

PREA AUDIT: AUDITOR'S FINAL REPORT JUVENILE FACILITIES



Name of Facility: Abraxas Ohio Residential Treatment			
Physical Address: 2775 State Route 39, Shelby, OH 44875			
Date report submitted: May 12, 2019			
Auditor information: Charles J. Kehoe			
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Telephone number: (804) 873-4949			
Date of facility visit: June 7 - 9, 2017			
Facility Information			
Facility Mailing Address: <i>(if different from above)</i>			
Telephone Number: (210) 568-8600			
The Facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> XX Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Detention (Juvenile)	<input type="checkbox"/> Correction	<input checked="" type="checkbox"/> XX Other: Juvenile Residential Treatment Center
Name of PREA Compliance Manager: Amy Close		Title:	PCM/QCS
Email Address: aclose@abraxasyfs.com		Telephone Number:	419-747-0826
Agency Information			
Name of Agency: The GEO Group, Inc.			
Governing Authority or Parent Agency: <i>(if applicable)</i>			
Physical Address: One Park Place, Suite 700, 621 Northwest 53 rd Street, Boca Raton, FL 33487			
Mailing Address: <i>(if different from above)</i>			
Telephone Number: 561-999-5827			
Agency Chief Executive Officer			
Name: George C. Zoley	Title:	Chairman of the Board and CEO	
Email Address: gzoley@geogroup.com	Telephone Number:	561-893-0101	
Agency Wide PREA Coordinator			
Name: Phebia Moreland	Title:	Director of Contract Compliance and PC	
Email Address: pmoreland@geogroup.com	Telephone Number:	561-999-5827	

AUDIT FINDINGS

NARRATIVE:

The PREA audit of the Abraxas Ohio, operated by Abraxas, The GEO Group Inc., was conducted from June 7 - 9, 2017 in Shelby, Ohio. The Designated Auditor was Charles J. Kehoe of Midlothian, Virginia.

The auditor wishes to extend his deepest appreciation to the GEO Group Administrator for Juvenile Services, Jon Swatsburg; GEO Group Director of Contract Compliance and PREA Coordinator, Phebia Moreland; Abraxas Director of Quality, Compliance, and Research, Dr. Danny Cole; Manager of Quality Compliance, Boris Gregoriev; Abraxas Ohio Director; Bruce Tessena; Abraxas Ohio Facility Director, Erich Dumbeck; Abraxas Ohio PREA Compliance Manager/Quality Compliance Specialist, Amy Close; and all the employees of Abraxas Ohio for their professionalism, hospitality, and kindness.

The PREA Coordinator mailed the agency's PREA policies and procedures, related documentation, and the Pre-Audit Questionnaire to the designated auditor several weeks before the audit.

The auditor contacted Just Detention International to inquire if that agency had received any information regarding Abraxas Ohio. A check of their records showed no correspondence on file regarding the agency.

Dr. Cole, Mr. Gregoriev and the auditor were staying in Mansfield, Ohio and drove to the facility on Wednesday, June 7, 2017. They arrived at the facility at 7:50 a.m. and were met by Mr. Dumbeck, Mr. Tessena, and Ms. Close.

An Entrance Meeting was held at 8:00 a.m. with three (3) members of the Abraxas Ohio administrative team present, Mr. Dumbeck, Ms. Close, and the Human Resources Generalist, Ms. Beth Hann, as well as Dr. Cole, Mr. Gregorier, and Mr. Tessena. Dr. Cole and Mr. Dumbeck welcomed the auditor and provided an overview of the facility. The auditor thanked the GEO PREA Coordinator and the Abraxas/GEO leadership team for being involved in the PREA certification process. The auditor said he has audited several Abraxas programs is always impressed with the services Abraxas provides to its residents and their families. He then reviewed the audit process, and the audit schedule. The PCM provided the auditor with the lists of employees and residents from which the auditor selected random staff and residents for interviews. The lists of specialized staff and youth in targeted categories were also provided and discussed and specialized staff and targeted residents were also identified for interviews. The Entrance Meeting ended at 9:45 a.m.

The site review of the facility began at 10:00 a.m. Accompanying the auditor on the tour were Dr. Cole, Mr. Gregorier, Mr. Dumbeck, and Ms. Close. All areas, inside and outside, where residents have access were reviewed.

Abraxas Ohio is a staff-secure 100-bed residential treatment program for adolescent males, located on over 80 acres outside the town of Shelby, Ohio. The original facility was constructed in the late 1880s. Abraxas began operations there in 1993. All of the programs and services are provided out of the main building. These include the administrative offices, the admissions offices, health care offices and exam rooms, the education department/school, indoor recreation area/gym, employee training rooms, and resident housing.

The first day of the audit, there were 64 male residents in the program. This was the lowest the population had been in the previous 12 months. During the 12 months before the audit, the average population count ranged from a high of 99 in January of 2017 to a low of 64 in June of 2017. The average length of stay (ALS) varies by program. The ALS for juvenile sex offenders is

nine to 12 months. For residents committed to the alcohol and drug treatment program, the ALS is three to four months.

Four of the facility's five living units were occupied on the first day of the audit.

The First Floor includes the North Hall, which had eight rooms, 18 beds, and 10 residents. Of the eight rooms, two rooms have four beds each, four rooms have two beds each, and two rooms were single occupancy.

South Hall had seven rooms, 17 beds, and 14 residents. Of the seven rooms, one had four beds, one had three beds, four had two beds, and one was single occupancy.

The Second Floor had 18 rooms, 36 beds, and 30 residents. Of the 18 rooms, one had four beds, 15 had two beds and two were single occupancy.

Residents in the alcohol and drug treatment Program are housed on the First Floor, North and South Halls and on the Second Floor.

The Third Floor, South Hall, had ten rooms. All were single occupancy. This living unit is the sex offender treatment.

The Third Floor, North Hall, was closed at the time of the audit because of the low population in the facility.

In summary, the facility currently utilizes 43 rooms, with 81 available beds, and is serving 64 residents.

The auditor observed the audit notice throughout the facility, as well as posters that informed residents how to report an allegation of sexual abuse or sexual harassment and where a victim of sexual abuse can obtain emotional support. Signage was bilingual. If residents wish to report an allegation of sexual abuse or sexual harassment by phone, they would make the call from a staff office, with a staff member dialing the number to either report an allegation of sexual abuse or sexual harassment or to request emotional support from the victims support agency.

Abraxas Ohio has 68 cameras that record activities and movements throughout the facility. Twenty-seven additional cameras had been added since 2014; the storage capacity is six weeks. The Facility Director said the plan is to increase storage capacity to 3 to 4 months in the future and to add 10 additional cameras. On the last day of the audit, the auditor viewed video from the past several days. The video cameras are motion activated. Cameras do not cover toilet or shower areas. There is no control room in Abraxas Ohio, so no one is monitoring the cameras, but cameras are recording. The Facility Director said the clarity of the cameras will improve with the upgrades of cameras. Residents and staff are easily identified on the video.

The facility is budgeted for an average daily population of 96 residents. The administrator reported that on the first day of the audit there were 131.3 authorized positions, 113.3 filled positions, and 17.5 vacancies. Given that the facility was operating at 66.6% of capacity, the staffing levels still exceeded the ratios required by the standards.

Abraxas Ohio is accredited by The Joint Commission and certified by the State of Ohio Department of Mental Health and Addiction Services for Residential Programs and Outpatient Treatment Services and certified by the Ohio Department of Youth Services to provide assessment, treatment, and transitional services to juvenile sex offenders.

The site review ended at 11:26 a.m.

Following the site review, the auditor began the interviews.

Twelve residents were selected for random interviews. Eight residents were also interviewed who were identified in the targeted categories. None of the residents currently in the facility had reported an allegation of sexual abuse in the facility. Three residents were interviewed who were developmentally disabled or had difficulty reading. One resident who identified as being bi-sexual was interviewed. Four residents were interviewed who disclosed prior sexual victimizations during risk screening.

