



GEORGIA

DEPARTMENT OF CORRECTIONS

Prison Rape Elimination Act (PREA) 2015 Annual Report



Prison Rape Elimination Act (PREA) Annual Report - 2015

Georgia Department of Corrections

Introduction

The Prison Rape Elimination Act of 2003 (PREA) was signed into federal law with the purpose to provide for the analysis of incidence and effects of prison rape in Federal, State and local institutions and to provide information, resources, recommendations and funding to protect individuals from prison rape. In 2012, the Bureau of Prisons published standardized guidelines promulgated by the Attorney General of the United States. PREA applies to all public and private institutions that house adult or juvenile offenders.

The Georgia Department of Corrections (GDC) maintains a zero-tolerance policy regarding sexual abuse and harassment of offenders within the agency's 34 state prison facilities, 13 transitional centers, 9 probation detention centers, 5 substance abuse and integrated treatment facilities, 23 county correctional institutions and 4 private prisons.

All sexual abuse and sexual harassment allegations are investigated. The cases are documented in the form of incident reports and are entered into an internal offender management program (SCRIBE) as well as maintained at the originating facility in which the allegation was made. Allegations will be administratively or criminally investigated depending on the nature of the alleged incident. The Statewide PREA Coordinator tracks the progress of the investigations with constant contact with the facility in which the allegation was made and with the investigator that is assigned to the case, if applicable. Upon completion of each investigation, appropriate disciplinary action is taken against the perpetrator; where criminal intent is discovered, the case is presented to the appropriate District Attorney for prosecution. Case files of PREA allegations of a criminal nature are maintained for a period of at least ten years upon completion of the investigation.

It is important to note that the Georgia Department of Corrections is continually improving the reporting and investigation methods to ensure the highest level of compliance, as well as swift corrective action when needed. The agency's zero tolerance policy not only aims to protect all offenders under GDC jurisdiction from sexual harassment and abuse, but also protect from retaliation anyone who reports illegal activity and participates in an investigation.

This report summarizes all 2015 PREA allegations that were generated from within the 61 facilities that house state offenders and are operated by the State of Georgia. These include the aforementioned state prisons, transition centers, probation detention centers, and substance abuse treatment centers. Private Prisons and County Correctional Institutions are required by law to produce their own annual PREA reports which can be found on their respective websites.

The Georgia Department of Corrections compiles and investigates PREA allegations in 4 major categories:

1. Staff on Inmate Abuse
2. Staff on Inmate Harassment
3. Inmate on Inmate Abuse
4. Inmate on Inmate Harassment

The final determination of an investigated allegation will fall into one of three major categories:

1. Substantiated: an allegation that was investigated and determined to have occurred.
2. Unsubstantiated: an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.
3. Unfounded: an allegation that was investigated and determined not to have occurred.

2015 PREA Investigations

During calendar year 2015, there were a total of 1,682 PREA allegations at our 61 State-operated facilities. Of those 1,682 allegations, 1,050 (62.4%) were Unsubstantiated, 570 (33.9%) were Unfounded and 57 (3.4%) were Substantiated. For 2015 there are still five (5) investigations on-going.

Total Reported PREA Allegations	1682	% of total allegations
Substantiated	57	3.4%
Unsubstantiated	1050	62.4%
Unfounded	570	33.9%
Investigation Ongoing	5	.3%

Of the 1,682 PREA allegations, 575 were *abuse* allegations (either *Offender on Offender* or *Staff on Offender*); of those allegations, 318 (55.3%) were Unsubstantiated, 222 (38.6%) were Unfounded and 30 (5.2%) were Substantiated. 5 (.9%) are still under investigation.

Total Abuse Allegations	575	% of total allegations
Substantiated	30	5.2%
Unsubstantiated	318	55.3%
Unfounded	222	38.6%
Investigation Ongoing	5	.9%

The remaining 1107 PREA allegations were Sexual Harassment allegations (either *Offender on Offender* or *Staff on Offender*); of those allegations, 732 (66.1%) were Unsubstantiated, 348 (31.4%) were Unfounded and 27 (2.5%) were Substantiated.

