PREA AUDIT: AUDITOR'S SUMMARY REPORT ADULT PRISONS & JAILS





Name of facility:	Rivers Correctional Institution				
Physical address:	145 Parkers Ferry Road, Winton, NC 27986				
Date report submitted:	June 8, 2018				
Auditor Information	Charles J. Kehoe	Charles J. Kehoe			
Address:	P.O. Box1265, Midlothian, VA 23113				
Email:	charlesjkehoe@msn.com				
Telephone number:	(804) 873-4949				
Date facility visit:	April 25- 27, 2017				
Facility Information					
Facility mailing address:	Same as above				
Telephone number:	(252) 358-5200				
The facility is:	☐ Military		☐ County	☐ Federal	
-	□ Private for profit		☐ Municipal	☐ State	
	☐ Private not for profit				
Facility Type:	☐ Jail] Jail ⊠ Prison			
Name of PREA Compliance Manager:		Kimberly Gamble		Title:	Chief Psych.
Email address: Kgamble@geogroup.com				Telephone number:	(252) 358-5200
Agency Information					
Name of agency:	The GEO Group, Inc				
Governing authority or parent agency:	N/A				
Physical address:	One Park Place, Suite 700, 621 NW 53 rd Street, Boca Raton, FL 33487				
Mailing address: (if different from above)					
Telephone number:	(561) 999-5897				

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Agency Chief Execu	itive Officer		
Name:	George C. Zoley	Title:	Chairman of the Board and CEO
Email address:	gzoley@geogroup.com	Telephone number:	(561) 999-5897
Agency-Wide PREA	Coordinator		
Name:	Phebia Moreland	Title:	PREA Coordinator
Email address:	pmoreland@geogroup.com	Telephone number:	(561) 999-5827

AUDIT FINDINGS

NARRATIVE: The PREA Audit of the Rivers Correctional Institution (RCI) was conducted from April 25 to April 27, 2017. The Designated Auditor was Charles J. Kehoe.

The auditor wishes to extend his deepest appreciation to Warden Brick Tripp and his staff for their professionalism, hospitality, and kindness.

The auditor also wishes to compliment the GEO Group PREA Coordinator, Phebia Moreland, and the PREA Compliance Manager, Kimberly Gamble, for their outstanding work in organizing the electronic files that were provided to the auditor in advance of the audit. This enabled the audit to move forward very efficiently.

The Vice President of GEO US Corrections was interviewed during previous GEO audits, as was the PREA Coordinator during an earlier audit.

The auditor consulted Just Detention International (JDI) on April 23, 2017 to see if that agency had received any communication from RCI. JDI replied on April 24, 2017 that according to their records they "have not received any information about this facility."

Mr. Rob Walling the Senior Manager for PREA Contract Compliance with the GEO Group and the auditor arrived at the RCI at 8:00 a.m. on April 25, 2017. They were greeted by Warden Tripp. The auditor and Mr. Walling met with the Warden from 8:15 to 8:35.

The Audit Entrance Meeting was held from 8:40 to 8:55 a.m. with Warden Tripp, 8 administrative team members and Mr. Walling in attendance. The Warden welcomed Mr. Walling and Mr. Kehoe and provided the auditor with an overview of the RCI and the offender population it serves. The auditor reviewed the audit schedule. The PREA Compliance Manager provided the auditor a list of offenders by housing unit and staff members by shift the night before the audit. The auditor randomly selected inmates and staff to be interviewed from the lists that were given to him. Specialized staff and targeted inmates were also identified to be interviewed.

The site review began at 9:00 a.m. The site review was conducted by Warden and the PREA Compliance Manager. The Senior Manager for PREA Contract Compliance also accompanied the auditor. The site review ended at 1:10 p.m. Throughout the tour, the auditor observed the notices of this PREA audit and posters that called attention to GEO's Zero Tolerance Policy and how to report allegations of sexual abuse and sexual harassment. All the PREA signage was in English and Spanish. All areas of the facility that are within the security of the facility were visited.

Following the site review, the auditor began the interviews and reviews of investigative files, training and personnel files, offender files, and documents.

Seventeen random selected inmates were interviewed. There was at least one offender interviewed from each housing unit. Four inmates were identified as disabled or they had limited English proficiency. A staff member who spoke Spanish was used as the interpreter. Four of the inmates also identified as gay and were interviewed accordingly.

Ten correctional officers were interviewed who were randomly selected by the auditor from both shifts. Eighteen interviews were conducted with staff in 13 specialized areas. These interviews included the Warden, PREA Compliance Manager (PCM), Intermediate/Supervisory staff who make unannounced rounds (2), the Health Administrator, a psychologist (licensed mental health clinician), the Human Resources Manager, the Chief Institutional Investigator, the employee who conducts screening for risk of abuse or victimization, an officer who supervises inmates in restricted housing, Incident Review Team members (2), the staff member who monitors for threats of retaliation, a non-security staff member who can act as a first responder, and an Intake staff member. The auditor also interviewed one volunteer and two contractors. In total, the auditor conducted 53 interviews during the audit.

It should be noted that some of the employees have multiple responsibilities so a few individuals were interviewed more than once if their duties covered more than one specialized area.

The auditor was impressed by what the correctional officers and other staff know about PREA, the zero tolerance policy, offender rights regarding PREA, first responder duties, and evidence collection. Training is provided according to the GEO PREA curriculum and includes specialized training for investigators, and health care and mental health providers. The auditor has thoroughly reviewed the comprehensive GEO PREA training curriculum, the curriculum for cross-gender searches and searches of transgender and intersex inmates, and the curriculum for the specialized training for the investigators and health and mental health care providers. GEO's training is complete and professional and exceeds the standards in every area. Annual in-service training covers the latest PREA information.

The auditor selected and reviewed six personnel files and training records of correctional officers he had interviewed. The personnel files were very organized and included the necessary background checks and the acknowledgement forms from annual evaluations and promotions. The training records had the appropriate written documentation that the correctional officers received the required training and understood it. The auditor also examined six of the health care providers' training files and confirmed that the providers had received the general PREA training as well as the specialized training. The personnel and training files of the investigator were

also reviewed and found to be in good order. Documentation that the contractors and volunteers received PREA training was also provided to the auditor. Interviews with the contractors and volunteers also established that the contractors and volunteers are trained on the PREA essentials.

The auditor also reviewed five of the inmates' files and reviewed documentation of the offender PREA education, intake screening for risk of victimization and abusiveness and follow-up assessments. The offender files are very organized and provided detailed information about the resident.

The auditor and the investigator reviewed 17 investigation files regarding allegations that were made in 2016. Of the 17 investigations, three (3) were allegations of inmate-on-inmate sexual harassment. Two (2) of the allegations were unsubstantiated and one was unfounded. Six (6) of the allegations were for staff-on-inmate sexual harassment. Two (2) of the allegations were unsubstantiated, one (1) was unfounded, and three (3) are still pending a final disposition. Two (2) of the allegations were for inmate-on-inmate sexual abuse. Of these one (1) was unsubstantiated. The second was an allegation that came from another facility without enough information to make a thorough investigation leading to a finding. The auditor reported the finding as "unknown." Five (5) allegations were for staff-on-inmate sexual abuse. Of these five (5) allegations, one (1) was unsubstantiated, three (3) were unfounded, and one was still pending. The final investigation that was reviewed was for an allegation of retaliation for reporting a PREA incident. That investigation is on-going, although the resident has been moved.

The auditor found that all the investigations were conducted in a professional way. The time to complete an investigation started out as a long period (12 months or more) but greatly improved over time. At the end of 2016, the average time to complete the investigation was 5.5 months. The investigations showed that Incident Review Team Meetings were conducted in all the completed investigations, except those that were determined to be unfounded. In every case, there was documentation that the resident was being monitored for retaliation. Only one inmate was informed of the outcome of the investigation. None of the other inmates were informed about the outcome of their allegations because in every case where the investigation was completed, the inmate had been released or transferred. Given the various levels within the corporation that review allegations and investigations, the time it takes to completely finish an investigation does not seem unreasonable.