Interviews with residents confirmed that they are well informed and educated on the agency's Zero Tolerance Policy and how to report sexual abuse or sexual harassment. Five of the residents said they were given their PREA Orientation during their van ride to the facility prior to admission. The other seven residents said they were given the PREA Orientation upon admission to the facility. A more detailed PREA Orientation is provided normally within 24 to 72 hours and includes specific information on resident's rights to be free from sexual abuse and sexual harassment, their rights to be free from retaliation for reporting, how to report sexual abuse or sexual harassment, and the various ways residents can report an allegation. Residents reported that the staff review the Abraxas Youth Safety Guide and the Resident Handbook during Orientation and are offered opportunities to ask questions regarding PREA. Residents are also given a pocket card with PREA information on it. Residents are aware of multiple ways to report sexual abuse and sexual harassment. Most of the residents are aware there is a service available in the community that provides emotional support to victims of sexual abuse. While most of the residents could not remember the agency name, they did say they could find the name and contact information on the posters that are placed throughout the facility and on their pocket cards, if they needed it. Residents said if they were going to report an allegation of sexual abuse to an outside agency that the staff would help them make the call using a phone in a private office. The staff member would dial the number for the resident. Eleven residents reported that they felt safe in this facility, one resident said he did not feel safe. The auditor discussed this case with the PCM since this was also a resident with an intellectual disability.

Ten staff were randomly selected by the auditor from all shifts and were interviewed. All of the staff were very knowledgeable about PREA, the standards, and the facility's PREA procedures. The staff reported that they have received the required basic PREA training and Booster training, annually. When asked about the training for Cross-Gender Pat-Down Searches and Searches of Transgender and Intersex Residents, the staff reported they had received training in how to conduct searches of transgender and intersex residents in a respectful and professional way and in the least intrusive manner possible, consistent with security needs. When asked to describe the procedure, staff described the process correctly. It is important to note that at this facility, Abraxas staff are not allowed to do pat down searches of residents. Every staff member interviewed said they know how to privately report an allegation of sexual abuse or sexual harassment.

Fifteen interviews were conducted with staff in 12 specialized areas and included the Facility Director, the PREA Compliance Manager, intermediate or higher level supervisor (2), medical and mental health professionals (2), The Human Resources Generalist, contractors (2), investigative staff, the staff member who Performs Screening for Risk of Victimization, Incident Review Team members (2), a Designated Staff Member Who Monitors for Retaliation, a non-security staff who could act as a first responder, and the Intake staff. Since this is a moderate sized facility, some staff may have multiple responsibilities and were interviewed more than once if their duties covered more than one specialized area.

In all, the auditor conducted 45 interviews during the Abraxas Ohio PREA audit.

Allegations of sexual abuse are investigated by the Richland County Sheriff's Office and Richland County Children Services. If the allegation involves an employee of Abraxas Ohio the matter is also referred to the GEO Office of Professional Responsibility.

The auditor reviewed two (2) PREA investigation files from 2015, four (4) from 2016, and two (2) from 2016. Six allegations alleged staff-on-resident sexual abuse. Of the two allegations reported in 2015, one was an allegation of staff-on-resident sexual abuse. Richland County Children Services reviewed the case and declined further investigation. The GEO Office of Professional Responsibility also investigated the allegation and said there was no finding against the staff member. The second allegation was resident-on-resident sexual abuse. Richland County Children Services reviewed the case and declined further investigation.

A staff-on-resident allegation that was reported in 2016 actually happened in 2008 and was investigated in 2008. A staff member was terminated. There were two other staff-on-resident sexual abuse allegations reported in 2016. The first allegation was made by another agency and alleged staff-on-resident sexual abuse. The other agency reported the allegation to The Richland County Sheriff's Office. At the time of the audit, the investigation was still listed as an "on-going investigation." In the second allegation, a resident sent a note to a staff member which was discovered by another staff member. The staff member was placed on leave and resigned a few weeks later. The GEO OPR referred the matter to the Richland County Sheriff's Office. At the time of the audit, the Sheriff's Office reported the investigation was still, "on-going." The fourth allegation in 2016 was an allegation of resident-on-resident sexual abuse. The Richland County Children Services received the allegation and reported it to Abraxas Ohio. Children Services reviewed the allegation and declined to investigate.

In 2017, there were two allegations of staff-on-resident sexual abuse. In one allegation, the GEO OPR investigation referred the case to the Richland County Children Services who reviewed the allegation and declined to investigate. The staff member continued working, but was placed on a supervision plan. The second allegation was referred to the Sheriff's Office and Richland County Children Services. Those investigations were "on-going," at the time of the audit.

The auditor reviewed five personnel files. Documents confirmed that employees acknowledged they have not been involved in behaviors listed in 115.317(a) (1), (2), (3). Employees had the appropriate criminal and child welfare background checks at least every five years. The files also contained documentation that the acknowledgements were signed during annual evaluation and at the time of promotions. Abraxas Ohio also documented that contractors who have contact with residents have the appropriate background checks. (There are no volunteers in this facility.) The auditor reviewed five training files from the random staff interviewed, one contractor's training file, and seven training files of individuals who required specialized training (one investigator and six medical and mental health practitioners). There was documentation that the named individuals received and understood the required basic PREA training and the specialized training.

Seven juvenile files were reviewed. Documentation was present that confirmed the residents had received PREA orientation and education, the screening for risk of sexual victimization and abusiveness, and reassessments every 90 to 120 days.

This facility does not have any isolation rooms. If a resident is acting out, staff use specific intervention strategies to deescalate and bring the resident's behavior under control and increase supervision, as needed.

The GEO Group does not contract with other facilities or with any other agencies or entities for the confinement of its residents.

An Exit Meeting was held on June 9, 2017 at 12:30 p.m. Three members of the Abraxas Ohio

administrative team were present (Erich Dumbeck, Amy Close, and Beth Hann) along with Phebia Moreland, Dr. Cole, Boris, Gregorier, and Bruce Tessena. The auditor thanked the leadership and staff of Abraxas Ohio and the leadership of GEO/Abraxas. The auditor gave an overview of the audit and stated there were only two standards that he needed to discuss with the PREA Director. One issue was training for cross-gender searches, 115.315 (f) and the other issue was related to 115.317 (f) and its applicability to contractors. The auditor stated the audit was very well organized and that it was obvious that Abraxas Ohio had incorporated the PREA Standards into the facility's operating procedures and organization.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Abraxas Ohio describes its program as follows:

"Services at Abraxas Ohio are strength-based and targeted toward achieving specific and measureable outcomes for each youth. Residents have complex treatment needs and many present with co-existing conditions such as mental illness and developmental disabilities in addition to substance abuse issues.

Most youth at Abraxas Ohio have a history of trauma and have experienced sexual or physical abuse, death of caregivers and chronic exposure to violence. Abraxas Ohio uses the Sanctuary Model for Trauma Informed Care as the framework for treatment. The Sanctuary Model is a blueprint for clinical and organizational change which, at its core, promotes safety and recovery from adversity through the active creation of a trauma-informed community."

Admissions Criteria

Abraxas Ohio works with young men between the ages of 12 and under 21 who have a mental health diagnosis and IQ functionally over 70 (under 70 will be considered on an individual basis). The program's focus is on youth who have substance abuse issues and/or a history of sexual offending or sexually abusive behavior. Residents are adjudicated dependent or delinquent offenders who can safely and effectively be managed and treatment in an open residential setting.

Programs

Drug and Alcohol Treatment Program – 90 beds

The Drug & Alcohol Treatment program offers short-term and long-term placement for delinquent and/or dependent males ages 12 to under 21 in need of drug and alcohol treatment or those in need of dual diagnosis services. Youth begin treatment with orientation programming at the time of admission and transition into their designated program track. Abraxas utilizes a Basic Recovery Orientation Curriculum, which is designed to ensure a minimum level of treatment and education for all clients. It may be used as a starting point for more in depth treatment of AOD issues. The intensive treatment services group counseling curriculum consistent of evidence-based curricula from Hazelden, including The Matrix Model® and Living in Balance®.

Juvenile Sex Offender Program – 10 beds

The behavioral healthcare program is based on a 9-12 month residential stay which includes mental health treatment and partial hospitalization programming. Specialized treatment for juvenile sex offenders and youth with sexually abusive behavior includes a continuum of services chosen for a particular youth based on several concerns, including community safety, the victim's safety, the youth's assessed treatment needs, and factors that enhance or reduce the risk for re-offense. Programming includes individual and group behavioral health counseling and therapy, mental health assessment, pharmacological management and partial hospitalization group sessions.