Total Harassment Allegations	1107	% of total allegations
Substantiated	27	2.5%
Unsubstantiated	732	66.1%
Unfounded	348	31.4%
Investigation Ongoing	0	0%

The allegation type and subsequent dispositions are as follows:

Reported Allegations			Substantiated					Unsubstantiated					Unfounded					Under Investigation
Total	Abuse	Harassment or Misconduct	Total	Staff/ Inmate Harassment	Staff/ /M Abuse	Inmate/ Inmate Harassment	Inmate/ Inmate Abuse	Total	Staff/ Inmate Harassment	Staff/ /M Abuse	Inmate/ Inmate Harassment	Inmate/ Inmate Abuse	Total	Staff/ Inmate Harassment	Staff/ /M Abuse	Inmate/ Inmate Harassment	Inmate/ Inmate Abuse	
1682	575	1107	57	3	7	24	23	1050	414	133	317	186	570	233	132	115	90	-5

Those incidents still under investigation as of 01-01-2016 fall under the category of Inmate/Inmate Abuse.

2015 Substantiated PREA Allegations

Staff on Inmate Harassment Incidents: (3)

In all three cases action was taken at the facility level against the staff members involved.

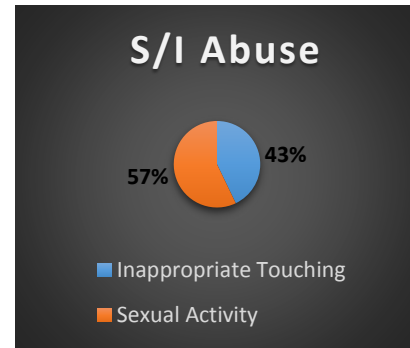
Staff on Inmate Abuse Incidents: (7)

Sexual Activity: (4)

75% (3 of 4) were forwarded to DA for prosecution

25% (1 of 4) still under investigation by OPS

100% (4 of 4) were terminated or resigned employment



Inappropriate Touching/Contact: (3)

33% (1/3) employees were forwarded for criminal prosecution in another case.

100% (3/3) were terminated or resigned from employment.

Inmate on Inmate Sexual Harassment: (24)

Those inmates found guilty of Inmate on Inmate Sexual Harassment were subject to administrative sanctions through the Inmate Disciplinary procedure. In all cases housing changes were made where necessary to ensure the safety of the victim.

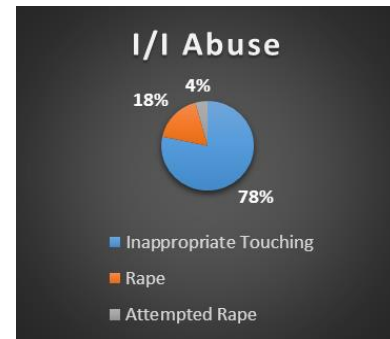
Inmate on Inmate Sexual Abuse: (23)

78% Inappropriate Touching: (18/23)

Of the 18 inappropriate touching cases the aggressor was subject to administrative sanctions through the disciplinary process. Offender housing changes made as necessary to ensure the safety of the victim.

18% Rape: (4/23)

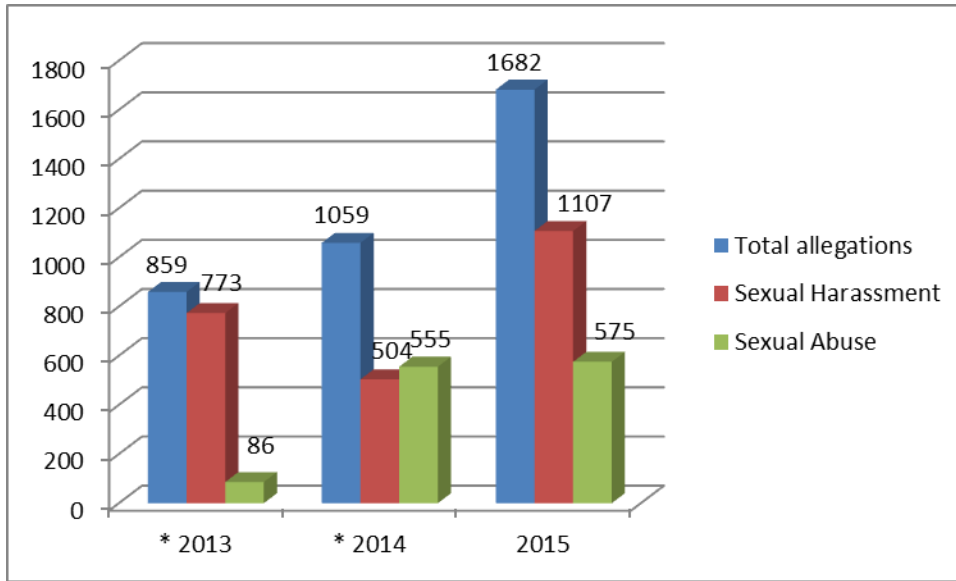
There are officially (4) substantiated abuse cases that are rape-related. (3 of 4) have been forwarded to the DA for prosecution. The remaining investigation is still open.