When the on-site audit was completed, the auditor conducted the Exit Meeting on Thursday, July 21, 2016 at 2:00 p.m. The Warden, 11 administrative staff and the Senior Manager for PREA Contract Compliance were in attendance. While the auditor could not give the facility a final finding, as there were a few areas needing further information, the auditor did give an overview of the audit and thanked Warden Tripp and his staff for their hard work and commitment to the Prison Rape Elimination Act.

The auditor finds that as of August 15, 2017, the Rivers Correctional Institution meets the requirements of the Prison Rape Elimination Act, Prison and Jail Standards.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Rivers Correctional Institution is a classified as a minimun custody correctional institution located at 145 Parkers Fishery Road Winton, NC approximately 34 miles Southwest of Suffolk, Virginia, and 213 miles from Washington, DC. Winton is the County Seat of Hertford County. The correctional institution is situated on a 257-acre tract of land. The physical plant, constructed in 2001, is a square shaped campus design with four major housing units that house approximately 360 inmates each. Two housing units are located on each side of the square. Each major housing unit is divided into five pods. All cells are double ooccupancy. The Special Housing Unit (SHU) has 39 administrative segregration cells and 26 disciplinary segregration cells. Each cell is double occupancy. Each SHU cell has its own shower in the cell. The showers have shower curtins. Indoor and outdoor recreation is available to SHU inmates.

There is a large gymnasium for indoor recreation and a large outdoor recreation area in the center of the complex. There is also a baseball diamond located behind the gym area. The education and programs building is adjacent to the gym.

A large warehouse is located in the front of the campus. The medical services are also located in this area. The restricted housing unit is located near medical services.

The administration building is in the very front of the campus. There are 165 cameras in the facility.

During the site review, the auditor identified some blind spots. One was in the laundry behind the washers, another was in the dry storage area in food service, and the third was at the back of the housing units. The auditor suggested mirrors for the laundry and the dry storage areas. Before the end of the audit, the facility had installed mirrors in these areas and greatly improved the capacity to see in these areas. As for the living units, the auditor, Senior Manager for PREA Contract Compliance, the Warden and the PREA Compliance Manager discussed some possible options. It was decided that this should be reviewed and included in any capital improvement plan. The auditor was satisfied that the facility is aware of these blind spots and reminds staff to monitor them on a regular basis.

As part of the site review, the auditor called the 24-hour hotline that inmates can use to report an allegatigation of sexual abuse or to seek emotional support. In one unit the phone was out of service and a work order had been noted. That phone was repaired before the end of the first day of the audit. The auditor did call the hotline from another unit. The staff person at the hotline was very familiar with PREA and said their agency had received about 6 calls from RCI during the past year. When an inmate calls the hotline to make an allegation, the hotline representative calls the Hertford County Sheriff's Department

In 1997, the National Capital Revitalization Act mandated that the Federal Bureau of Prisons (BOP) house sentenced felons from the District of Columbia in private contract facilities. The BOP solicited competitive bids from the private sector. The Act also closed the Lorton Correctional Institution that was operated by the DC Department of Corrections. Lorton inmates would be moved to the private correctional facility.

On March 7, 2000, the BOP and the GEO Group, Inc signed a contract that provided that GEO would design, finance, build, own, and operate a low security, adult male facility in Winton, NC. GEO began construction very soon after the contract was signed and on March 7, 2001, the BOP approved the completed facility and issued a Notice to Proceed with the 1,450-bed, low custody, facility. GEO successfully managed and operated the Rivers Correctional Institution under the original contract through March of 2011. The contract was renewed effective April 1, 2011 for ten years. The BOP has three, full-time, contract monitors on site.

The first morning of the audit there were 1,076 inmates in the facility. Of these, 34% were U.S. citizens from the District of Columbia and 66% were identified as undocumented persons who had been convicted of a felony in Federal Court and are deportable by the government. As previously stated, the facility does have at least one interpreter on staff and also has a contract with Language Line.

RCI offers several educational and vocational programs that include GED, English as a Second Language (ESL), Adult Basic Education (ABE), and in construction, commercial driving, and computer technology. Life skills training for inmates includes drug treatment, conflict resolution, time management, parenting skills, conflict resolution, and preparing for reentry.

The facility has a law library and a general interest library. Religious services are also provided. Inmate services include health care and mental health care, food services, laundry, and the commissary. RCI also has an industry program titled, "Wheels for the World." Under this program, inmates repair and revitalize broken wheel chairs. Those chairs are then donated to the disabled and impoverished around the world.

RCI is accredited by the American Correctional Association and the Joint Commission (TJC)

Number of standards exceeded: 12 Number of standards met: 28 Number of standards not met: 0 Non-applicable: 3

§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

□ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
GEO Corporate PREA Policy Section 5.1.2 - A. and the RCI Policy 10.003 state the procedure

GEO Corporate PREA Policy Section 5.1.2 - A and the RCI Policy 10.003 state the procedures and practices the facility follows when preventing, detecting, and responding to sexual abuse and sexual harassment. The GEO policies and procedures and the policies and procedures of the facility are all well organized and easily understood.

RCI is operated under an agreement with the Federal Bureau of Prisons (FBOP) and follows FBOP policy 5324.12, "Sexually Abusive Behavior Prevention and Intervention Program."

The GEO Group has a three-tier organizational structure for the oversight and management of PREA. The PREA Director is based at the GEO Corporate Office in Florida. Each of the three GEO Regions, has a PREA Coordinator who assists the PREA Director with all PREA related matters for the institutions in that specific region. At the institution level the PREA Compliance Manager is responsible for all PREA issues in that specific facility. These position are all found on the GEO organizational chart. The agency provide charts for the last three years.

Ms. Phebia Moreland is the GEO Group PREA Director. Ms. Moreland is a Certified PREA Auditor and is very knowledgeable about the Prison Rape Elimination Act. Ms. Moreland also conducts PREA related training and facilitates meetings to keep facility Compliance Managers, medical and mental health staff, and the PREA investigators current on any changes and best practices. Ms. Moreland has complete authority within the GEO Group over all matters related to the Prison Rape Elimination Act and works closely with the Office of Professional Responsibility at Headquarters on PREA investigations. During this audit cycle, the PREA Director was interviewed during an earlier PREA audit.

Dr. Kimberly Gamble is the PREA Compliance Manager (PCM) at RCI. Dr. Gamble is the Chief Psychologist at RCI and also monitors for any threats of retaliation. A second Psychologist also monitors for retaliation.

The auditor interviewed the PCM who reported that she had sufficient time to complete her assigned duties as the Chief Psychologist and sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. She added that she has an excellent team that helps her with any PREA assignment given to them. The auditor was very

impressed with PREA Compliance Manager and her knowledge of the PREA standards and all the requirements of PREA. She carefully monitors all PREA issues in the facility.

When the auditor interviewed the Warden, he was equally impressed by the Warden's complete commitment to sexual safety in the RCI and to full adherence to the PREA standards, every day.

The GEO Group is very committed to its Zero Tolerance Policy and to the PREA standards and ensures that PREA is part of the philosophical and foundation of each facility. GEO's PREA Coordinator, and RCI's Warden and PREA Coordinator reinforce the company's unconditional commitment to the Prison Rape Elimination Act on a daily basis. The auditor finds that RCI exceeds the requirements of the standard.

§115.12 - Contracting with other entities for the confinement of inmates

☐ Exceeds Standard (substantially exceeds requirement of stanhedard)
$\hfill\square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
The GEO Group and RCI do not contract with other entities for the confinement of inmates.
§115.13 – Supervision and Monitoring
□ Exceeds Standard (substantially exceeds requirement of standard)
 ☑ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard

GEO policies and procedures and RCI policies and procedures meet all the the requirements of the standard. RCI has a current staffing plan that is part of the contract with the BOP. The Facility Annual Assessment addresses all the elements of the standard from subsection (a) (1) through subsection (3). The auditor reviewed the staffing plans and the Facility Annual Assessments for 2016 and 2017 and found each item in the standard was addressed. The PREA Coordinator's signature confirmed she had reviewed the documents.

The auditor also saw ample documentation that supervisors are conducting unannounced rounds. Interviews with staff and supervisors also confirm this, as well. When conducting unannounced rounds, supervisors and administrators will ask inmates and staff specific questions related to PREA. This ensures that inmates and staff are familiar with PREA policies

and procedures. This is the only agency the auditor has found that does this. The auditor believes this makes the unannounced rounds a practice with many benefits.

