

COMMUNITY CONFINEMENT FACILITIES

NATIONAL
PREA
RESOURCE
CENTER



BJA
Bureau of Justice Assistance
U.S. Department of Justice

Auditor Information			
Auditor name: Walter Sipple			
Address: Post Office Box 2502, Mount Pleasant, South Carolina 29465			
Email: waltersipple@comcast.net			
Telephone number: 843-323-8851			
Date of facility visit: August 3, 2015			
Facility Information			
Facility name: Columba Residential Reentry Center (RRC)			
Facility physical address: 1218 Bull Street, Columbia, South Carolina 29201			
Facility mailing address: Same as above			
Facility telephone number: 803-765-1394			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input checked="" type="checkbox"/> Private not for profit		
Facility type:	<input type="checkbox"/> Community treatment center	<input type="checkbox"/> Community-based confinement facility	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Halfway house	<input type="checkbox"/> Mental health facility	
	<input type="checkbox"/> Alcohol or drug rehabilitation center		
Name of facility's Chief Executive Officer: Saagu Zeleke			
Number of staff assigned to the facility in the last 12 months: 2			
Designed facility capacity: 56			
Current population of facility: 55			
Facility security levels/inmate custody levels: FBOP/USPO Pre-Release Community Corrections Component			
Age range of the population: 18+			
Name of PREA Compliance Manager: Saagu Zeleke		Title:	Facility Director
Email address: saagu@alstonwilkessociety.org		Telephone number:	803-765-1394
Agency Information			
Name of agency: Alston Wilkes Society			
Governing authority or parent agency: Alston Wilkes Society			
Physical address: 3519 Medical Drive, Columbia, South Carolina 29203			
Mailing address: Same as above			
Telephone number: 803-799-2490			
Agency Chief Executive Officer			
Name: S. Anne Walker		Title:	Executive Dir.
Email address: sannewalker@alstonwilkessociety.org		Telephone number:	803-799-2490
Agency-Wide PREA Coordinator			
Name: Meagen Mader		Title:	PREA Coordinator
Email address: mmader@alstonwilkessociety.org		Telephone number:	803-799-2490

AUDIT FINDINGS

NARRATIVE:

The Alston Wilkes Society is a private, not for profit, community correctional organization, headquartered in Columbia, South Carolina. The Alston Wilkes Society operates a community confinement facility, Columbia Residential Reentry Center that was audited as a residential reentry facility. The facility only houses federal Bureau of Prisons residents, male and female, at 1218 Bull Street, in the downtown area of Columbia, South Carolina. The agency and Columbia facility being audited is accredited by the American Correctional Association. The Columbia Residential Reentry Center received its most recent American Correctional Association accreditation on August 12, 2013. The agency maintains an active contractual agreement with the federal Bureau of Prisons and is also inspected by them on a continuous basis.

The Prison Rape Elimination Act audit was performed on August 3, 2015, by Walter Sipple, United States Department of Justice certified auditor, and no others, operating as an independent contractor with no conflict of interest. The agencies policies and procedures somewhat mirror the written language of the Prison Rape Elimination Act standards. Staff and resident interviews were conducted. Outside agencies were interviewed, to include but not limited to, the federal Bureau of Prisons, Just Detention International, Palmetto Baptist Hospital, Palmetto Health Richland Hospital, Eau Claire Behavioral Health Center, Sexual Trauma Services of the Midlands (24 hour rape crisis center), Columbia Police Department, American Correctional Association, State Law Enforcement Division of South Carolina, South Carolina Department of Social Services, and South Carolina Transitions Services. Residents that were released from community-based supervision were also interviewed.

The Alston Wilkes Society's mission statement is as follows, "Rebuilding lives for a safer community". The agency's vision statement, "To provide offenders, former offenders, the homeless, at-risk youth, veterans, and their families the tools they need to become productive citizens". The agency's values statement, "Our primary responsibility is to those we serve. The success of the Alston Wilkes Society is measured by how we meet our responsibilities to clients, volunteers, investors, other agencies, and each other. We operate in the spirit of doing unto others as we would have them do unto us".

