental health the same day they disclosed their prior victimization.

Interviews:

Interviewed mental health and medical staff indicated they were aware that youth reporting prior sexual victimization or prior sexual aggression are to be referred for a follow-up meeting with mental health or medical. They related that services would

be offered and these include evaluation, developing a treatment plan, developing a safety plan and offering on-going services. They also were aware that the youth have the right to refuse a follow-up meeting.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ PREA Form 115.341 Intake Screening for Assaultive Behavior, Sexually Aggressive Behavior, and Risk for Sexual Victimization
- ✓ Treatment Notes
- ✓ DYS Form 115.381 Clinical Services Consent to Treatment
- ✓ PREA Form 115.381.1 Mental Health File Access Register
- ✓ PREA Form 115.381 A Release of Information
- ✓ PREA Form 115.331 Staff Receipt of PREA

Standard 115.382 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Department of Youth Services Policy requires that facilities offer medical and mental health evaluations as appropriate to all juveniles who have been victimized by sexual abuse in a juvenile facility. Treatment of alleged victims within 72 hours occurs as follows: On site nursing treatment for sexual abuse victims shall be limited to emergency measures only in order to stabilize the juvenile without interfering with evidence collection. Documentation clearly delineates all actions taken. DYS provider facilities shall, when feasible, contract with Rape Crisis Centers to provide forensic medical exams for victims of sexual assault. A forensic exam will be requested by the assigned investigator/designee. This must occur within 72 hours of the sexual assault and under appropriate security provisions to a designated Rape Crisis Center/hospital that has a MOU with the facility for treatment and gathering of evidence. Exams are provided at no cost to the victim.

Department of Youth Services Policy and Procedures requires Autauga Campus medical and mental health staff to maintain secondary materials documenting times of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis. Autauga Campus resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services.

The facility has a comprehensive approach to responding to emergencies related to sexual abuse. The facility has trained staff to respond to emergencies related to sexual abuse. This is confirmed in the Staff Receipt of PREA which acknowledges staff have been trained in their responsibilities to recognize potential abuse and how to respond to it. The facility has a detailed first responder checklist guiding staff in responding. The written institutional plan addresses emergency medical treatment as well.

Interviews:

Interviews with administrative staff, medical staff and mental health staff confirmed that resident victims of sexual abuse are provided timely and unimpeded access to emergency services. They also indicated that in addition to community based advocacy services, staff have been trained to serve as advocates as well. An interview with a Forensic Nurse Examiner at the

Lighthouse (local stand-alone rape crisis center) confirmed access to emergency medical and mental health services. She indicated that she has eight (8) contract Nurse Examiners and One (1) Full Time Nurse Examiner.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Rape Crisis Center/Child Advocacy Center Memorandum of Agreement
- ✓ PREA Form 115.364 First Responder Checklist
- ✓ PREA Form 115.331 Staff Receipt of PREA
- ✓ PREA Form 115.321 Victim Advocate Receipt of PREA
- ✓ PREA Form 115.382 Patient Consent to Treatment Form
- ✓ Emergency Medical Treatment Notes
- ✓ Crisis Intervention Treatment Notes

Standard 115.383 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Autauga Campus offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse. Victims of sexual abuse, while at the facility, are offered tests for sexually transmitted infection as medically appropriate. The facility attempts to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such history and offers treatment when deemed appropriate.

Reviewed occurrence reports and interviews with staff indicated there have been no allegations of sexual abuse in the past twelve months. None of the interviewed youth reported sexual abuse/assault at this facility.

Interviews:

The Forensic Nurse Examiner related she would provide treatment for any injuries as a result of a sexual assault, a “head to toe” physical and forensic exam and treatment for common sexually transmitted diseases. An advocate will accompany the youth to the center and that may be either the staff trained advocate or the community based advocate. The Forensic Examiner related that the Lighthouse would contact an advocate as well.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Medical Mental Health Records
- ✓ Treatment Notes
- ✓ Test Results
- ✓ Memorandum of Understanding with Rape Crisis/Child Advocacy Center
- ✓ Mental Health Status Evaluation

Standard 115.386 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

The Autauga Campus PREA Compliance Manager conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. Autauga documents the incident reviews on DYS Form 115.386, Sexual Abuse Critical Incident Review. The review ordinarily occurs within 30 days of the conclusion of the investigation. The Team reviews and considers all the requirements listed in standard 115.386.