As previously noted, there are 165 cameras in the facility. The auditor reviewed the recordings of previous days and found the quality to be very good. Over the previous two years, the facility provided documentation that additional cameras have been added to the facility to address identified blindspots.

Because the GEO company requires mid-level supervisors and administrators to ask staff and inmates questions about PREA when making unannounced rounds there by enhancing the value and importance of unannounced rounds and because the company and the facility have documented the steps they have taken to eliminate blind spots by adding additional cameras throughout the facility, the auditor finds the facility exceeds the standard.

§115.14 – Youthful Inmates
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill \square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
There are no youthful offenders in the RCI.
8115 15 – Limits to Cross-Gender Viewing and Searches

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

GEO Policy and Procedure 5.2.1 A prohibits cross-gender searches except in exigent circumstances. The policy also prohibits cross-gender visual body cavity searches except in exigent circumstances and then only when performed by offsite Medical Practitioners. Since there are no female offenders at this facility, the issue of male staff conducting searches of female offenders is not applicable. Strip searches of the male inmates are documented in a log book that is maintained in the unit control room.

GEO Policy and Procedure 5.2.1- A also requires facilities to establish procedures that enable inmates to shower, perform bodily functions, and change clothes without non-medical staff observing their genitalia or buttocks. RCI Policy 10.003 states that female staff will announce their presence when entering a housing unit. During the interviews with inmates the auditor

was told that most of the time female staff announce their presence when they enter a housing area. Three offenders said there are a few of the female staff who are less consistent about announcing than others. Fourteen of the 17 inmates interviewed said female staff announce when they come into a unit. The auditor observed female staff announce their presence when they entered the housing units. When opposite gender announcements are made from the control room, they are documented in a log book. The auditor mentioned to the PCM that some inconsistencies were noted by inmates. The PCM said that reminders would be communicated to all staff. This was accomplished before the end of the on-site audit.

Three inmates said that sometimes during routine cell checks, female officers will see an inmate using the toilet or sometimes during counts female staff may come into the shower area, but this does not happen on a regular basis. During the site review, the auditor made note of the privacy provided in the showers.

GEO Policy requires that all security staff are trained in the proper procedures for conducting cross-gender pat-down searches and searches of transgender and intersex offenders in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. RCI has provided and documented the required training of the correctional officers. During the interviews with randomly selected staff, every correctional officer confirmed he/she had received training in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. When asked by the auditor to describe how the these searches would be conducted, every correctional officer explained the correct approach.

The GEO policy also prohibits searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.

§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient

□ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill \square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
GEO's PREA Policy 5.1.2-A and RCI's Policy 10.003 meets the requirements of the standard

GEO has a contract with Language Line Services, Inc. which provides interpreters in several languages via the phone. The PCM also created a list of staff members who speak Spanish and are readily available.

The PCM also has a Sign Language Interpreter and Translator List that provides contact information for Certified Sign Language Interpreters at the Wilson Regional Center. She has also developed a working relationship with the North Carolina Division of Services for the Deaf and Hard of Hearing in the Department of Health and Human Services.

The auditor interviewed four offenders who had limited English proficiency. One interview required that the auditor work with one of the facility's staff who also serves as an interpreter. Three of the inmates stated they were provided all the PREA information in English and Spanish. One inmate said he did not remember if he got the material or not, but he was aware of how to report any allegations of sexual abuse or sexual harassment.

During the site review, the auditor observed posters and brochures throughout the facility, written in both English and Spanish, that informed inmates how to report allegations of sexual abuse and sexual harassment and how to access outside confidential support services.

The auditor was very impressed by the comprehensive approaches the facility has to educate and inform inmates with special needs about PREA. Because RCI provides multiple services and options for inmates who have disabilities or have limited English proficiency, the auditor finds the facility exceeds the standard.

§115.17 – Hiring and Promotion Decisions

□ Exceeds Standard (substantially exceeds requirement of standard)

☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Tor the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

GEO PREA Policy addresses all the requirements of this standard.

The auditor reviewed six personnel files and found background checks of new employees, and confirmed that the five-year background checks of existing staff were completed, as required. There were no promotions during the 12 months before the audit, but GEO policy ensures that a background check will be completed when a promotion occurs.

GEO uses an independent company to do the background checks. In addition, all background checks are sent to the BOP for further review.

Employees are also required to respond on the job application or written self-evaluations to the questions addressed in 115.17 (a) (1), (2), and (3). GEO procedures also state that employees have an affirmative duty to disclose any such conduct.

Background checks are also conducted on all contractors and volunteers who have contact with offenders. The auditor found the contractors have had background checks as required by the standard. As previously stated, background checks are reviewed by the BOP, as well.

The GEO Corporate Office will provide information regarding substantiated allegations of sexual abuse or sexual harassment involving a former employee to an institutional employer for whom the employee has applied to work provided the request is in writing. The Human Resources Manager stated that RCI has not been contacted by any other potential employer nor has RCI had any substantiated cases of staff on inmate sexual abuse or sexual harassment.

§115.18 – Upgrades to Facilities and Technology

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Does Not Meet Standard (requires corrective action)

There are 165 cameras in the facility and new equipment is added as needed. During the site review, the auditor pointed out the blind spots in the rear of one of the housing units, behind the washers in the laundry building, in the dry storage area of the Food Service Department, and in the parts area of the Maintenance Building. Those blind spots were eliminated with the addition of mirrors in the various locations within days after the audit.

§115.21 – Evidence Protocol and Forensic Medical Examinations

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Does Not Meet Standard (requires corrective action)

The auditor reviewed the policies and procedures for the criminal investigation of allegations of sexual abuse and the administrative proceedings for allegations of sexual harassment. The facility operates under GEO Corporate Policy 5.1.2 E, RCI Policy 10.002 and 10.003, and BOP Program Statement 5324.12.

All criminal investigations are conducted by the Hertford County Sheriff's Office. The Agreement requires that the investigating officers receive the PREA investigator training. Adminitrative investigations are handled by the RCI investigative staff. The BOP Office of Internal Affairs may also participate in administrative investigations. If an allegation is made

regarding a staff member at RCI, the GEO Office of Professional Responsibility will immediately become involved.

The auditor reviewed RCI PREA Sexual Assualt Response Team Protocol, the Memorandum of Understanding with the Hertford County Roanoke-Chowan SAFE agency, the Mutual Assistance Agreement with the Hertford County Sheriff's Office, and the Hospital Service Agreement with the Southampton Memorial Hospital.

The MOU with the Hertford County Roanoke-Chowan SAFE agency ensures that inmates will have a staff member present during forensic exams and that the agency will also provide emotional support and take calls regarding allegations of sexual abuse or sexual harassment.

The Hosptial Service Agreement states that offenders will be provided forensic exams and other health care services, as needed, and will work with law enforcement and the victim advocate.

The Mutual Assistance Agreement states the Sheriff's Office will investigate all allegations of sexual abuse, will follow the protocols required by the standard, and will assign officers who have received the PREA Investigator Training.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

□ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
As previously reported, the auditor reviewed the policies and procedures that ensure allegations of sexual abuse and sexual harassment will be referred for investigations. RCI

operates under GEO Corporate Policy 5.1.2 E, RCI Policy 10.003, and BOP Program

The GEO Group PREA Web site states:

Statement 5324.12.

"All cases of alleged sexual conduct shall be promptly, thoroughly, and objectively investigated. Upon substantiation of any allegation of sexual conduct, appropriate disciplinary actions will be taken against the employee, contractor, volunteer, or individual in a GEO facility or program. Those actions may include possible criminal prosecution. If the allegation potentially involves criminal behavior, GEO will ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations."

The auditor interviewed the Chief Investigator at the facility. The investigator said allegations of sexual abuse will be referred to Hertford County Sheriff's Office and the FBI for

investigation. The GEO Office of Professional Responsibility is also involved in any allegation of sexual abuse or sexual harassment that involves a staff member.

§115.31 – Employee Training

$\hfill\square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period
☐ Does Not Meet Standard (requires corrective action)
All GEO employees are provided comprehensive training on the Prison Rape Elimination Act

All GEO employees are provided comprehensive training on the Prison Rape Elimination Act and GEO's and RCI's, policies and procedure for preventing, detecting, and responding to allegations of sexual abuse and sexual harassment.