04% Attempted Rape (01 of 23)

This case is still under investigation.

Comparison with Previous Years



***No audits were conducted in 2013 or 2014**

Conclusion

The Georgia Department of Corrections continues to improve the processes of how PREA allegations are reported, investigated, and tracked. The development, testing, and implementation of a PREA Allegation tracking method allowed for further breakdowns of allegations, along with detailed reporting from all Department of Corrections facilities, as compared to last year. Overall there was a 58% increase in the number of allegations compared to last year. This is indicative of the improvement in our reporting as well as the effect of increased staff and inmate education. There was also a significant increase in the number of substantiated cases which resulted from a better trained investigative team. Our dedication to constant improvement will allow the agency to continue to achieve its goal of protecting all offenders from sexual harassment and abuse, as well as those who seek to report illegal activity.

Appendix A

Allegation Statistics by Facility

Office of Professional Standards: Ricky Myrick, Director		Reported Allegations			Substantiated				Unsubstantiated				Unfounded				Under Investigation	SCRIBE Reporting				SANE			
Statewide PREA Coordinator	Sharon R. Shaver	Total	Abuse	Harassment or Misconduct	Total	Staff/ Inmate Harassment	Inmate/ Inmate Harassment	Inmate/ Inmate Abuse	Total	Staff/ Inmate Harassment	Inmate/ Inmate Abuse	Inmate/ Inmate Harassment	Inmate/ Inmate Abuse	Total	Staff/ Inmate Harassment	Inmate/ Inmate Abuse		Inmate/ Inmate Harassment	Inmate/ Inmate Abuse	SCRIBE Abuse	SCRIBE Harassment		Difference in Abuse	Difference in Harassment	Sane Calls
Security Level/Type Facility	Facility																								
Special Mission	ASMP	141	51	90	3	0	0	2	1	89	26	11	32	20	49	15	6	15	13	0	35	73	-16	-17	0
	GDCP	36	12	24	1	0	0	0	1	33	13	5	9	6	2	1	0	1	0	13	23	1	-1	0	
	GDCP/SMU	19	2	17	0	0	0	0	0	9	8	1	0	0	10	9	1	0	0	0	0	-2	-17	0	
	GSP	160	47	113	1	0	1	0	0	143	59	18	43	23	15	4	4	7	0	-1	54	74	7	-39	11
Close	Baldwin SP	70	15	55	2	0	0	2	0	58	26	4	21	7	8	5	2	1	0	-2	6	47	-6	-8	4
	Hancock SP	18	10	8	0	0	0	0	0	9	4	1	0	4	9	4	5	0	0	2	17	-8	9	3	
	Hays SP	172	22	150	6	0	0	6	0	102	53	1	44	4	64	43	2	18	1	0	14	121	-8	-20	0
	Macon SP	47	22	25	0	0	0	0	0	21	9	7	3	2	26	8	3	5	10	0	30	7	8	-18	1
	Phillips SP	57	12	45	1	0	0	1	0	38	11	2	21	4	18	4	2	5	7	0	7	30	-5	-15	0
	Smith SP	45	9	36	0	0	0	0	0	17	13	0	2	2	28	18	2	2	6	0	2	29	-7	-7	0
	Telfair SP	18	17	1	1	0	1	0	0	17	1	8	0	8	0	0	0	0	0	10	4	-7	3	2	
	Valdosta SP	148	83	65	2	0	0	2	82	26	25	9	22	64	26	24	3	11	0	58	62	-25	-3	5	
	Ware SP	113	77	36	0	0	0	0	0	35	20	13	0	2	78	16	57	0	5	0	72	28	-5	-8	2
Medium	Arrendale SP	110	38	72	10	2	0	4	4	88	15	1	16	16	52	22	7	14	9	0	39	55	1	-17	0
	Autry SP	63	20	43	1	0	0	1	0	33	6	5	14	8	29	10	2	12	5	0	4	48	-16	5	2
	Burruss CTC	3	1	2	0	0	0	0	0	3	2	1	0	0	0	0	0	0	0	0	3	-1	1	1	0
	Calhoun SP	25	12	13	4	1	0	0	3	15	4	3	5	3	6	1	1	2	2	0	11	7	-1	-6	2