Substance abuse treatment and psychiatric services will be supplemented in the service planning based on the needs of the youth and family.

Additional Services

- Educational Services

Educational services for youth are provided on-site by Mid-Ohio Educational Service Center teachers with oversight by the school Principal. All Abraxas High School credits are transferable to the youth's home school, and graduation, G.E.D., and post-graduation and pre-employment options are also available.

Ancillary education curriculum including career exploration services and training related to the employment market are part of this programming. The Abraxas High School provides special education services in the least restrictive environment to those students in need of such services. Instruction with a full-time learning support teacher, monitored in the mainstream by the special education staff and ancillary services team are all provided. Remedial services in reading and math are part of the core curriculum.

- Life Skills/Independent Living

All youth are provided with life skills/independent living programming while at the residential facility. This service is educational in nature and focuses on pertinent topics to enhance the youth's ability to live independently.

- Medical Services

The medical department at Abraxas is staffed by two contract pediatricians, a contract psychiatrist, a full time nurse manager, and four nurses. Medical staff arrange for all medical care, required dental care, and pharmacological services as needed, including psychological/mental health services as accessed through third party insurance and/or Medicaid.

- Community Service

One of the most exciting ways to help young adolescents become responsible, caring, sober and crime free citizens is to provide them with opportunities to look beyond themselves and reach out to others in their schools and communities. The purpose of the service learning projects is to develop positive helping relationships with members of the youth's community and others helping individuals that can serve as support for the youth's recovery.

Youth can benefit from service learning projects in a variety of ways. These include opportunities to practice the new skills taught in the residential facility, opportunities to meet and spend time with people of significantly different ages and backgrounds from themselves, opportunities to develop new interests and discover new talents and abilities in themselves, and the experience of helping others, which can lead to greater self-confidence, purposefulness, and personal maturity. Service learning projects will also assist the youth with career exploration opportunities.

The auditor finds that as of July 23, 2017 Abraxas Ohio meets the requirements of the Prison Rape Elimination Act, Juvenile Facilities Standards.

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded:	9
Number of standard met:	29
Number of standards not met:	0
Number of standards not applicable:	3

Standard Prevention Planning

§ 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator.

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

The GEO Group has a written policy that clearly articulates its Zero Tolerance Policy regarding sexual abuse and sexual harassment. This policy is widely known throughout the corporation.

Abraxas Ohio Policy LD-05 states, "Abraxas Ohio mandates zero tolerance towards all forms of Sexual Abuse and Sexual Harassment in the facility. Sexual conduct between Employees, Volunteers, or Contractors and Residents regardless of consensual status is prohibited and subject to administrative as well as criminal and disciplinary sanctions. This prohibition includes conversations or correspondence of a romantic or sexual nature. All Employees, Contractors, and Volunteers are expected to have a clear understanding that Abraxas Ohio strictly prohibits any type of sexual relationship with Residents. This shall be considered a serious breach of the Standards of Employee Conduct, Volunteer agreements as well as vendor, service and Contractor agreements. These inappropriate relationships with Residents will not be tolerated."

GEO Policy 5.1.2-B, Sexually Abusive Behavior Prevention and Intervention Program (PREA) for Youth Services Facilities, states,

"A. Policy Statements

1. Zero Tolerance (§115.311)

- a. Each Facility is required to have a current policy mandating zero tolerance towards all forms of Sexual Abuse and Sexual Harassment and outlining GEO's approach to preventing, detecting, and responding to such conduct.

The GEO Zero Tolerance Policy is also stated in the GEO Employee Handbook and in the Resident Handbook.

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 the specific region. At the institution level the PREA Compliance Manager is responsible for all PREA issues in that specific facility. These positions are all found on the GEO organizational chart and the organizational charts of the facilities. The PCM provided the Abraxas Ohio organizational 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. The PREA Director's position is shown on GEO's Table of Organization.

During this audit cycle, the PREA Director was interviewed during an earlier PREA audit.

Amy Close is the PREA Compliance Manager (PCM) and Quality Compliance Specialist at Abraxas Ohio. Her duties include licensing compliance, Joint Commission Accreditation compliance, overall PREA compliance, PREA investigations, monitoring for retaliation, and serving as a member of the Incident Review Team. She stated she has sufficient time and authority to coordinate the facility's efforts to comply with the PREA Juvenile Facility Standards because all the employees at Abraxas Ohio are very supportive of PREA and willing to help her on PREA issues. Ms. Close is very knowledgeable about the PREA Juvenile Facility Standards and the audit process. The PCM position is illustrated in the facility's Table of Organization.

Standard

§ 115.312 Contracting with other entities for the confinement of residents.

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

GEO/Abraxas does not contract with other public or private agencies for the confinement of Abraxas Ohio residents. The auditor finds this standard is not applicable to Abraxas Ohio.

The PMC noted, in a Statement of Fact, that only 2 of 87 contracts Abraxas Ohio has with child welfare and juvenile justice agencies require that Abraxas Ohio comply with the PREA Standards. Both of the contracts that include PREA wording are contracts with the Ohio Department of Youth Services.

Standard

§ 115.313 Supervision and monitoring

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

Abraxas Ohio refers to its staffing plan as the Annual Facility Assessment (AFA). The PCM provided the auditor with the Assessments for 2015 and 2016. The plans are written in November for the following calendar year. The AFA is reviewed and updated by a team that includes the Facility Director, the PCM, the Clinical Director, and two Program Managers. The Facility Administrator, the GEO Divisional Vice President, and the PREA Director all review and sign the AFA. The facility has had no findings of inadequacy from any court, Federal investigative agency, any state agency or any other external agency. The AFA describes all components of the facility's physical plant and identifies blind spots where additional cameras may be needed. During the site review, the Facility Director and the PCM pointed out to the auditor areas where additional cameras were added in response to the 2015 AFA. The AFA is submitted to the GEO PREA Director for her approval.

The AFA also describes the resident population. Staffing ratios and placement of supervisory staff vary by program. The Drug and Alcohol Treatment Program staffing ratio during waking hours is 1:8 and 1:16 during sleeping hours (that exceeds the state requirements). The Juvenile Sex Offender Program staffing ratio is 1:5 during waking and sleeping hours.

As previously stated, the facility is budgeted for an average daily population of 96 residents. On the first day of the audit there were 131.3 authorized positions, 113.3 filled positions, and 17.5 vacancies. Given the facility was operating at 66.6% of capacity, the staffing levels still exceeded

the ratios required by the standards.

The clinical and activity schedule is population specific. The auditor was impressed with the robust activity schedules of the two programs.

Abraxas Ohio is accredited by the Joint Commission, licensed by the Ohio Department of Mental Health and Addiction Services for Residential Programs and Outpatient Treatment Services, and Certified by the Ohio Department of Youth Services to provide assessment, treatment and transitional services to juvenile sex offenders.

In the 2016 AFA, the facility reported three allegations of staff-on-resident (SISA) sexual abuse. All three investigations were on-going.

There have been no deviations from the staffing plan, but if there was a deviation, it would be documented, as required by GEO and facility policies.

GEO/Abraxas has an excellent procedure for conducting unannounced PREA rounds in all their facilities. At Abraxas Ohio, Policy RI-13 states, "At a minimum of once per month on each shift, an intermediate-level or higher-level supervisor will conduct unannounced rounds of the facility to identify and deter staff sexual abuse and sexual harassment. The unannounced rounds will be documented on the Unannounced PREA Rounds form (attached). Staff members are prohibited from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate functions of the facility."

The procedure also states, "At a minimum of once per month, an intermediate-level or higher-level supervisor will conduct a review of camera video for each shift to identify and deter staff sexual abuse and sexual harassment. The camera video review will be documented on the Camera Review Checks form (attached)."

The auditor reviewed several "Unannounced PREA Rounds" forms and Camera Review Checks forms that supervisors complete. Supervisors note any issues needing corrective action. The checklists are also reviewed by the PREA Compliance Manager who documents her review in writing.

The auditor finds that Abraxas Ohio exceeds the requirements of the standard based on the comprehensive AFA, the staffing ratios that meet or exceed the standard, the very thorough "Unannounced PREA Rounds" procedures and procedures for the review of cameras from each shift, and the documentation that it was reviewed and approved by the PREA Compliance Manager.