PREA training is required of all new staff during orientation. PREA training is also provided annually, during in-service, online, and during shift briefings. Staff are tested on their knowledge of PREA requirements. During random interviews with correctional officers, the auditor asked the employees to describe the topics covered in the training. The staff reported that training covered all the subject areas mentioned in the standard and, when asked, provided details on the content of the training. In addition to the structured training, during unannounced rounds, supervisors will randomly ask staff members specific questions about PREA. This practice reinforces the importance of PREA training and always knowing the PREA policy and procedure. The auditor also reviewed some the the training curriculum and was impressed by the material.

Because GEO consistently provides a very high quality of training on several levels and all employees understand the company's Zero Tolerance Policy, and how to report and respond to allegations of sexual abuse or sexual harassment, the auditor finds the RCI exceeds the requirements of the standard.

§115.32 – Volunteer and Contractor Training

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

The auditor interviewed a volunteer and two contractors who confirmed that they had received PREA training. The volunteer reported that he received the training in a classroom setting. The contractor's PREA training included the online training. Training is provided as part of Pre-service Orientation and is required annually thereafter, by GEO policy. Training is a minimum of two-hours in length. The contractors included a part-time psychiatrist and a dental hygienist . The auditor also reviewed the written documentation that the contractors and volunteers sign that acknowledges that they have been given the training and

understand the GEO Zero Tolerance Policy, and know how to report an allegation. The auditor reviewed the PREA training curriculum for contractors and volunteers and was very impressed by the comprehensive PREA training that is provided to volunteers and contractors. GEO provides very comprehensive training for contractors and volunteers and for that reason, the auditor finds that RCI exceeds the requirements of the standard.

§115.33 – Inmate Education

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

Sixteen of the 17 inmates interviewed said they have received the PREA information during intake and from the inmate manual. Several inmates also said additional information, in more detail, was provided during Orientation. Numerous inmates said the information is provided in the PREA video which is shown during Orientation. Even the one inmate who did not remember the training described how he would report an allegation of sexual abuse or sexual harassment and saw the posters throughout the facility.

The eight-page manual, that is the foundation of the "PREA Comprehensive Offender Education," begins with a Safety Message from the GEO Group. The document then provides definitions of PREA terms, GEO's Zero Tolerance Policy, inmates' rights to be free from sexual abuse and sexual harassment, informs the reader about how to prevent sexual assault/abuse/harassment, describes ways to report sexual abuse or sexual harassment, and the services that are available to the victim of sexual abuse or sexual harassment. The inmate is also informed about what will happen when he reports an allegation of sexual abuse or sexual harassment and the investigation protocols that will be followed. The inmate is also advised that designated staff will monitor victims for retaliation, following an allegation of sexual abuse.

The Inmate Handbook also has a very well written and detailed PREA section that is written at a level that is easily understood. The Handbook is in English and Spanish. In addition to other information, the Handbook explains how inmates can report sexual abuse and sexual harassment in a confidential manner and provides contact information for the victim's advocacy agency/rape crisis center, and states that calls to the victim's agency or to other agencies to report sexual abuse will not be monitored.

The brochure, *Sexual Assault Awareness Program. Offender Guide on Prevention and Reporting of Sexual Abuse and Sexual Harrassment,* also given to the inmates, provides comprehensive PREA information.

As previously mentioned, PREA signage that informs inmates how to report any allegation of sexual abuse or sexual harassment and how to ask for emotional support is visible throughout the facility. The signs include address and phone contact information. The signs are in English and Spanish.

The GEO Group has a very comprehensive inmate education program and for this reason, the auditor finds the facility exceeds the standard.

§115.34 – Specialized Training: Investigations

$\ \square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

The auditor interviewed the Chief Investigators at RCI. The Chief Investigator confirmed that she and the other investigators (two SIS Techs) had received the specialized training and the training that is required for all facility staff.

The GEO PREA Coordinator completed the "Training for Trainers: Specialized Training: Investigating Sexual Abuse in Correctional Settings" course conducted by the Moss Group and created a very comprehensive training program for all GEO PREA investigators that includes techniques for interviewing sexual abuse and sexual harassment 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. If prosecution is indicated, the law enforcement agency that conducted the investigation will make the referral to the appropriate prosecutor. The auditor was very impressed by the thorough training the GEO investigators receive. The GEO investigator curriculum is implemented company-wide and is constantly being upgraded and improved.

A written exam, with 25 questions, insures the employees understand the material covered. The auditor reviewed the written documentation that acknowledged that six investigator staff at RCI received the specialized training and the PREA training required of all GEO institutional staff.

Given the very comprehensive scope of the investigator training and the number of investigators who completed the training, the auditor finds the facility exceeds the standard.

§115.35 – Specialized training: Medical and mental health care

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☐ Meets Standard (s	substantial co	ompliance; co	omplies in all materia	I ways with the standard
for the relevant revie	ew period)			

⋈ Exceeds Standard (substantially exceeds requirement of standard)

The Health Administrator and Psychologist confirmed that the medical and mental health staff receive specialized training, annually, from the GEO Group on how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. The PCM provided the auditor with the training documentation and written acknowledgements. The auditor reviewed the training curriculum and was impressed by its thoroughness. The fact that GEO provides this training to the medical and mental health providers on an annual basis is commendable. For these reasons, the auditor finds the facility exceeds the standard.

§115.41 – Screening for Risk of Victimization and Abusiveness

☐ Exceeds Standard (substantially)	exceeds requirement of standard)
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☐ Does Not Meet Standard (requires corrective action)

The GEO BOP PREA Risk Assessment is administered by the nurse and a counselor during the intake process. The nurse said that if the offender expresses any fears, she immediately notifies a Lieutenant who will meet with the offender. If the screening score identifies the inmate as being a potential victim or potential abuser, the nurse will refer the inmate to the Mental Health Unit for further evaluation.

The psychologists are responsible for doing the 30-day reassessment and any additional assessment that is conducted in response to an incident, referral, request or receipt of new information that impacts the inmate's risk of victimization or abusiveness. Following the audit, the PREA Coordinator clarified for the auditor that a reassessment, following a PREA incident, would be conducted by the psychologists using the PREA Mental Health Incident Report form. After the incident, the victim is automatically added to the "at risk" victim/abuser tracking log so they will be kept separate from any other potential abusers.

The auditor read the screening instrument and confirmed that it includes all the elements required by the standard.

The GEO procedures state that the GEO BOP PREA Risk Assessment instrument and all reassessments are maintained by the Mental Health staff and psychologists in confidential files and available only to designated/approved administrative staff on a need to know basis so sensitive information is not exploited by staff or other individuals.

Inmates are not disciplined for refusing to answer questions on the PREA Risk Assessment.

The auditor reviewed five offender files and reviewed documentation that the initial assessment was done during intake and a reassessment was completed within 30 days.

§115.42 – Use of Screening Information ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) The GEO Policy "3. Use of Screening Information" states that information gathered during the intake process, and during screening for risk of victimization and abusiveness, is used to determine housing, bed, education, program, and work assignments with the goal of protecting inmates who are at high risk of sexual victimization from being sexually abused or harassed. Housing and program assignments are made on a case-by-case basis by the counselor who is responsible for classification. RCI maintains a list of all offenders, by housing unit, who are identified as potential victims and possible predators. A transgender offender's own views with respect to his personal safety will be given serious consideration. Placement and programming assignments are assessed at least twice a year. The nurse said the transgender and intersex offenders are given the opportunity to shower separately from other offenders. The auditor reviewed 5 inmates' files and documentation confirmed the facility meets the requirements of the standard. There were no transgender or intersex inmates in the facility during the audit. §115.43 – Protective Custody ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) ☐ Not Applicable

GEO policy 5.1.2 A.3 states that inmates at high risk of victimization shall not be placed in involuntary segregration unless all other available housing alternatives have been considered

and determined to be unsuitable for the protection of the inmate. When inmates are place in segregrated housing, they are afforded the same rights, programs, services, and privileges that they would receive in the general population, when ever possible. RCI Policy 10.003 is consistent with the GEO policy.