	Central SP	38	2	36	3	0	0	3	0	32	13	1	16	2	2	0	0	2	0	-1	5	14	3	-22	2
	Coastal SP	14	3	11	1	0	0	1	0	11	6	0	2	3	2	2	0	0	0	0	6	1	3	-10	0
	Dodge SP	36	10	26	0	0	0	0	0	31	17	2	7	5	5	2	1	0	2	0	8	22	-2	-4	0
	Dooly SP	34	12	22	0	0	0	0	0	14	4	2	4	4	20	8	3	6	3	0	15	18	3	-4	0
	Emanuel WF	5	1	4	2	0	2	0	0	3	0	0	2	1	0	0	0	0	0	0	2	-1	-2	0	
	Helms Facility	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Johnson SP	37	12	25	0	0	0	0	0	27	5	1	14	7	10	2	1	4	3	0	3	24	-9	-1	2
	Lee SP	9	5	4	0	0	0	0	0	6	3	1	1	1	3	0	1	0	2	0	4	5	-1	1	0
	Long SP	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Montgomery SP	3	0	3	0	0	0	0	0	1	1	0	0	0	2	2	0	0	0	0	0	0	0	-3	0
	Pulaski SP	26	7	19	0	0	0	0	0	24	5	0	14	5	1	0	0	1	0	-1	4	19	-3	0	1
	Rogers SP	26	9	17	0	0	0	0	0	13	4	3	4	2	13	5	1	4	3	0	6	15	-3	-2	0
	Rutledge SP	16	6	10	0	0	0	0	0	11	6	1	0	4	5	3	1	1	0	0	5	9	-1	-1	1
	Walker SP	1	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	1	2	1	1	0
	Washington SP	44	10	34	0	0	0	0	0	29	13	3	7	6	15	8	0	6	1	0	11	24	1	-10	0
	Whitworth Facility	25	20	5	14	0	2	1	11	4	0	2	1	1	7	2	0	1	4	0	15	4	-5	-1	0
	Wilcox SP	26	12	14	0	0	0	0	0	24	12	5	0	7	2	1	0	1	0	0	4	17	-8	3	0
Totals for Prisons and Other Agencies:		1585	559	1026	52	3	6	21	22	982	385	127	291	179	546	221	126	112	87	-5	444	804	-112	-222	28
Transitional Center	Albany	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Arrendale	4	1	3	0	0	0	0	0	2	2	0	0	0	2	1	0	0	1	0	0	3	-1	0	0
	Atlanta	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Augusta	2	1	1	0	0	0	0	0	1	1	0	0	0	1	0	1	0	0	0	0	1	-1	0	0
	Clayton	5	2	3	0	0	0	0	0	4	0	1	2	1	1	1	0	0	0	0	0	3	-2	0	0
	Coastal	2	0	2	0	0	0	0	0	2	0	0	2	0	0	0	0	0	0	0	2	1	2	-1	0
	Columbus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0
	LaGrange	4	0	4	1	0	0	1	0	1	0	0	1	0	2	2	0	0	0	0	0	3	0	-1	0
	Macon	3	1	2	0	0	0	0	0	3	2	1	0	0	0	0	0	0	0	0	0	2	-1	0	0
	Metro	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0
	Phillips	4	0	4	0	0	0	0	0	4	3	0	1	0	0	0	0	0	0	0	0	1	0	-3	0
	Smith	1	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	-1	0
	Valdosta	1	0	1	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	-1	0
Probation Detention Centers	Bacon	1	1	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	1	-1	1	1	0
	Bleckley	1	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	-1	1	1	0
	Colwell	3	0	3	0	0	0	0	0	3	3	0	0	0	0	0	0	0	0	0	0	3	0	0	0
	Emanuel	8	6	2	1	0	0	1	1	1	1	0	0	0	6	1	5	0	0	0	0	2	-6	0	0
	McEver	2	0	2	0	0	0	0	2	0	0	0	2	0	0	0	0	0	0	0	1	0	1	-2	0
	Patten	7	2	5	0	0	0	0	6	2	1	2	1	1	1	1	0	0	0	0	2	6	0	1	0
	Paulding	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Treutlen	5	0	5	0	0	0	0	2	2	0	0	0	0	3	3	0	0	0	0	0	0	0	-5	0
Women's	2	0	2	0	0	0	0	1	1	0	0	0	0	1	1	0	0	0	0	0	0	0	-2	0	
Substance Abuse Centers	Appling ITF	34	7	27	3	1	0	2	0	28	7	2	14	5	3	1	0	2	0	2	29	-5	2	0	
	Bainbridge PSAT	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Northwest RSAT	5	1	4	0	0	0	0	0	3	2	0	1	0	2	0	0	1	1	0	0	-1	-4	0	
	Turner RSAT	3	0	3	0	0	0	0	0	3	2	0	1	0	0	0	0	0	0	0	0	0	-3	0	
West Central ITF																									