Standard

§ 115.315 Limits to cross-gender viewing and searches.

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

Abraxas Ohio Policy RI-13 "Resident Searches" states, "Residents have the right to be treated with consideration, respect for personal dignity, autonomy, and privacy, and within the parameters of relevant sections of the Ohio Revised Code and the Ohio Administrative Code. They have the right to reasonable enjoyment of privacy. Strip searches, body searches, and pat downs of residents are prohibited. Abraxas does conduct routine and random clothing and room searches. Cross-gender searches are not permitted."

GEO/Abraxas policy prohibits searching or physically examining a transgender or intersex resident

for the sole purpose of determining the resident's genital status. If the resident's genital status is unknown, it may be determined during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

The staff confirmed that they are prohibited from doing any hands on pat down searches, strip searches, or body cavity searches. Staff said they are trained to do clothing searches and searches of residents' rooms. Staff have received the GEO/Abraxas training on how to conduct cross-gender pat down searches and searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs, but they quickly acknowledged that these searches would never be done at this facility. The auditor reviewed the GEO/Abraxas curriculum that is used in training for cross-gender pat-down searches and searches of a transgender or intersex residents, and found the training to be very complete. There were no transgender or intersex residents in the facility at the time of the audit. The auditor was concerned because of the staff confusion over being trained for something they cannot do by policy and how that is communicated in the training. Following the audit, the PREA Director and auditor discussed the auditor's questions. The PREA Director reminded the auditor this procedure is the same across all the Abraxas programs. The auditor agreed and the issue was resolved.

The Abraxas Ohio policy on Resident Searches also states, "Staff of the opposite gender will announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothes. During random interviews with residents the auditor was told that staff announce by saying, "male on the floor" or "female on the floor/unit." Two residents said sometimes the staff forget. Ten residents said staff always announce.

Standard

§ 115.316 Residents with disabilities and residents who are limited English proficient.

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

The auditor interviewed three residents who disclosed they had some disabilities. One resident said he had some mental disabilities, another resident had language problems and possibly some cognitive disability, and the third resident reported that he could only read at the third grade level. All three residents reported the staff explained to each of them individually, the "Youth Safety Guide," PREA and how to report an allegation of sexual abuse or sexual harassment.

Abraxas Ohio policy prohibits the use of resident interpreters. Abraxas Ohio has a contract with Language Line Solutions that provides interpreter services via the phone. The Youth Safety Guide is published in English and Spanish as is the PREA signage throughout the facility. The PCM reported in a Statement of Fact that no residents, interpreters, resident assistants have been used as of June 5, 2017.

Youth who are visually impaired would be provided appropriate services.

Standard**§ 115.317 Hiring and promotion decisions.**

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

Ohio regulations and GEO policy require background checks and child abuse registry checks on all job candidates in juvenile residential facilities and contractors who may have contact with residents. GEO has also contracted with Accurate an outside vendor to do screening and background checks on job candidates.

GEO/Abraxas and Accurate also make their best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse or resignation during a pending investigation of an alleged sexual abuse.

At Abraxas Ohio, persons being considered for employment are asked, in writing:

1. "If they have ever engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution ;
2. If they have ever been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
3. If they have been civilly or administratively adjudicated to have engaged in the activity described above in paragraph (a), (1), (2), (3) of section 115.317 of the standards."

Abraxas Ohio also considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents.

These questions are also asked of all employees when they are considered for promotions and as part of their annual performance evaluations. The auditor was not sure the agency met the standard because contractors were not included in this section, but was reminded by the PREA Director that this issue had been discussed and resolved in an early audit and following a phone call with the PREA Resource Center. The auditor agreed.

Abraxas Ohio also imposes upon all employees a continuing affirmative duty to disclose any misconduct described in items 1, 2, or 3, above

The auditor reviewed five personnel files and confirmed the criminal background checks, child abuse registry checks, and acknowledgements required for hiring were present in the files. Also present were the acknowledgements required for annual evaluations and promotions.

Standard**§ 115.318 Upgrades to facilities and technologies.**

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

Abraxas Ohio has 68 cameras that cover areas inside and outside the buildings. Since 2014, the facility has added 27 cameras and the auditor was told 10 more will be added in the coming

months. The purchase order was provided to the auditor. Recording storage is 6 weeks, but will be increased to three to four months also in the coming months. The facility uses the services of KIT Networking Cabling, Inc. for all repairs and upgrades to cameras. Documentation was provided that showed repairs are made very quickly, when needed.

Abraxas Ohio policy states, "At a minimum of once per month, an intermediate-level or higher-level supervisor will conduct a review of camera video for each shift to identify and deter staff sexual abuse and sexual harassment. The camera video review will be documented on the Camera Review Checks form (attached)." As previously stated, the auditor reviewed completed Camera Review Check forms.

The auditor also reviewed previously recorded videos to evaluate the quality of the video and confirm the retention periods. The cameras and monitors provide good quality pictures and with the upgrades the quality will improve even more.

Standard Responsive Planning § 115.321 Evidence protocol and forensic medical examinations.
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- 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)

Abraxas Ohio Policy RI-04 describes the procedures staff, contractors, and volunteers will follow when reporting a sexual abuse or any other abuse. When an allegation of sexual abuse is made, the staff member, contractor, or volunteer to whom the allegation was made will immediately report the allegation to the On-Duty Administrator who will immediately notify the PREA Coordinator. The PREA Coordinator is also the PREA Investigator at Abraxas Ohio and will interview the resident/victim. In the absence of the PREA Coordinator, the On-Duty Administrator will interview the resident/victim. Following the interview with the resident/victim, the person who conducted the interview will immediately contact the referring county Children Service agency responsible for the care of the client. The responsible Children Services agency will decide if the suspected abuse needs to be investigated or if other agencies need to be notified. If the Children Services agency does not decide other agencies are needed in the investigation, that agency will then be responsible for the investigation. If the allegation appears to be a criminal offense, the facility will notify the Richland County Sheriff's Department who will conduct an investigation. The Richland County Sheriff's Department has confirmed this protocol in a letter to the Abraxas Ohio.

Once an investigation has started, the Abraxas Ohio investigation will be on hold until the Children Services agency or Sheriff's Department investigation is completed. If the allegation involves a staff member at Abraxas Ohio, the Facility Director would call the PREA Director and the Abraxas Director. The GEO Office of Professional Responsibility will initiate its own internal investigation.

The Ohio Health Mansfield Hospital is located in Mansfield, Ohio, approximately eight miles from Abraxas Ohio and is part of the Sexual Assault Response Network of Central Ohio. The hospital will provide SAFE/SANE exams, as needed, without financial cost to the victim. Any victim of sexual abuse at Abraxas Ohio could be taken to this hospital.

Abraxas Ohio has a Memorandum of Understanding (MOU) with the Domestic Violence Shelter, which is also located in Mansfield, Ohio. The MOU states that the Domestic Violence Shelter will provide victim advocacy during SANE/SAFE investigations and information and referral for rape crisis services to assist the sexual assault victim and family.

Posters, in English and Spanish, are displayed throughout the facility that inform residents how they

can call for help from the Sexual Assault Service Program at The Shelter.

The facility has a log that will document referrals to The Shelter, Children Services agency, or the Richland Sheriff's Department. (Community Rape Crisis Center Referral Log.)

Standard

§ 115.322 Policies to ensure referrals of allegations for investigations.

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

GEO Policy 5.1.2-E, "Investigating Allegations of Sexually Abuse Behavior (PREA) and Evidence Collection," states,

"1. Policies to Ensure Referrals of Allegations for Investigations (§115.22/115.222/115.322)

- a. Each facility shall have a policy in place to ensure that all allegations of Sexual Abuse or Sexual Harassment are referred for investigation to a law enforcement agency with legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. Facilities shall document all referrals.
- b. Due to client contract requirements, some facilities may be required to follow specific client PREA investigations policies. If for some reason, client policy is less restrictive than Section 28 C.F.R. Part 115 of the National PREA Standards, the PREA Standards shall prevail and a site specific supplemental policy shall be developed.
- c. Each GEO operational subsidiary, business unit or program shall have a current policy in place to ensure that:
 - Allegations of Sexually Abusive Behavior receive prompt intervention upon report; and
 - Perpetrators of Sexually Abusive Behavior are disciplined and, when appropriate, referred for prosecution in accordance with GEO policy and federal, state or local laws.
- d. GEO shall publish its corporate investigations policy on its website."