The Warden told the auditor that involuntary segregation would be used to protect a vicitim of sexual abuse only as a last resort, and then for the shortest period of time possible. The PCM reported that during the audit period no inmates on the PREA High Risk Inmates Roster were involuntarily placed in the Restrictive Housing Unit (RHU) nor were any inmates involuntarily placed there because they were at high risk for victimization. The auditor reviewed the PREA High Risk Inmates Roster and confirmed what had been told to him.

§115.51 – Inmate Reporting

$\hfill \square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

GEO Policy 5.1.2 A requires that facilities provide multiple ways for inmates to report allegations of sexual abuse and sexual harassment. RCI Policy 10.003 states, "RCI provides multiple internal and external ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment , and staff neglect or violation of responsibilities that may have contributed to such incidents through internal grievance procedures, rape crisis center, and the rape crisis hotline."

RCI has posters (in English and Spanish) that are strategically placed throughout the facility that inform inmates of the GEO/RCI Zero Tolerance Policy and how to report sexual abuse and sexual harassment.

Inmates are also given PREA brochures. One is titled "Victim Information Guide" that provides the number for the 24-Hour Crisis Hotline (*4673 or the ROANOKE-CHOWAN SAFE *4357) and tells a victim what he should do if he is raped or sexually assaulted and what would be a victim's typical reactions after being sexually abused. RCI also has a brochure titled "Male Survivors of Sexual Assault" which informs the inmate what he should do if he is sexually abused, what are the special issues that are different for men, sexually transmitted diseases, and facts about men and rape.

The <u>Inmate Handbook</u> goes into great detail about how an inmate can protect himself against sexual abuse, ways an inmate can report sexual abuse or sexual harassment through the grievance procedure, by notifying the BOP Regional Director, by telling a staff member or

third party, or by calling the Crisis Hotline. The Handbook also informs the inmate of the address and phone number of agency the inmate can contact for emotional support. The handbook states, "This call is free and will not be monitored."

The auditor also reviewed the PREA Comprehensive Offender Education curriculum that explains specifically the many ways an inmate can report sexual abuse or sexual harassment.

During the random inmate interviews, inmates mentioned several ways they could report sexual abuse or sexual harassment. The majority said they would tell a staff member or write a grievance. Inmates are aware of the Sexual Abuse Hotline and the agencies they can call in the community to report sexual abuse. All the inmates acknowledged they have seen the PREA posters throughout the facility.

Random interviews with staff confirmed that the correctional officers and other non-security staff know that if they receive a report of a sexual abuse or sexual harassment in writing or verbally, they are to report it immediately and document all reports, including verbal reports.

Staff know they can privately report a sexual abuse or harassment by calling the GEO Corporate Office. Signs are posted throughout the facility that inform the employees how they can privately report sexual abuse or sexual harassment.

RCI has numerous ways inmates can report sexual abuse. The brochure "Male Survivors of Sexual Assault" is especially impressive. Because of the vast number of ways RCI enables inmates to report sexual abuse, the auditor finds the facility exceeds the requirements of the standard.

§115.52 – Exhaustion of Administrative Remedies

☐ Exceeds Standard (substantially exceeds requirement of standard)
$\ oxdot$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
CEO DDEA Policy 5.1.2 – A Exhaustion of Administrative Remodies and PCI Policy 12.006

GEO PREA Policy 5.1.2 – A, Exhaustion of Administrative Remedies and RCI Policy 12.006 provide for administrative remedies using the facility grievance procedure. The Offender Handbook also describes the procedures offenders should follow to report sexual abuse or sexual assault through the grievance procedure. The GEO policy and the RCI policy include the elements of the standard.

If an allegation of sexual abuse or sexual harassment is made through the grievance procedure or as an emergency grievance, the grievance coordinator will immediately refer

the matter to the facility investigators who will initiate an investigation. If the investigation is extended, the offender is notified in writing.

Offenders who were interviewed by the auditor stated they were aware the grievance procedure was a PREA reporting option.

§115.53 – Inmate Access to Outside Confidential Support Services

☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
GEO Policy 5.1.2-A and RCI Policy 10.003 address Outside Confidential Support Services and

ensure that the facility has a written agreement with a rape crisis center that will provide victim assistance and emotional support to an RCI inmate who is a victim of sexual abuse.

RCI has a written Memorandum of Understanding with the Hertford County ROANOKE-CHOWAN SAFE to provide emotional support services for victims of sexual abuse and sexual

Inmates are informed about their access to outside confidential support services through the PREA Comprehensive Offender Education program, the Inmate Handbook, several very informative brochures, and signage which is posted throughout the facility. The Crisis Hotline number and the address of the agency are in the materials. All the materials are easily understood and printed in both English and Spanish.

In interviewing the offenders, the auditor found that the majority of the offenders know there are services available in the community to help if an inmate is sexually abused, but only a few could name the agency that provides emotional support for victims of sexual abuse.

In spite of the fact that some offenders did not know the name of the Hertford County ROANOKE-CHOWAN SAFE, the auditor finds the facility meets the requirements of the standard.

§115.54 – Third-Party Reporting

harassment.

□ Exceeds Standard (substantially exceeds requirement of standard)
$\ \square$ Meets Standard (substantial compliance; complies in all material ways with the standard
for the relevant review period)

The GEO Group Web site provides considerable PREA information to offenders' family members, friends, attorneys, advocates, and others outside the facility and explains the procedures for reporting an allegation of sexual abuse or sexual harassment. The auditor found the GEO Web site easy to navigate. Information is also provided to visitors in the main entrance to the facility. The GEO PREA Policy and the RCI Policy also address third-party reporting procedures.

Because the PREA Web site is very informative and "user friendly," and because the inmates, who were randomly interviewed, were knowledgeable about third party reporting, the auditor found the facility exceeded the requirements of the standard.

§115.61 – Staff and Agency Reporting Duties

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Does Not Meet Standard (requires corrective action)

The GEO PREA Policy requires all staff, volunteers, and contractors to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and for staff not to reveal any information related to a sexual abuse report to anyone other than to the extent necessary. Staff, contractors, and volunteers must also report any retaliation against a staff member or inmate for reporting any sexual abuse or any staff negligence that may have contributed to a sexual abusue incident. Every staff member interviewed understood and spoke specifically about this procedure. Offender interviews supported the fact that offenders are also aware of the staff reporting and confidentiality requirements of sexual abuse and harassment allegations. The medical and mental health staff stated that they inform inmates of their mandatory duty to report any allegations of sexual abuse and sexual harassment. RCI staff know they can make referrals privately by calling the PREA Coordinator at the GEO Corporate Office. RCI also provided the auditor with the North Carolina statute that requires the mandatory reporting of all forms of elder abuse.

§115.62 – Agency Protection Duties

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- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

GEO PREA Policy 5.1.2-A and RCI Policy 10.003 specifically state that if an inmate is subject to a substantial risk of imminent sexual abuse, RCI staff shall take immediate action to protect the inmate.

Every RCI staff member interviewed stated that if he/she learns that an offender is subject to a substantial risk of imminent sexual abuse that it is GEO policy and RCI policy that the staff member take immediate steps to protect the offender and notify the appropriate supervisor. All the staff reported that the first step would be to protect the inmate and separate him from the threat. The Warden stated that in the last three years, there have been no incidents involving any inmate being at substantial risk of imminent sexual abuse.

§115.63 – Reporting to Other Confinement Facilities

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

GEO PREA Policy 5.1.2-A states that if an inmate reports an allegation of sexual abuse that occurred at another facility, the warden of the facility where the allegation was made must report the allegation to the warden of the facility where the sexual abuse allegedly happened. The notification must happen within 72 of learning of the allegation.

RCI provided five reports where inmates alleged being sexually abused in another facility. The reports included the documentation that the warden (or in one case his designee) made the report to the other facility within in 72 hours.

§115.64 – Staff First Responder Duties

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Does Not Meet Standard (requires corrective action)

GEO PREA Policy 5.1.2-A adheres to all the requirements of this standard. All randomly selected staff, interviewed by the auditor, described in detail how they would react as first responders in the event of a sexual abuse allegation. All staff reported that they have received training on what to do if they are a first responder. The staff also noted there is a PREA Incident Checklist for Incidents of Sexual Abuse and Harassmet that the first responder carries on the badge chain. They said they would always refer to the checklist to ensure all steps were completed and documented, as required.