Appendix B

PREA Focused Initiatives

State Prisons

Arrendale SP – Federal PREA Audit conducted, 100% compliance. Additional mirrors were installed in the Library and Store to eliminate blind spots. PREA signage has been posted behind Lexan in every living unit. Measures are being taken to have cameras installed in the hallways of the Diagnostic Dorms. All staff members were given an ‘Initial Contact Checklist’ card to keep in their pocket in the event of a PREA incident.

ASMP – Federal PREA Audit conducted, 100% compliance. No significant initiatives.

Autry SP - No significant initiatives.

Baldwin SP - Federal PREA Audit conducted, 100% compliance. A TTYD was purchased to ensure the safety of hearing impaired offenders. The phones in segregation and the infirmary were upgraded to ensure the ability to call the PREA hotline. Lighting was upgraded throughout the facility, as well as, outside of the facility to increase visibility. The maintenance shop was reorganized to better supervise the offenders on detail. The brick walls around the bathroom stalls in several buildings were lowered to improve supervision. Four DVRs were added and seven IP addresses were connected to the Wardens office to allow the Warden to monitor the buildings from his iPad. Multiple mirrors were added throughout the entire facility to ensure that security personnel can supervise all areas of their posts safely. Locks were added and/ or changed in all areas accessible to offenders. Windows in education and program building were upgraded to increase visibility. A new SART team was set in placed and thoroughly trained. A new and improved local procedure directive was sent out to staff.

Burruss CTC - No significant initiatives.

Calhoun SP New mirrors were installed in the food service warehouse, medical, inmate store and in laundry behind the washing machine to cover blind spots. Also, better lighting was installed and blinds were removed inside the institution in order to improve visibility. The facility has a new investigator to monitor the camera system. An agreement has been established with Language Line. Duty Officers discuss PREA information during shift briefing. A mandatory PREA training was conducted for all staff and volunteers at the facility. A separate training was conducted for volunteers away from the facility. Some staff members received Specialized Training on-line and off-site.

Central SP - Federal PREA Audit conducted, 100% compliance. A camera was installed in the lower administrative stairway to improve visibility and allow monitoring of this area. The Compliance Manager conducts PREA training with management during monthly meetings and shift briefings. Random PREA hotline test calls are made by management and documented in the dorm log book to ensure phones are working properly.