"Ohio Child Abuse Reporting Regulations, (the Child Abuse Reporting Act is lengthy, so the following paraphrases some of the other legal aspects): state,

1. Any child care worker, any person responsible for the welfare (i.e.: lodging, income and medical care) of a child must immediately report the knowledge or suspicion of abuse or neglect of a child to the public Children Services agency or a municipal or county peace officer in which the child resides or in which the abuse or neglect is occurring or has occurred. By definition, reporting the abuse or suspected abuse to the county referring Children Services agency would constitute adherence to this rule."

Abraxas Ohio Policy RI-04 describes the procedures staff, contractors, and volunteers will follow when reporting a sexual abuse incident or any other abuse. When an allegation of sexual abuse is made, the staff member, contractor, or volunteer to whom the allegation was made will immediately report the allegation to the On-Duty Administrator who will immediately notify the PREA Compliance Manager. The PREA Compliance Manager is also the PREA Investigator at Abraxas Ohio and will interview the resident/victim. In the absence of the PREA Compliance Manager, the On-Duty Administrator will interview the resident/victim. Following the interview with the resident/victim, the person who conducted the interview will immediately contact the referring county Children Services agency responsible for the care of the client. The responsible Children Services agency will decide if the suspected abuse needs to be investigated or if other agencies need to be notified. If the Children Services agency does not decide other agencies are needed in the investigation, that agency will then be responsible for the investigation. If the allegation appears to be a criminal offense, the facility will

notify the Richland County Sheriff's Department who will conduct a criminal investigation. The Richland County Sheriff's Department has confirmed this protocol in a letter to the Abraxas Ohio.

Once an investigation has started, the Abraxas Ohio investigation will be on hold until the Children Services agency or Sheriff's Department investigations is completed. If the allegation involves a staff member at Abraxas Ohio, the Facility Director would call the PREA Director and the Abraxas Director. The GEO Office of Professional Responsibility will initiate its own internal investigation.

Allegations of sexual harassment will be investigated by the PREA Investigator at Abraxas Ohio. If the allegation involves staff-on-resident sexual harassment, the GEO Office of Professional Responsibility will be involved and direct the investigation.

The auditor reviewed eight investigations over the last three years and found that the facility had reported each allegation consistent with their policy and procedures.

Standard – TRAINING AND EDUCATION

§ 115.331 Employee training.

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

Staff interviewed by the auditor reported that they had received extensive PREA training during their orientation and also during Booster training, as recently as the month before the audit. Booster training is conducted, at least annually. Staff also said PREA is reviewed and discussed during shift changes and in staff meetings. When answering questions about specific training they had received, the staff provided detailed information about the material that was covered.

The GEO Group has created a very comprehensive training program that encompasses all the areas required by Standard 115.331 (1) – (11), plus additional information on what the data shows about sexual abuse in confinement facilities, the importance of screening for risk, barriers to reporting a sexual abuse, determining risk factors for victimization, what to do as a first responder, and legal issues related to employee misconduct. The PowerPoint presentation is comprised of 183 slides. The auditor was very impressed with the level of detail in the PowerPoint training.

Employees acknowledge, in writing, that they have received the training and understand it. The auditor reviewed five employee training files and confirmed the employees had received the required basic training and Booster training.

Staff are also given a pocket card that describe the steps to follow if an allegation of sexual abuse is reported and the staff member is the first responder and also tells employees how they can privately report an allegation of sexual abuse or sexual harassment.

The auditor finds that the GEO/Abraxas training, the Booster training, and the pocket card staff receive at Abraxas Ohio exceeds the requirements of the standard.

Standard

§ 115.332 Volunteer and contractor training.

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

Abraxas Ohio lists three contractors who have direct contact with residents, the physician, the psychiatrist, and the barber. There are no volunteers at this facility. GEO/Abraxas provides comprehensive training for contractors. The contractors take a written quiz following the training. Each contractor acknowledged, in writing, that he/she received and understood the PREA training for contractors. The auditor reviewed the documentation that confirmed the contractors had received the training and understood it.

The auditor interviewed the physician and the psychiatrist who also confirmed they had received the training.

The auditor reviewed the 14 page training curriculum and found it met the standard.

Standard

§ 115.333 Resident education.

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

Abraxas Ohio Policy CC-03, Client Intake states,

“During the intake process (but no later than 10 days from the date of intake) the Therapist assigned to the intake will provide the client with comprehensive age-appropriate information regarding the program’s zero tolerance policy regarding sexual abuse and sexual harassment by reviewing the Abraxas Youth Safety Guide. The information will include the client’s rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and how to report sexual abuse or sexual harassment. The Therapist assigned to the intake will review the information with the client in person, verify his understanding, and obtain his signature on the acknowledgement form (attached).”

Interviews with 12 residents, randomly selected by the auditor, confirmed that residents receive comprehensive PREA training. Several of the 12 residents said that the staff from Abraxas Ohio who brought them to the facility from their homes or courts, gave them the PREA training in the van during the drive to Abraxas Ohio. Other residents reported the training was provided as a part of the intake process. The training included the Zero Tolerance Policy, prohibited behaviors, residents’ rights to be free from sexual abuse and sexual harassment, their right to be free from retaliation for report an allegation and how to report an allegation of sexual abuse and sexual harassment. The residents said the staff reviewed the “Youth Safety Guide,” in detail and also covered the PREA information in the Abraxas Ohio Resident & Family Handbook. The auditor reviewed seven residents’ files and confirmed written documentation that the residents had received the required PREA education.

The “Youth Safety Guide” is printed in both English and Spanish. Each resident confirms, in writing, that he received the document, reviewed it with a staff member and understands the information in

the Guide, including the Zero Tolerance Policy and how to report any allegation sexual abuse or sexual harassment.

PREA signage is posted throughout the facility and informs and reminds residents of their responsibility to report sexual abuse and sexual harassment and the various ways to report. Signage also informs residents how they can seek-out emotional support if they are a victim of sexual abuse. PREA signage is printed in English and Spanish.

By providing residents with a very comprehensive education on PREA Abraxas, including the publication of the "Youth Safety Guide," Abraxas Ohio exceeds the requirements of the standard.

Standard

§ 115.334 Specialized training: Investigations.

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

The PCM/Quality Compliance Specialist serves as the facility's PREA Investigator. The Investigator said she had completed the Basic PREA training, the Booster training, and also received GEO's specialized training for facility investigators. The Facility Director and two Program Managers have also received the specialized training for facility investigators and serve as back-up investigators in the absence of the lead PREA Investigator.

The GEO PREA Director 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. The auditor reviewed the PowerPoint, "Specialized Training for Investigators – Juveniles" and found it to be very comprehensive.

If prosecution is indicated, the Richland County Sheriff's Department would make the referral to the Richland County 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.

Documentation was given to the auditor that confirmed the investigators completed the basic PREA training, Booster training, and the specialized investigator training. Acknowledgements were also provided in writing that confirmed the employee received and understood the investigator training.

Because GEO/Abraxas has such an extensive training curriculum for the investigators and because there are opportunities for GEO investigators to communicate during webinars, the auditor finds that Abraxas Ohio exceeds the standard.

Standard

§ 115.335 Specialized training: Medical and mental health care.

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

- Does Not Meet Standard (requires corrective action)

The auditor interviewed the Nurse Manager, the contract physician, and the contract psychiatrist. All three confirmed they had received the Basic PREA training and the specialized training for medical and mental health care professionals. The contracted professionals also had the training for Contractors and Volunteers.

The GEO Group's Specialized Medical and Mental Health PREA Training for Youth Services was developed utilizing the NCCHC specialized medical and mental health curriculum specifically for its health care and mental health providers. This is a very comprehensive and very detailed curriculum that covers all the areas required by Standard 115.335 (1) – (4) and much more. The curriculum includes 90 PowerPoint slides. The auditor reviewed the PowerPoint, "Specialized Medical and Mental Health PREA Training Youth Services," and found it is very complete.