In reviewing five (5) investigations of alleged sexual abuse, the auditor found documentation that established the staff at the RCI understand and perform the responsibilities of a first responder.

§115.65 – Coordinated Response

☐ Exceeds Standard (substantially exceeds requirement of standard)
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☐ Does Not Meet Standard (requires corrective action)

GEO PREA Policy 5.1.2 - A requires that each facility have a coordinated response plan that describes how staff will respond to an allegation of sexual abuse.

The RCI has a written PREA Sexual Assualt Response Team Protocol that describes the duties and responsibilities of the various staff and departments that will be involved in responding to an allegation of sexual abuse. The areas include first responder duties, supervisory staff responsibilities, health care responsibilities, mental health responsibilities, investigative staff responsibilities and security staff responsibilities that ensure evidence is not compromised and the crime scene is protected. The coordinated response plan is reviewed annually, updated when necessary, and meets the requirements of the standard.

The auditor recommends that the facility provide annual training on the specifics of the plan for all those who may be involved in responding to an allegation of sexual abuse, including one or more shift commanders, the health care providers, the Licensed Mental Health Clinician/PREA Compliance Manager, the RCI investigators, the law enforcement, and the Hertford County ROANOKE-CHOWAN SAFE. It is critical that all the parties involved in the response to an investigation of a sexual abuse be fully aware of what each member's duties are on the Response Team to prevent missteps.

§115.66 – Preservation of ability to protect inmates from contact with abusers

☐ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill\square$ 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
GEO employees at RCI are not covered by a collective bargaining agreement and therefore the auditor finds that this standard is not applicable.

However, GEO Policy 5.1.2 – A requires that any employee who is the subject of a staff on inmate sexual abuse or sexual harassment investigation be separated from the inmate who is the alleged victim.

RCI provided documentation that staff have been reassigned to different posts pending the outcome of an investigation into allegations the employee sexually abused or sexually harassed an inmate.

§115.67 – Agency protection against retaliation

☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
GEO PREA Policy 5.1.2 – A establishes the company's requirements for monitoring retaliation

that may be directed at an inmate or a staff member who reported an allegation of sexual abuse. The policy follows the requirements of the standard at every level.

RCI Policy 10.003 also addresses retaliation and states that the PREA Compliance manger and a clinical psychologist are the staff designated to monitor for retaliation that may be directed at an inmate or a staff member who reported sexual abuse or sexual harassment. The Human Resources Office at the RCI will assist in monitoring for any retaliation that is directed toward a staff member.

The psychologist told the auditor that he and the PREA Compliance Manager check the inmate's files and meet with the inmate on a regular schedule to identify any issues with other inmates or staff and to check on disciplinary reports, grievances, and housing and program changes. Any issues are noted in a retaliation log book. If there is an issue of retaliation, the victim/inmate can be moved to another unit or given a different program. The inmate will also be provided emotional support either through the crisis center or through the mental health professionals in RCI.

The GEO Policy 5.1.2 – A, section 2, Protection Against Retaliation, paragraphs "h." and "i." state, "h. For at least 90 days following a report of Staff Sexual Misconduct (abuse or harassment) by another Employee, the Facility Human Resources Staff or Facility Investigator as designated by the Facility Administrator shall monitor the conduct and treatment of the Employee who reported the Staff Sexual Misconduct (abuse or harassment) or Employee Witnesses who cooperate with these investigations to see if there are changes that may suggest possible retaliaition by others, and shall act promptly to remedy such retaliation. Monitoring shall terminate if the allegation is determined unfounded.

"i. Designated staff shall meet every 30 days for 90 days with employees in private to ensure that sensitive information is not exploited by staff or others and to see if any issues exist.

The Employee Assistance Program (EAP) may also be offered for emotional support services for Employees who fear retaliation."

In reviewing the investigations, the auditor found that in every sexual abuse and sexual harassment investigation that was conducted there was documentation that the inmate was monitored for retaliation.

There have been no allegations of retaliation directed toward a staff member at the facility since the last PREA Audit.

§115.68 – Post-Allegation Protective Custody

☐ Exceeds Standard (substa)	intially exceeds rec	guirement of	standard
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☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

The GEO PREA Policy and the RCI PREA Policy state that any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of 115. 43. The RCI policy states that inmates will have access to books and other program resources to the extent that they can be provided consistent with institutional security. Inmate/vicitims will have the same rights as an inmate in protective custody.

The auditor reviewed two reports that documented two cases in 2015 in which two different inmates who reported being sexually abused, were placed in segregrated housing for their their own protection. In both cases there was documentation that the inmates were monitored for retaliation. In addition, the inmates had some time out of their cells for recreation and other activities. In both cases the inmates were released from segregrated housing in less than 30 days. There were no inmates placed in segregated housing for protection following an allegation of sexual abuse in 2016 or 2017.

§115.71 – Criminal and Administrative Agency Investigations

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 \boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

GEO PREA Policy 5.1.2-E. B Investigations address the protocols that are to be followed when conducting administrative investigations regarding allegations of sexual abuse. RCI Policy 10.003 also addresses investigations. Investigators interview the victim and any witnesses who may have relevant information. Physical evidence is secured for law

enforcement. Video recordings, phone call monitoring, and inmate records are reviewed. The credibility of the alleged victim, the alleged abuser, and any witnesses is determined on a case-by-case basis. The inmate making the allegation will not be subjected to a polygraph exam.

If RCI investigators substantiate an allegation of sexual abuse and a criminal investigation is warranted the Hertford County Sheriff's Office and/or the FBI will be notified. The Sheriff's Office and FBI will determine if the matter should be referred for prosecution. RCI also notifies the BOP Office of Internal Affairs and the Office of the Inspector General. RCI also notifies the GEO PREA Coordinator and the Office of Professional Responsibility.

As previously written, the auditor and the investigator reviewed 17 investigation files regarding allegations that were made in 2016. Of the 17 investigations, three (3) were allegations of inmate-on-inmate sexual harassment. Two (2) of the allegations were unsubstantiated and one was unfounded. Six (6) of the allegations were for staff-on-inmate sexual harassment. Two (2) of the allegations were unsubstantiated and one (1) was unfounded, and three (3) are still pending a final disposition. Two (2) of the allegations were for inmate-on-inmate sexual abuse. Of these one (1) was unsubstantiated. The second was an allegation that came from another facility without enough information to make a thorough investigation leading to a finding. The auditor reported the finding as "unknown." Five (5) allegations were for staff-on-inmate sexual abuse. Of these five (5) allegations, one (1) was unsubstantiated, three (3) were unfounded, and one was still pending. The final investigation that was reviewed was for an allegation of retaliation for reporting a PREA incident. That investigation is on-going, although the resident has been moved.

The auditor found that all the investigations were conducted in a professional way. The time to complete an investigatgion started out as a long period (12 months or more) but greatly improved over time. At the end of 2016, the average time to complete the investigation was 5.5 months. The investigations showed that Incident Review Team Meetings were conducted in all the completed investigations, except those that were determined to be unfounded. In every case, there was documentation that the inmate was being monitored for retaliation. None of the inmates were infomed about the outcome of their allegagtions because in every case where the investigation was completed, the inmate had been released or transferred. Given the various levels within the corporation and the BOP that review allegations and investigations, the time it takes to completely finish an investigation does not seem unreasonable.

§115.72 – Evidentiary Standard for Administrative Investigations

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

The GEO Policy 5.1.2 —E states, "Facilities shall impose no standard higher than a preponderance of the evidence in determining whether allegations of Sexual Abuse or Sexual Harassment are Substantiated."

In reviewing the investigation reports, the auditor found that the "preponderance of the evidence" standard is used to determine if an allegation is substantiated.

§115.73 – Reporting to Inmate

- ☐ 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)

GEO PREA Policy 5.1.2 – E states:

- K. "Reporting to Individuals in a GEO Facility or Program (§115.73/§115.273/§115.373)
 - I. At the conclusion of an investigation, the facility investigator or staff member designated by the Facility Administrator shall inform the victim of Sexual Abuse in writing, whether the allegation has been: Substantiated, Unsubstantiated or Unfounded.
 - 2. If the alleged abuser was an Employee, the victim shall also be informed whenever:
 a) The Employee is no longer posted within the victim's housing unit/area.