An entrance meeting was conducted by the auditor during the on-site visit phase of the audit process. The facility director and agency Prison Rape Elimination Act coordinator attended the meeting and participated in the facility tour which consisted of all areas of the two story facility. The auditor was allowed access to the agency and facility in order to conduct the audit. An objective random sampling of staff, volunteer, resident, and contractor interviews was selected from a series of lists provided to the auditor by the facility. Last names were randomly selected from an alphabetically ordered list. A total of six (6) residents were interviewed per random sampling from the auditor, along with special category

residents and selected resident sampling identified during the intake screening process. A total of eight (8) agency and facility staff were interviewed per random sampling from the auditor along with position held within the organizational chart. A map of the facility was provided by staff which also consisted on the resident living quarters. The auditor contact information was posted throughout the facility 6 weeks prior to the on-site visit phase of the audit process.

An exit interview was conducted by the auditor at the end of the on-site portion of the audit with the facility director and agency Prison Rape Elimination Act coordinator. The agency and facility staff were very helpful throughout the audit process and actively engaged in the pursuit of facility compliance with all of the Prison Rape Elimination Act standards. The director of the facility was experienced and very engaged in the daily operations of the reentry center.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Columbia Residential Reentry Center is a two story building located in the downtown area at 1218 Bull Street, in Columbia, South Carolina. The building was constructed in 1939 as a form of boarding house. In 1985, the Alston Wilkes Society obtained the property and converted the building into a residential reentry center. The building is not fenced and surrounded by parking lots and various businesses. The main entry and exit door to the building is controlled by a staff post positioned near the front door. Cameras are positioned within the interior common areas and exterior doors of the building. The facility is under the authority of the Alston Wilkes Society, which is a private, not for profit, community-based correctional facility. The facility only houses adult, over 18 years of age, male and female residents from the federal Bureau of Prisons in accordance with a reentry contractual agreement between the two agencies. The facility capacity is 56 along with an unlimited number on home detention. The residents are assigned to various rooms, three and four residents to a room, with adjoining restroom and showers. A separate female only room with restroom and shower is located at the front of the building in front of the staff post. The facility has three common use areas utilized for meals, programs, recreation, laundry, and visitation. During the past 12 month period, 244 residents were housed at the facility with an average length of stay of 3 months. The facility has a total of 21 staff assigned with at least two staff members, one male and one female, on watch duty 24 hours a day.

The Columbia Residential Reentry Facility offers residents a variety of services such as twenty-four hours per day room and board, twenty-four hours per day on-site supervision, individual case management, discharge and aftercare planning, individual and group intervention and supportive counseling, employment assistance, encouragement to pursue academic advancement and technical training, recreation and leisure time activities, referral services for family support and counseling, substance abuse monitoring education and counseling, and referral to and coordination with other community resources. During the on-site phase of the Prison Rape Elimination Act audit, the auditor observed that the overwhelming majority of residents actively work outside of the facility. The facility is close to public transportation and numerous employment opportunities throughout the area.

SUMMARY OF AUDIT FINDINGS:

The Alston Wilkes Society Columbia Residential Reentry Facility is accredited by the American Correctional Association. The auditor conducted a facility site visit on August 3, 2015. During the past 12 months, the facility had no allegations of sexual misconduct. The auditor was impressed with the agency and facility staff along with the primary and secondary documentation provided by the agency and facility to confirm compliance with the standards. The auditor noted the high number of residents gainfully employed and engaged with the reentry and transition process. The auditor complimented the facility director on the resident employment placement successes. The resident interviews confirmed the reentry focus of the facility. The facility has an outstanding location in downtown Columbia which offers the residents various opportunities with reentry support and services. Based on the auditor's individualized review of agency policies, procedures, practice, staff interviews, resident interviews, released resident interviews, and feedback from outside agencies, the facility is in compliance with 100%, or all 38, Prison Rape Elimination Act standards with one standard being not applicable.

Number of standards exceeded: 0.

Number of standards met: 38.

Number of standards not met: 0.

Number of standards not applicable: 1.