The PCM provided written documentation that the Medical and Mental Health staff have received all the required training. The auditor also reviewed six training files of the medical and mental health staff, including nurses, doctors, and therapists, and confirmed they had received the specialized training.

Because GEO/Abraxas has such a comprehensive training curriculum for the medical and mental health staff auditor finds that Abraxas Ohio exceeds the standard.

Standard Screening for Risk of Sexual Victimization and Abusiveness § 115.341 Obtaining information from residents.
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- 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 Abraxas Ohio Policy PE-01, Clinical Assessment Process, states,

"6. Screening for the Risk of Victimization and Sexually Aggressive Behavior

No later than 72 hours of the client's arrival at the facility and periodically throughout the client's stay in the program, the program will use information about his personal history and behavior to reduce the risk of sexual abuse by or upon the resident.

During the intake process, the Assessment Therapist will complete an objective screening instrument with the client. The purpose of the screening instrument will be to obtain and use information about the client's personal history and behavior to reduce the risk of sexual abuse by or upon the client. If the client has experienced prior sexual victimization or has previously perpetrated sexual abuse, he will be offered a follow-up meeting with a Therapist within 14 days. If the client scored vulnerable to victimization on the initial PREA risk screening assessment, the client will be reassessed within 30 days.

The program will use the information gathered to make room and programming assignments for the client with the goal of keeping him safe and free from sexual abuse. The program is prohibited from isolating clients from others. Placement and programming assignments for each transgender or intersex client shall be reassessed at least monthly to review any threats to safety experienced by the client."

The auditor interviewed a therapist who performs the screening for risk of victimization and abusiveness. The therapist confirmed that all new admissions are screened for risk of sexual abuse victimization or sexual abusiveness toward other residents. She stated the screening is a part of the intake process and is administered during the intake process. She said information is ascertained

from an interview with the resident, from the medical and mental health assessments, and from a review of the resident's case record. All of the elements in the standard are included in the screening form or available in other documents. The therapist said there is an Excel spreadsheet that indicates when the next assessment on a resident is due. Reassessments are completed every 90 days. Re-assessments are also done if there has been an incident that would raise a "red flag," or new information was brought forward.

During interviews with the randomly selected residents, the residents confirmed that they were asked the questions on the screening form. Those who had been in the facility for three months or longer said they were asked the questions again at the three-month review. The auditor reviewed seven (7) residents' files and found the assessments and quarterly re-assessments were completed within the designated time frames.

The screening form is considered a confidential document and access to it is limited to the medical and mental health staff, therapists, designated administrators and other specialized staff who have a specific need to know.

Standard

§ 115.342 Placement of residents in housing, bed, program, education, and work assignments.

- 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 stated, the Abraxas Ohio Policy states,

"The program will use the information gathered to make room and programming assignments for the client with the goal of keeping him safe and free from sexual abuse. The program is prohibited from isolating clients from others. Placement and programming assignments for each transgender or intersex client shall be reassessed at least quarterly to review any threats to safety experienced by the client."

The Abraxas Ohio Treatment Team uses a room matrix when assigning a resident to a specific room. The Screening for the Risk of Victimization and Sexually Aggressive Behavior is the document that is used to create the individual matrix. If a resident is classified as Vulnerable to Victimization (VV) he may be placed in a single occupancy room, but he can also be in a room with other residents. If a resident is classified as Sexually Aggressive Behavior (SAB) or if a resident is classified as both VV and SAB, he will be assigned to a single occupancy room. The screening form is also used in making programming assignments.

During the site review the auditor visited all the living units and looked into numerous rooms. No living unit is designated just for gay, lesbian, bisexual, transgender or intersex residents. The auditor interviewed one resident who identified as bi-sexual. The residents confirmed he is in the general population. The resident told the auditor that other residents sometimes harass him or tease him if he does something to upset them. The auditor asked if he could report this to the PCM and the resident gave his approval. The matter was referred to the PCM.

The therapist said placement and programming assignments for a transgender resident would be reassessed at least quarterly to review any threats to safety experienced by the resident and a transgender or intersex resident's own view with respect to his safety would be given serious consideration.

All residents shower separately. There are no isolation rooms in Abraxas Ohio.

Standard Reporting

§ 115.351 Resident reporting.

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

Abraxas Ohio provides multiple internal and external ways for residents to privately report sexual abuse and sexual harassment, retaliation by other residents or staff and staff neglect or violation of duties that may have contributed to such incidents. The *Youth Safety Guide* states that a resident can report an allegation of sexual abuse or sexual harassment to any administrator, treatment supervisor, therapist, health care or mental health provider, life skill worker/youth development specialist, or to his or her parent/guardian, probation officer, attorney, or chaplain or minister. The Guide also provides the phone number for the Ohio Child Abuse and Neglect Hotline (419-774-4100). Posters throughout the facility also give the phone number for the Sexual Assault Response Network of Central Ohio (614-267-7020) where a resident can report sexual abuse or sexual harassment or request emotional support if he is the victim of sexual abuse. Residents can also file a grievance regarding sexual abuse and sexual harassment. The Abraxas Ohio Resident and Family Handbook describes the grievance procedures. Residents are also given a pocket card that instructs residents how to report sexual abuse or sexual harassment.

All the randomly selected residents that were interviewed described in detail the multiple ways of reporting sexual abuse and harassment, including telling one of the staff, telling a family member or guardian, telling the probation officer or caseworker, calling Children Services, or filing a grievance. They also said they know they can make the reports in writing, verbally, via third parties, and anonymously. When asked how they would make a report anonymously, the residents said they would write a grievance and not sign it. Residents said the staff do provide writing materials if they need them to make a written report.

The GEO Web site informs parents, guardians, attorneys and other interested parties how they can make a "third party" report of sexual abuse and sexual harassment. The options include calling the facility administrator and/or calling the PREA Director at the GEO Corporate Office.

GEO procedures describe how employees may privately report allegations of abuse. During training employees are trained on their options and posters are located in staff offices, control centers, and breakrooms. Employees are also given a pocket card with the information on how to report sexual abuse and sexual harassment of residents. Abraxas Ohio employees may report allegations of sexual abuse and sexual harassment to the Chief of Security or facility management privately, if requested. They may also report sexual abuse or sexual harassment allegations directly to the Employee Hotline, which is an independent, professional service, available 24 hours per day, 7 days a week. Employees can also report using the GEO Web site or calling the Corporate PREA Director directly. Interviews with random staff confirmed that the employees are knowledgeable about the ways they can privately report sexual abuse and sexual harassment and how that can be accomplished.

Abraxas Ohio Policy RI-01, "Child Abuse/Neglect Reporting," states, "Although staff persons are to follow these procedures, anyone who suspects child abuse and/or neglect has the right and responsibility to report the information to the referring county children services agency directly and Abraxas Ohio will not provide any retaliation or retribution towards staff/contract staff/student interns/volunteers who directly report suspected abuse and/or neglect."

The auditor was very impressed with the multiple options GEO/Abraxas gives its residents and staff to report allegations of sexual abuse and sexual harassment. For this reason, the auditor finds Abraxas Ohio exceeds the standard.

Standard**§ 115.352 Exhaustion of administrative remedies**

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

Abraxas Ohio Policy RI-03, "Client and Family Grievances," states,
"Procedures for Sexual Abuse Grievances

1. There is no time limit on when a client may submit a grievance regarding an allegation of Sexual Abuse.
2. Clients have the right to submit grievances alleging Sexual Abuse to someone other than the alleged abuser.
3. Third parties (e.g., fellow residents, employees, family members, attorneys and outside advocates) may assist clients in filing requests for administrative remedies relating to allegations.
4. The alleged victim must agree to have the request filed on his or her behalf; however, he is not required to personally pursue any subsequent steps in the administrative remedy process. If a parent or legal guardian of a client files a grievance regarding Sexual Abuse on behalf of the client, the client does not have to agree to have the request filed on his behalf.
5. Clients are not required to use any informal grievance process or attempt to resolve with Employees an alleged incident of Sexual Abuse.
6. A final decision shall be issued on the merits of any portion of the grievance alleging Sexual Abuse within 90 days of the initial filing of the grievance.
7. Facilities may claim an extension of time to respond (for good cause), of up to 70 days and shall notify the client of the extension in writing.