 - b) The Employee is no longer employed at the facility;
 - c) The facility learns that the Employee has been indicted on a charge related to the Sexual Abuse within the facility; or,
 - d) The facility learns that the Employee has been convicted on a charge related to Sexual Abuse within the facility.
 - 3. If the alleged abuser was another Individual in a GEO Facility or Program, the victim shall also be informed whenever:
 - a) The facility learns that the alleged abuser has been indicted on a charge related to Sexual Abuse within the facility; or,
 - b) The facility learns that the alleged abuser has been convicted on a charge related to Sexual Abuse within the facility.

Note: Items (b) and (c) arc not required for allegations determined Unfounded.

- 4. The individual shall receive the original completed "Notification of Outcome of Allegation" form (see attachment D) in a timely manner and a copy of the form shall be retained as part of the investigative file.
- 5. The individual will be provided an updated notification at the conclusion of a criminal proceeding, if the individual is still in custody at the facility
- 6. The facility's obligation to report under this section shall terminate if the individual is released from custody.
- 7. If the facility did not conduct the investigation, it shall request the relevant information from the investigating agency in order to inform the individual.

8. At the conclusion of every investigation of Sexual Abuse, the written results shall be promptly forwarded to the Corporate PREA Coordinator for review."

As stated in the GEO Policy, RCI uses the "Notification of Outcome of Allegation" form that is provided to the offender that informs the offender of the outcome of the investigation and any action taken against the abuser. The practice of RIC is to inform the inmate of the outcome of any PREA investigation, be it an allegation of sexual abuse or sexual harassment. Of the 17 PREA investigations that the auditor reviewed, in only one case was the inmate informed. In nine of the investigations the inmate had been transferred or released before the investigation was completed. Five of the investigations were on-going, and in two of the investigations notification was not applicable because the offender either reported an abuse at another facility or the offender reported an allegation regarding sexual abuse or sexual harassment at RIC, but the inmate was no longer in GEO custody.

§115.76 – Disciplinary sanctions for staff

□ Exceeds Standard	(substantially	exceeds rec	quirement	of standard))
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☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

The GEO PREA Policy 5.1.2 - E and RCI Policy 03.009 strictly probibit any sexual contact or misconduct between staff and inmates and state that termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. The policies also state that any violation of the sexual abuse and sexual harassment policies shall be subject to disciplinary sanctions up to and including termination. Terminations, or resignations of staff who would have been terminated if not for the resignation, will be reported to law enforcement, unless the activity was clearly not criminal, and to any relevant licensing bodies.

The GEO Employee Handbook states:

"Sexual Abuse and Sexual Harassment - GEO has a zero tolerance for sexual abuse or sexual harassment of any individual lawfully housed in a GEO facility or otherwise served by GEO. Therefore, sexual abuse or sexual harassment of any individual lawfully housed in a GEO facility or program or otherwise served by GEO is strictly prohibited and will not be tolerated. Unwelcome sexual advances, request for sexual favors, and other verbal or physical contact of a sexual nature with any individual lawfully housed in a GEO facility or otherwise served by GEO will subject you to immediate disciplinary action up to and including tennination."

The Superintendent reported that no employees have been terminated for sexual abuse involving an offender. There have been no substantiated cases of staff on inmate sexual abuse.

§115.77 – Corrective action for contractors and volunteers

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Does Not Meet Standard (requires corrective action)

The GEO PREA Policy 5.2.1-E meets all the requirements of the standard. The policy states:

- a. "Any Contractor or Volunteer who engages in Sexual Abuse or Sexual Harassment shall be prohibited from contact with Individuals in a GEO Facility or Program and shall be reported to law enforcement and relevant licensing bodies, tmlcss the activity was clearly not criminal.
- b. In the case of any other violation of GEO Sexual Abuse or Sexual Harassment policies by the Contractor or Volunteer, the facility shall notify the applicable CEO Contracting Authority who will take remedial measures, and shall consider whether to prohibit further contact with the Individuals in a GEO Facility or Program."

The Warden reported that there have been no allegations of sexual abuse by contractors or volunteers during this Aduit Cycle.

§115.78 – Disciplinary sanctions for inmates

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Does Not Meet Standard (requires corrective action)

The GEO PREA Policy 5.2.1- E meets all the requirements of the standard. Offenders cannot be disciplined for making an allegation of sexual abuse or sexual harassment, unless it is determined that the allegation was made in bad faith with an employee when it is shown the staff member did not consent to such contact. The policy is stated as follows:

- 2. "Individuals In a GEO Fadlity or Program Disciplinary Sanctions (§115.78/§115.278)
 - a. Individuals in a GEO Facility or Program who were found guilty of engaging in Sexual Abuse involving other Individuals in a GEO Facility or Program (either through administrative or criminal investigations) shall be subject to formal disciplinary sanctions.
 - b. Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the individual's disciplinary history, and the sanctions imposed for comparable offenses by other individuals with similar histories.
 - c. The disciplinary process shall consider whether an individual's mental disabilities or mental illness contributed to his or her behavior when

- determining what type of sanction, if any should be imposed.
- d. If the facility offers counseling or other interventions designed to address the reasons or motivations for the abuse, the facility shall consider requiring the offending individual to participate.
- e. Disciplining an Individual in a GEO Facility or Program for sexual contact with an Employee is prohibited unless it is found that the Employee did not consent to the contact.
- f. A report of Sexual Abuse made in good faith by an Individual in a GEO Facility or Program, based upon a reasonable belief that the alleged conduct occurred, will not constitute false reporting or lying.
- g. Facilities may not deem that Sexual Activity between Individuals in a GEO Facility or Program is Sexual Abuse unless it is determined that the activity was co erced.
- h. The PREA Compliance Manager shall receive copies of all disciplinary reports regarding Sexual Activity and Sexual Abuse for monitoring purposes.
- i. The incident shall be reported to law enforcement, unless the activitywas clearly not criminal."

The auditor also reviewed the Inmate Handbook that described the disciplinary procedures for sexual abuse and sexual harassment.

§115.81 – Medical and mental health screenings; history of sexual abuse

☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
GEO PREA Policy 5.1.2-A meets all the requirements of the standard. RCI Policy 10.003 also address the standard and states.:

- "If the screening indicates that a prison inmate has experienced prior sexual victimization whether it occurred in an institutional setting or in the community. staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within fourteen (14) days of the intake screening.
- 2. If the screening indicates that a prison inmate has previously perpetrated sexual abuse. whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within fourteen (14) days of the intake screening.
- 3. If the screening indicates that an inmate coming from a jail has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate

- is offered a follow-up meeting with a medical or mental health practitioner within fourteen (14) days of the intake screening.
- 4. Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary. to inform treatment plans and security and management decisions, including housing, bed, work, education. and program assignments, or as otherwise-required by Federa, I State, or local law.
- 5. Medical and Mental Health Practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the- inmate is under the age of eighteen (18)"

The auditor reviewed five offender files and confirmed that the Psychological Services Inmate Questionnaire, the PREA Screening, and the Mental Health Evaluations are documented as required. As previously stated, the initial screening is done by the counselor and nurse. If the inmate reported being sexually abused or sexually abusing someone else, the inmate would be referred to the psychologist for a follow-up mental health evaluation within 14 days. These meetings are documented in the Mental Health Evaluation.

The Health Administrator, the nurse, and the psychologist all stated they do obtain informed consent from offenders before reporting about prior sexual victimization that did not occur within an institutional setting. They also inform the offenders that they are mandatory reporters.

The Health Administrator and the Mental Health Clinician both stated that information is confidential and shared only with other staff on a "need-to-know" basis. The information is maintained in the mental health offices.

§115.82 – Access to emergency medical and mental health services

 □ Exceeds Standard (substantially exceeds requirement of standard)
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□ Does Not Meet Standard (requires corrective action)
The GEO PREA Policy 5.2.1-A states:

- "7. Access to Emergency Medical and Mental Health Services (§115.82/§115.282) a. Victims of Sexual Abuse in custody shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services as directed by Medical and Mental Health Practitioners. Community Confinement Facilities shall utilize local community Facilities to provide emergency medical treatment and crisis intervention.
- b. This access includes offering timely information about and timely

access to emergency contraception and sexually transmitted infections prophylaxis, where medically appropriate. All services shall be provided without financial cost to the victim and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

- c. No attempt will be made by Facility medical sta ff to clean or treat the victim unless the injuries are such that not treating them would cause deterioration of the victim's medical condition; however, visible injuries shall be documented both photographic ally and in writing, and placed in the victim's medical record.
- d. Facility Medical staff shall not participate in sexual assault forensic medical examinations or evidence gathering. Victims/Abusers shall either be transported to a local community Facility for examination by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assa ult Nurse Examiner (SANE) or one shall be brought into the Facility to conduct the examination. All refusals of medical services shall be documented."