Coastal SP - Federal PREA Audit conducted, 100% compliance. PREA posters have been placed throughout the entire facility including classrooms. All incident reports have been reviewed and signed off by the Warden. All PREA allegation victims are provided a notification of the investigation results. Posters have been placed in all living units to notify inmates of the presence of opposite-gender staff. Lieutenants, correctional officers, and duty officers are making daily PREA rounds

Dodge SP - Federal PREA Audit conducted, 100% compliance. Blind spots in kitchen were identified and mirrors were installed to improve visibility. Additional PREA posters were added in areas accessible to inmates to increase inmate awareness. Barber shop doors which hindered visual observation were taken down. A new facility camera system has been requested. Mirrors in the warehouse were repositioned to improve visibility. Staff was re-trained on the new PREA policy and cross-gender Searches.

Dooly SP - Federal PREA Audit conducted, 100% compliance. No significant initiatives.

Emanuel WF - Federal PREA Audit conducted, 100% compliance. Windows were added to solid doors in needed areas to increase visibility. All staff attended a 4-hour female services training. Continuous PREA training is conducted with all staff during shift briefings and meetings.

GDCP - Posters indicating female personnel will be entering the cell blocks were posted outside of each housing unit. Continuous PREA training is being conducted with all staff and offenders. Shower curtains are being replaced. The facility is working closely with GDC engineering regarding locks and other issues for corrections.

GDCP/SMU - No significant initiatives.

GSP - Additional electronic enhancements and large mirrors have been added in various locations within the institution including but not limited to D-Building stairwells and outside corridors. Alarm buttons, which activate a blue strobe light on the outside corridor facing the big yard, have been installed in counselor offices and program areas. In the D-Building stairwells, the stairs leading to the third and fourth floors have been sealed with a metal gate and can be accessed only by authorized staff. Additional PREA information signs have been added throughout the institution and in Georgia Correctional Industries.

Hancock SP - Federal PREA Audit conducted, 100% compliance. Four cameras were installed in the warehouse area for increased visibility.

Hays SP - The camera operating system was changed so the Warden has a better view of Y dorm (Fast Track) from a monitor in his office. Blind spot mirrors were also installed in Y dorm and throughout the facility. The Human Resources Manager created a log book for logging background checks as a means to ensure documentation supports the requirement of the standards.

Helms Facility – Federal PREA Audit conducted, 100% compliance. No significant initiatives.

Johnson SP – Federal PREA Audit conducted, 100% compliance. PREA fact cards are made for all new hires by our personnel department. An interpreter was made available on 1st shift. PREA training continues at all shift briefings.

Lee SP - Federal PREA Audit conducted, 100% compliance. Large mirrors were installed in the hallway of the kitchen leading to back dock to eliminate blind spots. Additional mirrors were also added to the laundry to increase visibility and eliminate blind spots. Enhanced PREA training and education was conducted for staff, inmates, volunteer and vendors entering the institution.

Long SP - More PREA posters were placed throughout the facility along with the See Something, Say Something posters. All staff members were given a card on the first responder's duties and responsibilities. All staff members successfully completed The Federal Bureau NIC Learning Courses on

communicating effectively and professionally with LGBTI offenders, and Responding to sexual abuse. All supervisors successfully completed the course on investigating sexual abuse in a confinement setting. The PREA hotline is tested on all offender phones at least twice per month to ensure the phones are operable. The SART team and the PREA Compliance Manager attended all mandatory training conducted by the State PREA Compliance Coordinator. The Rape Crisis Center of Savannah agreed to be the Offender Advocate for our facility. All security personnel were trained on pat searching transgender and/or intersex offenders. All medical staff completed the necessary PREA training. PREA rounds are conducted and documented inside and outside of the facility to include outside details.

Macon SP - A new camera system is being installed throughout the facility. PREA posters are being painted on the walls in an attempt to provide a more permanent solution for sign issues.

Montgomery SP - Federal PREA Audit conducted, 100% compliance. PREA Posters were replaced in housing units and common areas. Staff has been issued PREA fact cards to improve their familiarity with the standards. All nurses have been sent to specialized SART training.

Phillips SP - Federal PREA Audit conducted, 100% compliance. Mirrors were added to the classroom in the gym to aid with visibility. Additional cameras have been ordered. PREA is discussed in shift briefings as well as supervisor meetings. Additional PREA training for contractors and volunteers has been implemented.