PREA Standard 115.211: Zero tolerance of sexual abuse and sexual harassment.

- 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 comments: The agency has a written policy (S348) and procedure mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct. The agency has one upper-level, agency-wide Prison Rape Elimination Act coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the Prison Rape Elimination Act standards in all of its facilities. The facility being audited has one Prison Rape Elimination Act compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the Prison Rape Elimination Act standards. Based on interviews with both the Prison Rape Elimination Act coordinator and compliance manager, they have the knowledge, background, authority, and time to perform their duties. Both are on the agency and facility organizational chart.

Based on a review of Alston Wilkes Society policy S348, procedures, and practice to include staff, resident, and outside agency interviews, the agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period. The auditor was impressed with the agency Prison Rape Elimination Act coordinator's expertise throughout the audit process.

PREA Standard 115.212: 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 comments: The Alston Wilkes Society Columbia facility houses only federal residents as a result of a contractual agreement with the federal Bureau of Prisons for federal resident reentry services. The residents are under the authority of the United States Bureau of Prisons and any form of resident transfer or other confinement is in coordination and direction of the federal Bureau of Prisons and to a certain extent the United States Probation Office. The Alston Wilkes Society does not contract with other entities for the confinement of residents.

PREA Standard 115.213: 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 comments: The auditor received written secondary confirmation of a staffing plan review that occurred on July 28, 2015. The Alston Wilkes Society Columbia Residential Reentry Center staffing plan takes the follow into consideration:

- 1) The physical layout of each facility;
- 2) The composition of the resident population;
- 3) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- 4) Any other relevant facts.

In circumstance where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan. Whenever necessary, but no less frequently than once each year, the facility shall assess, determine, and document whether adjustments are needed to:

- 1) The staffing plan established pursuant to the standard;
- 2) Prevailing staffing patterns;
- 3) The facility's deployment of video monitoring systems and other monitoring technologies; and
- 4) The resources the facility has available to commit to ensure adequate staffing levels.

The auditor reviewed Alston Wilkes Society policy S348 and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.215: 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 comments: The facility has a rated capacity under fifty-six residents and does not conduct cross-

gender strip searches or cross-gender visual body cavity searches. The facility reported no cross-gender strip or pat-down searches during the past 12 months.

The facility enables residents to shower, perform bodily functions, and change clothing without nonmedical 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. Such policies and procedures require staff of the opposite gender to announce their presence when entering a resident living quarters.

The facility does not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident's genital status. If the resident's genital status is unknown, it is determined during conversations with the resident, by reviewing medical records and Bureau of Prisons documentation, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

The agency and facility trains security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex residents, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

practices; reviewed data provided by The auditor reviewed Alston Wilkes Society policy H1402 and procedures; observed agency and facility the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.216: 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 comments: The Executive Director submitted a memorandum referencing the nature of a service, program, or activity, or an undue financial and administrative burden, as those terms are used in regulations promulgated under title II of the American With Disabilities Act, 28 Congressional Federal Record 35.164. The agency does have a verified contract with an outside organization called Palmetto Interpreters to service any and all residents who are limited English proficient.

Based on random resident and staff interviews conducted during the on-site portion of the audit, the agency and facility takes reasonable steps to ensure meaningful access to all aspects of the agency's

efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. The auditor noted that the facility infrastructure accommodates residents with disabilities.

The agency does not rely on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety. The agency and facility (policy H1301) is in compliance with the Prison Rape Elimination Act standard.

PREA Standard 115.217: 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 comments: Based on a review of agency policy (S301), procedures, and practice along with staff and resident interviews, the agency does not hire or promote anyone who may have contact with residents, and does not enlist the services of any contractor who may have contact with residents, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in the activity described.

The agency considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents. The agency performs a criminal background records check in coordination with the federal Bureau of Prisons before enlisting the services of any contractor who may have contact with residents. A process is in place for criminal background checks at least every five years for current employees and contractors who may have contact with residents.

The auditor reviewed Alston Wilkes Society policy S301 and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.218: 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 comments: When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency considers how such technology may enhance the agency's ability to protect residents from sexual abuse. The auditor noted that the facility changed and updated video monitoring systems recently due to changes to the use and resident access to certain rooms within the facility.