Emergency Grievances

1. Clients may file an emergency grievance if he is subject to a substantial risk of imminent Sexual Abuse.
2. After receiving an emergency grievance of this nature, the Program Director or designee shall ensure that immediate corrective action is taken to protect the alleged victim.
3. An initial response to the emergency grievance to the resident is required within 48 hours and a final decision shall be provided within five calendar days."

All the residents the auditor interviewed listed "writing a grievance" as one of the ways they can make an allegation of sexual abuse or sexual harassment. The residents had a good understanding of how to write and file a grievance.

The Facility Director stated that Abraxas Ohio had an incident reported on May 22, 2017, in which a resident alleged a staff member touched the resident on the buttocks. "The resident placed this note in the grievance box the day he was discharged from the program. The incident was reported to the Richland County Sheriff's Department, the Richland County Children Services agency, and the GEO Office of Professional Responsibility (OPR). The auditor reviewed this investigation along with the others. After reviewing the allegation, Richland County Children Services declined to investigate. At the time of the audit, the Richland County Sheriff's Department and the OPR investigations were still "on-going."

Standard**§ 115.353 Resident access to outside support services and legal representation.**

- 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)

Abraxas Ohio Policy RI-12, "Client Rights," states,

"The following client rights under PREA:

1. Clients will be provided with access to outside victim advocates for emotional support services related to sexual abuse. Abraxas will provide this information by posting, or otherwise making accessible mailing addresses and telephone numbers, including toll free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations. Reasonable communication between clients and these organizations will be provided, in as confidential a manner as possible.
2. Abraxas will inform clients, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.
3. Abraxas will provide clients with reasonable and confidential access to their attorneys or other legal representation and reasonable access to parents or legal guardians."

Abraxas Ohio has a written MOU with the Domestic Violence Shelter, also known as "The Shelter." The MOU states, "Considering this, the Domestic Violence Shelter is open to receiving referrals to provide victim advocacy during SANE/SAFE investigations and information and referral for rape crisis services to assist the sexual assault victim and family. Abraxas Ohio will immediately notify Richland County Children Services and the Richland County Sheriff's Department of any allegations of sexual abuse/harassment of youth in placement at the Residential Center. The need for SANE/SAFE investigations will be referred to Med Central Mansfield and the Richland County Sheriff's Department."

When the auditor interviewed the random residents, none of the residents remembered the name of the agency that could provide emotional support, but several said the phone contact information is on the signs that are posted throughout the facility. There is also a brochure about The Shelter's Sexual Assault Services that lists The Shelter's address in Mansfield, Ohio. The contact information for emotional support is also on given on the pocket card.

The residents said they would have access to their attorneys if they requested it. Several residents said they see their attorneys when they go to Court for review hearing. Some residents said they don't have an attorney. All of the residents in the facility have been committed to Abraxas by a Juvenile Court Judge.

Every resident said he has regular contacts with his parents, family, or guardian. Several said they can go home if they earn a Home Pass. Others may go off grounds with their parents on a Day Pass. Phone calls are allowed during the week.

Standard**§ 115.354 Third-party reporting.**

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

All the residents interviewed were aware that they could report sexual abuse to their parents, family members, guardians, caseworkers, probation officers, or attorneys, if they did not feel they could report it to anyone at the facility. Staff were also aware that third-party reports could be taken regarding sexual abuse and sexual harassment.

The GEO Web site has instructions for third party reporting:

“If you were previously housed in a GEO facility or program and need to report an allegation of sexual abuse/sexual harassment or to report an allegation of Sexual Abuse/Sexual Harassment on behalf of an individual who is or was housed in any GEO facility or program, you may contact the Facility Administrator’s Office in the facility where the alleged incident occurred or where the individual is housed. Please see our Locations page for each facility’s contact information. Reports can be made over the phone, in person, in writing or anonymously if desired. You can also contact our Corporate PREA Coordinator directly (see contact information below).

It is critical that you provide as many details as possible to include:

- The names and locations of alleged persons involved;
- The names of any witnesses to the alleged incident;
- Individual’s register/booking number (if known);
- A brief description of the alleged incident;
- Date, time and location of where the alleged incident occurred;
- Your contact phone number and address if you wish to do so”

This statement is also found on posters that are displayed throughout the facility and specifically where visitors can see them. The posters are in English and Spanish.

Standard Official Response Following a Resident Report**§ 115.361 Staff and agency reporting duties.**

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

Abraxas Ohio Policy LD-05 states, “In accordance with this policy, all Employees, Contractors and Volunteers have an affirmative duty to report all allegations or knowledge of Sexual Abuse, Sexual Harassment, romantic, or sexual contact that take place in Abraxas Ohio or while a Resident is off grounds. All cases of alleged sexual conduct shall be thoroughly investigated. Upon substantiation of any allegations of sexual conduct, appropriate disciplinary actions will be taken against Employees, Contractors or Volunteers, including possible criminal prosecution.”

Abraxas Ohio Policy RI-04 describes the procedures staff, contractors, and volunteers will follow when reporting a sexual abuse or any other abuse. It states,

"POLICY

Abraxas Ohio will report all suspected cases of child abuse or neglect for the protection of the children in our care as well as the siblings in that family. All staff/contract staff/student interns/volunteers are mandated to report all incidents of suspected child abuse, both past and present, as mandated by law.

Procedures for reporting suspected abuse/neglect is consistent with ORC 2151.42.1 & 2151.421, and rule 5101: 2-34-06 of the administrative code, and agency level 3793: 2-1-03.

PROCEDURE

Ohio Child Abuse Reporting Regulations

The Child Abuse Reporting Act is lengthy, so the following paraphrases some of the other legal aspects:

1. Any child care worker, any person responsible for the welfare (i.e.: lodging, income and medical care) of a child must immediately report the knowledge or suspicion of abuse or neglect of a child to the public Children Services agency or a municipal or county peace officer in which the child resides or in which the abuse or neglect is occurring or has occurred. By definition, reporting the abuse or suspected abuse to the county referring Children Services agency would constitute adherence to this rule.
2. Confidentiality does not apply between professionals and clients in regards to child abuse reporting and does not constitute acceptable grounds for failure to report.
3. Those who report have "immunity from liability" which means that the said person shall be immune from any civil or criminal liability for injury, death, or loss to person or property. However, failure to report is a summary offense, except that of a second or subsequent offense, which would then be a misdemeanor of the third degree."

The Policy goes on to state that when an allegation of sexual abuse is made, the staff member, contractor, or volunteer to whom the allegation was made will immediately report the allegation to the On-Duty Administrator who will immediately notify the PREA Compliance Manager. The PREA Compliance Manager is also the PREA Investigator at Abraxas Ohio and will interview the resident/victim. In the absence of the PREA Compliance Manager, the On-Duty Administrator will interview the resident/victim. Following the interview with the resident/victim, the person who conducted the interview will immediately contact the referring county Children Services agency responsible for the care of the client. The responsible Children Services agency will decide if the suspected abuse needs to be investigated or if other agencies need to be notified. If the Children Services agency does not decide other agencies are needed in the investigation, that agency will then be responsible for the investigation. If the allegation appears to be a criminal offense, the facility will notify the Richland County Sheriff's Department who will conduct an investigation. The Richland County Sheriff's Department has confirmed this protocol in a letter to the Abraxas Ohio.

Once an investigation has started, the Abraxas Ohio investigation will be on hold until the Children Services agency or Sheriff's Department investigations is completed. If the allegation involves a staff member at Abraxas Ohio, the Facility Director would call the PREA Director and the Abraxas Director. The GEO Office of Professional Responsibility will initiate its own internal investigation.

All the random staff interviewed by the auditor described in detail their reporting responsibilities beginning with the immediate supervisor up to and including calling the Ohio Abuse and Neglect

Hotline. The staff understand that they are mandatory reporters for allegations of sexual abuse, sexual harassment, retaliation or threats of retaliation, and staff neglect of duties that may have contributed to a sexual abuse incident.

Staff also stated they understood allegations of sexual abuse and sexual harassment are confidential and that there are limitations on who they would inform about the allegation. The staff carry a pocket guide that can be used to ensure all the steps are followed in reporting sexual abuse or sexual harassment.