Pulaski SP – Federal PREA Audit conducted, 100% compliance. Several areas in the facility had windows added for better visibility. These areas are: the medical area, shakedown room in the segregation unit, and the vehicle maintenance shop. Additional PREA posters were placed in the housing units as well other areas the offenders have access to in order to keep inmates informed of the various ways to report a PREA allegation. Local operating procedures have been updated for the changes of the staff involved with the SART/PREA assignments.

Rogers SP - Structured inmate movement has been implemented. Inmates are escorted in groups to scheduled activities. Additional training was provided to all Staff regarding PREA. The majority of Staff completed the training on the National Institute of Corrections website. Additional mirrors were ordered to cover blind spots and new PREA posters were posted.

Rutledge SP - Federal PREA Audit conducted, 100% compliance. All window blinds were removed. Shower curtains were modified to provide privacy without compromising security. A large mirror was installed in the laundry area to eliminate blind spots. PREA training was conducted for staff in managing transgender inmates. PREA informational posters were placed throughout facility. PREA standards are reviewed in shift briefings.

Smith SP - Additional PREA signs have been posted in all areas where offenders have access. Background checks are being done on all staff members every year. Additional mirrors have been installed and requests for more have been made. Additional security cameras and upgrades to the current system have been requested. Office doors that did not have windows have been replaced with doors that have a window.

Telfair SP - Blinds and other structures that were blocking visibility were removed from windows throughout the facility. Mirrors were added in education, the counseling hallway, and the warehouse to eliminate blind spots. Windows were added to doors in the medical department exam rooms, and free

standing screens were utilized to maintain required privacy. Shower curtains were shortened to provide visibility while maintaining privacy.

Valdosta SP - Mirrors were added to hallways to eliminate blind spots and hiding places. A PREA bulletin board was added to all housing units that houses PREA information in English and Spanish. The SART team teamed up with the Mental Health department to gain more information on LGBTI inmates living in housing units to ensure they were being housed correctly. Staff members were provided with additional training on cross gender pat searches.

Walker SP - Federal PREA Audit conducted, 100% compliance. Privacy screens have been placed in the bathroom areas of the dorms.

Ware SP - Federal PREA Audit conducted, 100% compliance. Corrugated hard plastic posters have been bolted in all areas around the Facility. All blinds have been removed from inside windows to prevent any areas that could be blocked off

Washington SP - Federal PREA Audit conducted, 100% compliance. Mirrors were added in the library legal research area and books were removed from the top shelves to increase visibility. Additional training was added with PREA information including monthly meetings with SART and management staff, along with shift briefings and updated pamphlets and videos. A contract with Language Line and an agreement with bilingual staff have been obtained to assist with limited English proficiency, deaf and disabled inmates.

Whitworth Facility - Federal PREA Audit conducted, 100% compliance. Electronic monitoring systems were placed in both the Administrative Segregation hallways and the foyer area in medical. Several additional mirrors were placed around the facility, both inside and outside. The overhead storage area in the maintenance department was cleaned up and organized so nothing obstructs visibility. Cages were placed behind the dryers in laundry and vending machines in visitation so no one can get behind these machines. Additional PREA literature was created for both staff and offenders.

Wilcox SP - Federal PREA Audit conducted, 100% compliance. Shower curtains were replaced with clear top and bottoms in all housing units to better enhance the safety of the inmates by allowing better visibility while still providing the necessary privacy.

Transition Centers

Albany TC- Federal PREA Audit conducted, 100% compliance. No significant initiatives.

Arrendale TC - No significant initiatives.

Atlanta TC - PREA informational posters were placed throughout the facility. A contract for the Language Line solutions has been established.

Augusta TC - Federal PREA Audit conducted, 100% compliance. Electronic monitoring systems were enhanced with the addition of additional cameras in several areas of the facility, including resident living areas and exterior areas of the facility. Storage closets had the interior locking mechanisms removed and exterior keyed locking mechanisms were installed. Enhanced PREA training has been implemented beyond the mandated POST training. All staff and volunteers entering the institution attend PREA

specified training conducted by the Facility Instructor. Residents are educated on PREA through the intake, orientation, and classification processes.