The auditor reviewed Alston Wilkes Society policy and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.221: 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 comments: Based on a review of policy (H809), procedure, and practice along with staff and resident interviews, to the extent the agency is responsible for investigating allegations of sexual abuse, the agency follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The agency does not conduct criminal investigations. The agency only performs administrative investigations that involve any form of staff on resident sexual misconduct. Any investigation will require consultation with the federal Bureau of Prisons per agreed upon contract. The federal Bureau of Prisons has ultimate authority over all of the federal residents at the facility. The facility only houses federal residents at the Columbia facility from the federal Bureau of Prisons.

The agency offers all victims of sexual abuse access to forensic medical examinations, at an outside facility, without financial cost, where evidentiary or medical appropriate in accordance with the standard. Such examinations shall be performed by Sexual Assault Forensic Examiners or Sexual Assault

Nurse Examiners. The Palmetto Hospital of South Carolina located in Columbia, South Carolina, conducts forensic examinations. The local rape crisis center called Sexual Trauma Services of the Midlands makes available to the victim a victim advocate from the rape crisis center that accompanies the resident and supports the victim throughout the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. The auditor was impressed with the high level quality of service offered by the rape crisis center and emergency forensic medical examination service.

The auditor reviewed Alston Wilkes Society policy H809 and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.222: 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 comments: The agency (S348 and S392) and facility ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. The agency has a policy that ensures allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The agency shall publish such policy on its website, or if it does not have one, make the policy available through other means. The agency documents all such referrals.

The agency and facility reported no reported cases during the past twelve months along with any referrals of allegations of sexual abuse and sexual harassment. The auditor reviewed Alston Wilkes Society policy S348 and S392, and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.231: 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 comments: The agency trains all employees who have contact with residents on:

- 1) Its zero-tolerance policy for sexual abuse and sexual harassment;
- 2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment; prevention, detection, reporting, and response policies and procedures;
- 3) Resident's right to be free from sexual abuse and sexual harassment;
- 4) The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- 5) The dynamics of sexual abuse and sexual harassment in confinement;
- 6) The common reactions of sexual abuse and sexual harassment victims;
- 7) How to detect and respond to signs of threatened and actual sexual abuse;
- 8) How to avoid inappropriate relationships with residents;
- 9) How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents; and
- 10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The auditor reviewed training records, PowerPoint presentations, staff acknowledgement sheets for compliance with standard and documentation of staff signatures signifying training. The training is tailored to both genders of residents at the employee's facility. The agency Prison Rape Elimination Act coordinator provided the auditor with staff refresher training and up-to-date new staff hires training confirmation. The agency provides a variety of different training formats.

The auditor reviewed Alston Wilkes Society policy and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.232: 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 comments: The agency (policy H1502) ensures all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual

harassment prevention, detection, and response policies and procedures.

The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with residents, but all volunteers and contractors who have contact with residents are notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

The auditor interviewed volunteers and reviewed training records for volunteers and contractors who have contact with residents along with signed acknowledgement forms. The auditor was impressed with the agency's volunteer handbook that is very comprehensive. The agency created Prison Rape Elimination Act related educational training brochures that are very user friendly.

The auditor reviewed Alston Wilkes Society policy H1502 and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.233: 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 comments: Residents receive individualized one-on-one orientation counseling and intake within 24 to 48 hours of arrival due to the small size of the facility. The auditor interviewed one of the facility case manager staff who conducts the intake process along with residents. During the intake process, residents receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

The agency provides a comprehensive education to residents either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.

The auditor reviewed resident signatures on intake and orientation process check lists originated from agency for the past twelve months. The agency has varied methods of education material such as posters and brochures with relevant Prison Rape Elimination Act information. The individualized one-on-

one case management format is accessible to residents who are limited English proficient, deaf, visually impaired, otherwise disabled, as well as to residents who have limited reading skills. The auditor also noted that the majority of residents interviewed received comprehensive Prison Rape Elimination Act training while confined at the federal Bureau of Prisons prior to transfer to the Alston Wilkes Society.