The sexual abuse incident review team includes upper-level management officials and allows for input from line supervisor, investigators, and medical and mental health staff.

The Autauga Campus Pre-Audit Questionnaire indicated that there were no criminal and/ or administrative investigations of alleged sexual abuse completed at the facility because there were no reports or allegations of sexual abuse during the past twelve months. The facility also reviews incidents that have been found to be unfounded.

The PREA Compliance Manager prepares a report of its findings and makes recommendations for improvement and submits report to facility Director and DYS PREA Coordinator.

Interviews:

The PREA Compliance Manager and the Facility Director described an incident review process consistent with the requirements of the standards and policy.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ DYS Form 8.12 Critical Incident Report
- ✓ DYS Form 8.12.1 Critical Incident Initial Debriefing
- ✓ DYS Form 8.12.2 Critical Incident Two-Week Follow-up Debriefing
- ✓ PREA Form 115386 Sexual Abuse Critical Incident Review

Standard 115.387 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific

corrective actions taken by the facility.

Summary:

Autauga Campus collects accurate, uniform data for every allegation of sexual abuse at the facilities under its direct control using a standardized instrument and set of definitions. The standardized instrument is the State of Alabama Department of Human Resources "Written Report of Suspected Child Abuse/Neglect", and the set of definitions is included in the policy. In addition, the agency uses the DOJ Form SSV-IJ Survey of Sexual Violence Incident Report as their standardized instrument and definitions.

The facility produces a Sexual Abuse annual report using PREA Form 115.387, PREA Data Report. The facility aggregates incident based sexual abuse data at least annually.

Upon request, the facility provides all data from the previous calendar year to the Department of Justice no later than June 30 of each year on the U.S. Justice Department Survey of Sexual Violence Form SSV-5.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ U.S. DOJ Form SSV-IJ Survey of Sexual Violence Reporting, Incident Form (Juvenile)
- ✓ Annual Survey of Sexual Violence
- ✓ Annual Data Review

Standard 115.388 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

The Autauga Campus PREA Compliance Manager and Agency PREA Coordinator reviews data collected and aggregated pursuant to 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training, including problem areas, taking corrective action, and preparing an annual statement of its finding from its data review. The annual reports are approved by the agency. The facility redacts material from an annual report for publication. The redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility.

Interviews:

The Agency PREA Coordinator, in a previous interview, described how incident based sexual abuse data is used to assess and improve sexual abuse prevention, detection, response policies, procedures, practices and training. It is evident that the data being collected is analyzed and utilized to address any identified issues.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campus PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ DYS Form 8.12.1 Critical Incident Initial Debriefing
- ✓ DYS Form 8.12.2 Critical Incident Two Week Follow-up Debriefing

- ✓ Annual Data Review
- ✓ Annual Facility PREA Report
- ✓ Annual DYS PREA Report

Standard 115.389 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)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Summary:

Alabama DYS policy requires that aggregated sexual abuse data is made readily available to the public at least annually through the agency website. The agency facility maintains sexual abuse data collected pursuant to 115.387 for at least 10 years after the date of initial collection, unless Federal, State, or local law requires otherwise.

Interviews:

The Agency PREA Coordinator related that collected data and reports are retained for at least 10 years as required.

Reviewed Documentation to determine compliance:

- ✓ State of Alabama Department of Youth Services Policy and Procedures (Related Standards: PREA 115.311 – 115.501 Chapter 13.0 Juvenile Rights; Subject Protection from Sexual Abuse/Assault)
- ✓ Prison Rape Elimination Act (PREA) Regulatory Guidelines (3-31-2014)
- ✓ Autauga Campu s PREA Audit: PRE-Audit Questionnaire (Juvenile Facilities)
- ✓ Records Retention Schedule

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.

Robert Lanier

March 6, 2017

Auditor Signature

Date