Charles D. Hudson TC - Federal PREA Audit conducted, 100% compliance. Blinds were removed from interior windows to allow for better visibility. Rounds were increased in the kitchen dry storage area, and in vulnerable areas of the facility. PREA discussions were implemented in shift briefings and staff meetings. An agreement was reached with Harmony House Domestic Violence Shelter to provide advocacy and emotional support services for the offenders.

Clayton TC - Federal PREA Audit conducted, 100% compliance. No significant initiatives.

Coastal TC - Federal PREA Audit conducted, 100% compliance. No significant initiatives.

Columbus TC - Federal PREA Audit conducted, 100% compliance. No significant initiatives.

Macon TC - Federal PREA Audit conducted, 100% compliance. Staff are encouraged and expected to make rounds and visits in vulnerable areas more frequently in an unscheduled manner

Metro TC - Federal PREA Audit conducted, 100% compliance. 21 additional cameras have been requested, and approved, for Metro TC for the next fiscal year. We have rearranged vending machines to allow better visibility. Nine area mirrors were added to improve visibility.

Phillips TC - Federal PREA Audit conducted, 100% compliance. No significant initiatives.

Smith TC - All window blinds were removed. PREA flash cards were issued to all staff.

Valdosta TC - All unnecessary blinds on interior windows were removed. PREA training was improved for residents, volunteers, and staff. Announcing cross sender staff/visitors was improved and is now logged in the main control logbook.

Probation Detention Centers

Bacon PDC - Staff members are informed of PREA policies and updates during shift briefings and meetings throughout the year and topics addressed are documented during meeting minutes. A new camera was added to the food service area and two mirrors were added to the administrative area.

Bleckley RSAT – Federal PREA Audit conducted, 100% compliance. A new protocol was adopted requiring shower curtains to remain open when not in use. Only one person will shower at a time when using the shower for new intakes in barber shop.

Colwell PDC - Federal PREA Audit conducted, 100% compliance. No significant initiatives.

Emanuel PDC - Windows were installed in doors leading into the isolation/segregation units. Windows were also added to all doors in the medical area except exam rooms. PREA issues and policies are discussed at the weekly manager's meetings, supervisor's meetings, and daily shift briefings.

McEver PDC - Federal PREA Audit conducted, 100% compliance. Mirrors have been added to all dayroom areas to increase visibility. Mirrors have been placed in offices to eliminate blind spots. PREA signs have been placed in all areas detainees and staff go.

Patten PDC - The segregation unit was renovated into a dorm where we currently house the age 17 residents. Installed window in the door to better monitor the unit. Mirrors were adjusted in the facility per the PREA auditor's request in order to allow better visibility.

Paulding PDC –PREA flash cards have been issued to all staff. A copy of the PREA standards and the PREA SOP was placed in all control rooms, RSAT office, and kitchen. Shower curtains were installed or altered to meet visibility requirements.

Treutlen PDC - Federal PREA Audit conducted, 100% compliance. Larger stationary mirrors were installed in the dormitories for increased visibility. More in-depth training was conducted regarding PREA in in-service training.

Women's PDC - Additional mirrors were installed to eliminate identified blind spots. PREA flash cards were issued to all staff members. PREA posters were placed in all resident living areas and common areas.

Substance Abuse Treatment Centers

Appling ITF - Federal PREA Audit conducted, 100% compliance. Mirrors were placed throughout the facility to eliminate blind spots in areas such as the laundry, rear hallway, administrative area, housing units and kitchen area. Quarter-round mirrors were placed outside of each education building as well as between an external freezer and the maintenance building to eliminate blind spots. Shower curtains were shortened to better account for the detainee presence. A Retaliation Monitor and Victim Advocate were identified for the facility. A PREA log was put into use each month to accurately report monthly incidents and allegations.

Bainbridge PSAT -. No significant initiatives.

Northwest RSAT- Federal PREA Audit conducted, 100% compliance. No significant initiatives.

Turner RSAT - Federal PREA Audit conducted, 100% compliance. A new camera system was installed with additional cameras in each housing unit and secluded work areas to better aid with visibility. All shower curtains in the dorms were cut for adequate visibility yet privacy.

West Central ITF - Additional mirrors were placed in hallways, dormitories, laundry, and kitchen to provide visibility in blind areas. Products in kitchen and warehouse areas were rearranged for better visibility.