The auditor reviewed Alston Wilkes Society policy H1202 and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.234: 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 comments: The agency does not conduct criminal investigations or administrative investigations involving residents. The agency does conduct administrative investigations concerning agency staff sexual misconduct. The agency human resources director conducts administrative investigations involving staff.

Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. The federal Bureau of Prisons has investigators and referral investigators that have the specialized training in accordance with the Prison Rape Elimination Act standard and the agency coordinates all investigations with them.

The auditor reviewed Alston Wilkes Society policy and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies (Columbia Police Department has criminal investigation jurisdiction if needed); and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.235: Specialized training: Medical and mental health care.

- Exceeds Standard (substantially exceeds requirement of standard)
- Meet Standard (substantial compliance; complies in all material ways with the standard for the

relevant review period)

- Does Not Meet Standard (requires corrective action)

Auditor comments: The agency does not employ any medical or mental health staff. The agency coordinates with Palmetto Hospital, Richland Hospital, Sexual Assault Services, Eau Claire Behavioral Health Center, Transitions Services, and the South Carolina Department of Social Services, for emergency medical care as well as forensic examination services. The federal Bureau of Prisons has a separate contractual agreement for mental health care in Columbia, South Carolina, that is available to all of the facility's residents.

These organization medical and mental health care practitioners have been trained in:

- 1) How to detect and assess signs of sexual abuse and sexual harassment;
- 2) How to preserve physical evidence of sexual abuse;
- 3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment;
and
- 4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

The auditor reviewed Alston Wilkes Society policy H1202 and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.241: 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 comments: Based on interviews with the facility's intake staff and random residents, all residents are assessed during the intake screening and upon transfer to the facility for their risk of being sexually abused by other residents or sexually abusive toward other residents. Intake screening shall ordinarily take place within 72 hours of arrival and more often is completed within 24 to 48 hours of arrival due to the small size of the facility. Such assessments shall be conducted using an objective screening instrument.

The intake screening shall consider, at a minimum, the following criteria to assess residents for risk of sexual victimization:

- 1) Whether the resident has a mental, physical, or developmental disability;
- 2) The age of the resident;
- 3) The physical build of the resident;
- 4) Whether the resident has previously been incarcerated;
- 5) Whether the resident's criminal history is exclusively nonviolent;
- 6) Whether the resident has prior convictions for sex offenses against an adult or child;
- 7) Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- 8) Whether the resident has previously experienced sexual victimization; and
- 9) The resident's own perception of vulnerability.

The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing residents for risk of being sexually abusive. A resident's risk level is reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness. The residents are not to be disciplined for refusing to answer, or for not disclosing complete information in response to questions asked.

The agency implements appropriate controls on the dissemination within the agency of responses to questions asked pursuant to this standard or order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents. Only limited staff has access to the risk screening form such as medical, mental health, executive director, facility director, as well as the Prison Rape Elimination Act coordinator.

The auditor reviewed resident intake records for those admitted with the past twelve months who have been screened with the first seventy-two hours of arrival. Initial assessments and well as reassessments for risk of sexual victimization or abusiveness were reviewed. The agency Prison Rape Elimination Act coordinator provided the auditor with confirmed documentation of the screening forms and process.

The auditor reviewed Alston Wilkes Society policy H1202 and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.242: 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 comments: The agency shall use information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive. The agency shall make individualized determinations about how to ensure the safety of each resident. In deciding whether to assign a transgender or intersex resident to a room for male or female residents, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether the placement would present management or security problems. A transgender or intersex resident's own views with respect to his or her own safety shall be given serious consideration. Transgender and intersex residents shall be given the opportunity to shower separately from other residents. The facility has single use showers attached to each resident room.

The Alston Wilkes Society coordinates all placements within the residential center with the federal Bureau of Prisons per the contractual agreement between the two agencies. The agency has the capabilities to house residents identified to be lesbian, gay, bisexual, transgender, or intersex for compliance with the standard.