RCI Policy 10.003 follows the GEO policy and also meets all the requirements of the standard. In the interview with the Health Administrator she stated that a victim of a sexual assault would be taken to the Southampton Memorial Hospital for a forensic exam. The Health Administrator said GEO/RCI has a Memorandum of Understanding with Southampton Memorial Hospital in Franklin, Virginia to provide forensic exams for victims of sexual abuse in the facility. She also stated that offenders would be offered information and timely access to emergency sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. There are no female inmates in this facility.

Treatment services are provided to victims of sexual abuse at no cost to the offender regardless of whether the victim names the abuser or cooperates in the investigation. The warden reported that during this audit cycle there have been no incidents of sexual abuse that required emergency medical or crisis intervention services.

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

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

GEO PREA Policy 5.1.2 – A states:

- N. "Ongoing Actions After Reports of Sexual Abuse
 - 1. Ongoing Medical and Mental Health Care (§J15.83/§115.283)
 - a. Each Facility shall offer medical and mental health evaluations (and treatment where appropriate) to all victims of Sexual Abuse that occurs in any prison, jail, lockup, or juvenile facility.
 - b. The evaluation and treatment should include follow-up services, treatment plans, and (when necessary) referrals for continued care following a transfer or release.
 - c. These services shall be provided in a manner that is consistent with the level of care the individual would receive in the community and include pregnancy tests and all lawful pregnancy-related medical services where applicable.
 - d. Victims shall also be offered tests for sexually transmitted infections as medically appropriate. All services shall be provided without financial cost to the victim.
 - e. The Facility shall attempt to conduct a mental health evaluation on all known inmate on inmate or resident on resident abuse rs within 60 days of learning of such abuse history and offer treatment deemed approp riate by Mental Health Practitioners. Note: "known abusers" are those inmate or resident abusers in which a PREA investigation determined either administratively substantiated or substantiated by outside law enforcement."

The Health Services Administrator and the psychologist both said the level of care provided to the offenders in the RCI is better than the community level of care. Every inmate is seen by a member of the mental health team within 14 days of admission. The Health Services Administrator said that the evaluation and treatment of a victim of sexual abuse would involve an initial immediate assessment by an R.N. with immediate services to follow. When necessary, the inmate would be transferred to Southampton Hospital in Franklin, Virginia. The psychologist said a victim of sexual abuse would be seen as quickly as possible and offered counseling and, if needed, on-going basic therapy.

Paragraph (e) of 115.83 is Not Applicable since this is an all-male facility.

§115.86 - Sexual abuse incident reviews

☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

GEO Policy 5.1.2 – A states:

- 3. Sexual Abuse Incident Reviews (§115.86/§115.286)
 - a. "Facilities are required to conduct a Sexual Abuse incident review at the conclusion of Every Sexual Abuse investigation in which the allegation has been determined substantiated or unsubstantiated.
 - b. Such review shall occur within 30 days of the conclusion of the investigation. The review team shall consist of upper-level management officials and the local PREA Compliance Manager, with input from line supervisors, investigators and Medical or Mental Health Practitioners. The Corporate PREA Coordinator may be consulted as part of this review.
 - c. Unless mandated by client contract, a "PREA After Action Review Report (see Attachment J)" of the team's findings shall be completed and submitted to the Corporate PREA Coordinator no later than 10 working days after the review. The Facility shall implement the recommendations for improvement, or document its reasons for not doing so.
 - d. The PREA Compliance Manager shall maintain copies of all completed "PREA After Action Review Reports" and a copy shall also be maintained in the corresponding investigative file."

The RCI Incident Review Team members include the Warden, two Assistant Wardens, the Special Investigator Supervisor, a Special Investigator Technician, the Health Services Administrator, the Chief Psychologist/PCM, a Major, and the Human Resources Manager.

Of the 17 investigations reviewed by the auditor, six (6) had Incident Review Team meetings and PREA After Action Review Reports. The other allegations were either unfounded, the investigation was on-going, or the allegation was made regarding an incident at another facility. The auditor found the PREA After Action Review Reports were well written and provided considerable detail. It was clear in each report that the team considered the five (5) provisions that are noted in the standard.

§115.87 – Data Collection

□ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill\square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
The GEO PREA Policy 5.1.2 - A requires the following:
Data Collection (§115.87/§IIS.287)

- a. "Each Facility shall collect and retain data related to Sexual Abuse as directed by the Corporate PREA Coordinator.
- b. This data shall be aggregated at least annually and is required to include, at a minimum, the data necessary to answer all questions on the most recent version of the Survey of Sexual Violence conducted by the Bureau of Justice Statistics (BJS).
- c. Upon request, GEO shall provide such data from the previous calendar

- year to the Department of Justice no later than June 30.
- d. Facility PREA Compliance Managers shall be responsible for compiling data collected on Sexual Activity, Sexual Harassment and Sexual Abuse incidents and fotwarding statistical reports to the Corporate PREA Coordinator on a monthly basis. ("Monthly PREA Incident Tracking Log", see Attachment K).
- e. In addition to submitting the Monthly PREA Incident Tracking Log, PREA Compliance Managers will ensure that a PREA Survey is created, updated and submitted for review and approval in the PREA Portal for every allegation of Sexual Abuse, Sexual Harassment and Sexual Activity as required."

Data is collected on every allegation of sexual abuse and sexual harassment at the RCI. The PREA Compliance Manager is responsible for collecting and organizing the data. Information is provided to the PREA Compliance Manager primarily from the institution investigators. Data is forwarded to the PREA Coordinator in the GEO Corporate Office where it is collected and aggregated for all the company's facilities.

GEO exceeds the standard in the organized way it goes about collecting PREA data, doing an analysis of the data, and making changes in systems or physical plants, based on the data. GEO uses this information and data to make informed decisions to improve sexual safety throughout all of its facilities. For this reason, the auditor finds that RCI exceeds the requirements of this standard.

§115.88 – Data Review for Corrective Action

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

As previously stated, the GEO PREA Policy 5.2.1-A requires the RCI to review the data collected regarding sexual abuse and sexual harassment allegations to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; and to identify problem areas and take corrective actions.

The GEO Group 2016 Annual PREA Report is a very comprehensive 15-page report that has numerous data points and areas of information regarding sexual abuse and sexual harassment. The 2016 Annual Report is available on the GEO Group Web site.

As previously noted, GEO exceeds the standard in the organized way it goes about collecting PREA data, doing an analysis of the data, and making changes in systems or physical plants, based on the data. GEO uses its Annual Report to track vital information and to make informed decisions to improve sexual safety throughout all of its facilities. For this reason, the auditor finds that RCI exceeds the requirements of this standard.

§§115.89 – Data Storage, Publication, and Destruction
☐ Exceeds Standard (substantially exceeds requirement of standard)
$\ oxdot$ Meets Standard (substantial compliance; complies in all material ways with the standard
□ Does Not Meet Standard (requires corrective action)
The GEO PREA Policy 5.2.1-A states: "Storage, Publication, and Destruction Data collected pursuant to this procedure shall be securely retained for at least IO years or longer if required by state statute. Before making aggregated Sexual Abuse data publicly available, all personal identifiers shall be removed."
The PCM at the RCI is responsible for the maintenance and secure storage of PREA data. Access to data is tightly controlled. The GEO Group PREA Policy requires that data be retained for at least 10 years.
AUDITOR CERTIFICATION:
The auditor certifies that the contents of the report are accurate to the best of his knowledge and no conflict of interest exists with respect to his ability to conduct an audit of the agency under review. The auditor finds that as of August 15, 2017, the Rivers Correctional Institution meets the requirements of the Prison Rape Elimination Act, Prison and Jail Standards.
Charles Charles
June 8, 2018

Date

Auditor Signature