The auditor reviewed Alston Wilkes Society policy H1202 and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.251: 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 comments: The agency has multiple internal ways for residents to privately report per the Prison Rape Elimination Act standard. The Prison Rape Elimination Act Coordinator created a reporting form directly on the agency website that is available to all of the residents, staff, third parties, and the general public. The auditor interviewed the local rape crisis center in Columbia called Sexual Trauma Services of the Midlands. They were familiar with the Prison Rape Elimination Act, received training specific to the Prison Rape Elimination Act, and responsive to receiving potential calls from any residents assigned to the facility. The auditor was impressed with the scope of services offered by the Sexual Trauma Services of the Midlands.

Agency and facility staff accepts reports made in various formats such as verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. The agency provides a method for staff to privately report sexual abuse and sexual harassment of residents. The auditor was impressed that the facility director was receptive to maintaining an anonymous box available to all residents, staff, and visitors that only he has access to.

The auditor reviewed Alston Wilkes Society policy and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.252: 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)
- Not Applicable

Auditor comments: All of the agencies residents are federal resident transfers from the federal Bureau of Prisons in accordance with contractual agreements between the two agencies. The federal Bureau of Prisons maintains ultimate authority over all of the residents at the Columbia facility. Any form of administrative procedure for dealing with resident grievances regarding sexual abuse will be coordinated with the federal Bureau of Prisons.

The auditor reviewed the contractual agreement with the federal Bureau of Prisons and interviewed residents in reference to their understanding of administrative remedies. The agency does not impose a time limit on when a resident may submit a grievance regarding an allegation of sexual to their liaison officer with the federal Bureau of Prisons. The agency does not require a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. The agency ensures that a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint. A third party report on behalf of any resident is permitted. The auditor confirmed no third party reports received within the past twelve months with the agency Prison Rape Elimination Act coordinator and local outside agency rape crisis center Sexual Trauma Services of the Midlands. The agency will respond to any form of emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse.

Per the Prison Rape Elimination Act standard, if the standard does not apply to the agency that does not

mean non-compliance. This standard is not applicable to the Alston Wilkes Society or Columbia Residential Reentry Center.

PREA Standard 115.253: 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 comments: The residents have access to outside the agency rape crisis center and the South Carolina Department of Social Services which is located in Columbia, South Carolina. The auditor tested the resident telephone access for outside confidential support service during the on-site portion of the audit. The rape crisis center and South Carolina Department of Social Services offers victim advocacy services at no cost to the residents or agency. The auditor was very impressed with the quality of care and scope of services offered by the local rape crisis center. The agency has posters and brochures with contact information available to all residents, staff, and public. The resident telephone calls are not monitored.

The auditor was impressed with the agency Prison Rape Elimination Act coordinator’s posters, website access, resident guide, and brochures. The auditor reviewed Alston Wilkes Society policy H809 and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.254: 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 comments: The agency has a method to receive third-party reports of sexual abuse and sexual harassment through its website reporting process and local rape crisis center. The agency shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of a resident. The agency has posters and brochures throughout the facility that are also available to anyone and explain third-party reporting options and processes.

The auditor reviewed Alston Wilkes Society policy and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.261: 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 comments: Based on agency policy (H809 and S348), procedures, and interviews with case managers, intake staff, facility director, Prison Rape Elimination Act coordinator, random residents and released residents the Columbia facility is in compliance with the Prison Rape Elimination Act standard. The agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred at the facility, whether or not it is part of the agency; retaliation against residents or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. The agency reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the federal Bureau of Prisons.

Apart from reporting to designated personnel, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in the agency policy, to make treatment, investigation, and other security and management decisions (agency policy H809 and S348). Based on agency staff and resident interviews, the agency is in compliance with the South Carolina vulnerable adult statute, South Carolina Code of Laws 43-35-25 (2012), in that staff will report allegations to the designated State agency under applicable mandatory reporting laws.

PREA Standard 115.262: 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 comments: Based on a review of agency policy and procedures along with agency staff and resident interviews during the on-site portion of the audit, once the agency staff learns that a resident is

subject to a substantial risk of imminent sexual abuse, they will take immediate action to protect the resident. Follow-up coordination will occur between the agency and the federal Bureau of Prisons to further ensure the resident's safety and security.

The auditor observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.263: 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 comments: Based on a review of agency policy (H809) and procedures along with agency staff interviews the facility director will notify and take action as soon as possible, but no later than seventy-two hours after receiving an allegation that a resident was sexually abused while confined at another facility. The agency documents such notification and informs the head of the facility and head of the agency where the alleged abuse occurred. Based on staff and resident interviews, the facility director and executive director have not had any allegations of abuse at another facility within the past twelve month period. The agency will document that it has provided such notification and ensure that the allegation is investigated in accordance with the Prison Rape Elimination Act standard.

The auditor observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.264: 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 comments: Based on agency policy (H809) and procedures along with agency staff and resident

interviews during the on-site portion of the audit, upon learning of an allegation that a resident was sexually abused, the first staff member to respond to the report shall: separate the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and if the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that 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.

If the first responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. The agency and facility is in compliance with the Prison Rape Elimination Act standard.

The observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.265: 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 comments: Based on agency policy (H809) and procedures along with the agency staff and resident interviews during the on-site portion of the audit, the Columbia facility has a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, contract agencies, facility leadership, and agency executive leadership. The agency is in compliance with the Prison Rape Elimination Act standard.

The auditor observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.266: 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 comments: Based on agency policy and procedures along with interviews with agency staff and residents, the agency is not bound by any form of collective bargaining in order to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The State of South Carolina is considered a right to work state. The auditor specifically reviewed personnel actions taken by the agency.

The auditor observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.267: 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 comments: Based on agency policy (H809) and procedure along with agency staff and resident interviews, the agency protects all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The Columbia facility director is appointed as the retaliation monitor.

The agency has multiple protection measures, such as transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

For at least 90 days following a report of sexual abuse, the Columbia facility director monitors the conduct and treatment of residents or staff who reported the sexual abuse and of residents who were

reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff, and shall act promptly to remedy any such retaliation. For example, the Columbia facility director will monitor any resident disciplinary actions, program changes, or negative reviews or reassignment recommendations from staff. The director continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need. If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.

The auditor observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.271: 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 comments: Based on agency policy (S392) and procedures along with agency staff and residents, when the agency conducts its own administrative investigations on staff of sexual abuse and sexual harassment, it does so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. The agency and facility reported no allegations that appeared to be criminal.

Criminal investigations are handled by local law enforcement, Columbia Police Department, and representatives from the federal Bureau of Prisons or other designated federal investigators. The agency has a contract agreement with the federal Bureau of Prisons and all of the residents are under the jurisdiction of the federal Bureau of Prisons.

The agency coordinates with other outside agencies in determining further action and prosecution. The agency does not compel residents to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation. Investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. The agency retains all written reports for as long as the alleged abuser is housed at the facility or employed by the agency, plus five years. The departure of the alleged abuser or victim from the employment or control of the agency shall not provide a basis for terminating an investigation.

The auditor observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.272: 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 period)
- Does Not Meet Standard (requires corrective action)

Auditor comments: Based on agency policy (S392) and staff interviews, the agency imposes no standard higher than a preponderance of the evident in determining whether allegations of sexual abuse or sexual harassment are substantiated.

The auditor observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.273: 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 comments: Based on the agency's policy (S392), following a resident allegation that a staff member has committed sexual abuse against a resident, the agency shall subsequently inform the resident (exception being if the allegation is determined to be unfounded) whenever and in coordination with the federal Bureau of Prisons:

- 1) The staff member is no longer employed by the agency;
- 2) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the agency; or
- 3) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the agency.

Following a resident's allegation that he or she has been sexually abused by another resident, the agency shall subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the agency; or the agency learns that the alleged abuse has been convicted on a charge related to sexual abuse within the agency.

The auditor observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period. All such notification to the residents or attempted notifications are documented.

PREA Standard 115.276: 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 comments: Based on agency policy (S348) and procedures along with staff and resident interviews, disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

The auditor observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.277: 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 comments: Based on agency policies (S348) and procedures along with the staff and resident interviews, any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with residents and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

The agency takes appropriate remedial measures, and shall consider whether to prohibit further contact with residents, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

The auditor observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.278: 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 comments: Residents are subject to disciplinary sanctions in accordance with the federal Bureau of Prisons disciplinary listings and pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse.

Sanctions are commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, coordination with the federal Bureau of Prisons, and the sanctions imposed for comparable offenses by other residents with similar histories. The disciplinary process considers whether a resident's mental disabilities or mental illness contributed to their behavior when determining what type of sanction, if any, should be imposed.

The agency disciplines a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact. A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. The agency prohibits all sexual activity between residents and may discipline residents for such activity.

The auditor reviewed Alston Wilkes Society policy (H1305) and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.282: 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 comments: Resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. If no qualified medical or mental health practitioners are available at the time a report of recent abuse is made, security staff first responders take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners.

Resident victims of sexual abuse while housed are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Based on a review of agency policy (H809) and procedures along with staff and resident interviews, the agency is in compliance with the Prison Rape Elimination Act standard. The auditor reviewed agency agreements and interviewed personnel affiliated with the local rape crisis center and emergency forensic examination hospital to confirm compliance. The auditor was impressed with the quality and scope of services offered in Columbia.

PREA Standard 115.283: 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 comments: The agency in coordination with the federal Bureau of Prisons offers medical and mental health evaluations and, as appropriate, treatment to all residents who have been victimized by sexual abuse in the facility. The evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer, or placement in, other facilities, or their release from custody. The treatment provides such victims with medical and mental health services consistent with the community level of care. Resident victims of sexual abuse while housed are offered tests for sexually transmitted infections as medically appropriate. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuse or cooperates with any investigation arising out of the incident.

The auditor reviewed Alston Wilkes Society policy (H809 and H1102) and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.286: 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 comments: The facility review team takes the following into consideration:

- 1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
- 2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
- 3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- 4) Assess the adequacy of staffing levels in that area during different shifts;
- 5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- 6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to above paragraph numbers 1 to 5, and any recommendations for improvement, and submit such report to the facility head and Prison Rape Elimination Act compliance manager.

The auditor reviewed Alston Wilkes Society policy S392 and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility is in compliance with the Prison Rape Elimination Act standard for the relevant review period.

PREA Standard 115.287: 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 comments: The agency 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 agency aggregates the incident-based sexual abuse data at least annually, although the agency is in its second year of data collection. The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The agency maintains, reviews, and collects data from every facility. Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

Based on a review of documented allegation logs, data collection documentation, policy (S392), and procedures along with agency staff interviews, the agency is in compliance with the Prison Rape Elimination Act standard.

PREA Standard 115.288: 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 comments: Based on policy (S392) and procedure review along with agency staff interviews, the agency reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, by:

- 1) Identifying problem areas;
- 2) Taking corrective action on an ongoing basis; and
- 3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

The agency is in its second year of data review and will compare the current year's data with those from next years and shall provide an assessment of the agency's progress in addressing sexual abuse. The agency's report is approved by the executive director of the agency and made readily available to the public through its website. The agency redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

The agency (policy S392) is in compliance with the Prison Rape Elimination Act standard.

PREA Standard 115.289: 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 comments: Based on a review of documents, policy (S392), and procedure along with agency Prison Rape Elimination Act coordinator, the agency ensures that data is collected and securely retained. The agency makes all aggregated sexual abuse data, from facilities under its direct control, readily available to the public at least annually through its website. The agency website is www.alstonwilkessociety.org. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The agency maintains sexual abuse data collected for at least 10 years after the date of the initial collection.


The agency (policy S392) is in compliance with the Prison Rape Elimination Act standard.

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 Alston Wilkes Society, Bureau of Prisons, or the Columbia Residential Reentry Center under review, and
- I have not included in the final report any personally identifiable information (PII) about any

resident or staff member, except where the names of administrative personnel are specifically requested in the report template.

Walter Sipple  August 24, 2015
Auditor Signature Date