Medical and mental health staff always inform a resident of the limitations of confidentiality and of their duty to report any allegations of sexual abuse or sexual harassment, as mandatory reporters. The medical and mental health staff would immediately call the Clinical Director and the On-Duty Administrator of any allegation of sexual abuse or sexual harassment.

The Facility Director said he would notify the appropriate placing agency's representative that has jurisdiction over the resident, (i.e., caseworker or probation officer) and inform him/her of the allegation. He said residents generally do not have an active attorney, but he would notify an attorney if the placing agency agreed. He said he would also notify the resident's parent or guardian unless there was an order not to contact them. These notifications would be completed before the end of the shift on which the allegation was made.

Standard

§ 115.362 Agency protection duties.

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

The Program Director and all staff randomly interviewed at Abraxas Ohio stated that any resident in substantial risk of imminent sexual abuse would be immediately removed from the threat and would be under the close supervision of a staff member until such time as the allegation is investigated and a Safety Plan is developed for the protection of the alleged victim. If the aggressor is known, he/she would also be removed from the immediate area.

The PCM reported, "Abraxas Ohio has not identified any resident at substantial risk of imminent sexual abuse."

Standard

§ 115.363 Reporting to other confinement facilities.

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

GEO Policy 5.1.2-B, "Sexually Abusive Behavior Prevention and Intervention Program (PREA) for Youth Services Facilities" states,

"5. Reporting to Other Confinement Facilities (§115.363)

a. In the event that a Resident alleges that Sexual Abuse occurred while confined at another Facility, the Facility shall document those allegations and the Facility Administrator or in his/her absence, the Assistant Facility Administrator where the allegation was made shall contact the Facility Administrator or designee where the abuse is alleged to have occurred as soon as possible, but no

later than 72 hours after receiving the notification.

b. The Facility shall maintain documentation that it has provided such notification and all actions taken regarding the incident. Copies of this documentation shall be forwarded to the PREA Compliance Manager and Corporate PREA Coordinator.

c. Any Facility that receives notification of alleged abuse is required to ensure that the allegation is investigated in accordance with PREA standards. "

The Facility Director said that if he received a report of an allegation that happened at Abraxas Ohio, it would be reported and investigated as any other PREA allegation. He also said that if a resident reported he was sexually abused while confined at another facility, he would notify the facility director or appropriate office of the agency where the alleged abuse occurred and also notify the appropriate investigative agency.

The Facility Director said "Abraxas Ohio has not received any reports of abuse from other confinement facilities; nor have any residents reported abuse which occurred at another facility."

Standard

§ 115.364 Staff first responder duties.

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

GEO Policy 5.1.2-B, "Sexually Abusive Behavior Prevention and Intervention Program (PREA) for Youth Services Facilities" states, subsection "K. Actions Required After Report of Sexual Abuse," states, "GEO Policy 5.1.2-B, "Sexually Abusive Behavior Prevention and Intervention Program (PREA) for Youth Services Facilities" states,

"2. Staff First Responder Duties (§115.364)

Upon receipt of a report that a Resident was Sexually Abused, or if the Employee sees abuse, the first staff member to respond to the report shall:

- a. Separate the alleged victim and abuser;
- b. Immediately notify the on duty or on call supervisor and remain on the scene until relieved by responding personnel;
- c. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;
- d. Do not let the alleged victim or abuser take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating;
- e. If the first responder is not a Security Staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence; remain with the alleged victim and notify Security Staff.
- f. Apart from reporting to designated supervisors, Employees shall not reveal any information related to the incident to anyone other than to staff involved with investigating the alleged incident."

As previously stated, the Abraxas Ohio policy requires that the first staff member who receives a report or an allegation of sexual abuse, or has direct knowledge of the sexual abuse of a resident shall separate the resident/victim from the area and immediately notify the On-Duty Administrator.

The first responder and the On-Duty Administrator shall secure the area where the abuse is alleged to have happened and preserve and protect the scene until the appropriate steps are taken by the Richland County Sheriff's Department. The first responder should discourage resident/victim from taking any actions that could destroy evidence (i.e., washing/showering, brushing teeth, changing clothes, using the toilet, or drinking or eating) until a forensic exam can be performed (if a forensic

exam is determined to be needed). If the alleged abuser is a resident, the staff member will instruct the resident/abuser not to wash/shower, brush teeth, change clothes, use the toilet, or drink or eat) until a forensic exam is performed (if a forensic exam is determined to be needed).

The auditor interviewed ten random staff and the school principal and specifically asked what he/she would do if a resident told that employee that he/she had been sexually abused. Every employee described in great detail how they would separate and protect the victim, protect the scene, ensure the victim and the perpetrator (if he or she is known) does not shower, use the toilet, change clothes, or brush their teeth, etc. Several staff said the pocket guide is a very valuable resource.

Standard

§ 115.365 Coordinated response.

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

GEO Policy 5.1.2-B, "Sexually Abusive Behavior Prevention and Intervention Program (PREA) for Youth Services Facilities" subsection III. A. states,

"4. Coordinated Response (§115.365)

- a. Each Facility shall develop written Facility plans to coordinate the actions taken in response to incidents of Sexual Abuse.
- b. The plans shall coordinate actions of staff first responders, Medical and Mental Health Practitioners, investigators, and Facility leadership.
- c. The local PREA Compliance Manager shall be a required participant and the Corporate PREA Coordinator may be consulted as part of this coordinated response."

The Facility Response Plan is found in the Abraxas Ohio Policy. The plan specifically addresses the duties and responsibilities of the first responders, supervisors on duty, the facility director, the PCM, and the medical and the mental health providers.

In interviews with these individuals, the auditor found that they are aware of the plan and very knowledgeable about their individual responsibilities, especially when responding to an allegation of sexual abuse. As previously mentioned, all Abraxas Ohio employees have pocket guides that also direct first responders on the steps that need to be taken when responding to an allegation of sexual abuse. The Facility Director told the auditor the facility has had drills on the plan.

Standard

§ 115.366 Preservation of ability to protect residents from contact with abusers.

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

The Facility Director said Abraxas Ohio does not have a collective bargaining unit.

Standard**§ 115.367 Agency protection against retaliation.**

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

GEO Policy 5.1.2-B, "Sexually Abusive Behavior Prevention and Intervention Program (PREA) for Youth Services Facilities" subsection L.2. states,

"Protection Against Retaliation (§115.367)

- a. Facilities shall implement procedures to protect Residents and Employees who report Sexual Abuse or Sexual Harassment or cooperate with investigations, from retaliation by other Residents or Employees.
- b. The Facility PREA Compliance Manager or Mental Health personnel shall be responsible for monitoring retaliation of Residents.
- c. Facilities shall have multiple protection measures, such as housing changes or transfers for victims or abusers, removal of alleged staff or abusers from contact with victims, who fear retaliation for reporting Sexual Abuse or Sexual Harassment or for cooperating with investigations.
- d. A Mental Health staff member or the PREA Compliance Manager shall meet weekly (beginning the week following the incident) with the alleged victim in private to ensure that sensitive information is not exploited by staff or others and to see if any issues exist.
- e. Any issues discussed shall be noted on the "Protection from Retaliation Log" (see attachment H), to include corrective actions taken to address the issue.
- f. For at least 90 days following a report of Sexual Abuse, the Facility shall monitor the conduct and treatment of Residents who reported the Sexual Abuse to see if there are changes that may suggest possible retaliation by Residents or staff, and shall act promptly to remedy such retaliation. Monitoring shall terminate if the allegation is determined unfounded.
- g. Items to be monitored for Residents include disciplinary reports and housing or program changes.
- 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 retaliation 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.
- j. Any issues discussed shall be noted on the "Employee Protection from Retaliation Log (see Attachment I)", to include corrective actions taken to address the issue.
- k. Items to be monitored for Employees include negative performance reviews and Employee reassignments.
- l. If any other individual expresses a fear of retaliation, the Facility shall take appropriate measures

to protect that individual as well.

m. Completed Monitoring Logs shall be retained in the investigative file of the corresponding PREA incident.”

The PCM is person responsible for monitoring for any retaliation against residents or staff at Abraxas Ohio. The PCM said she would make the contact with the victim and inform him that she would be monitoring for retaliation for 90 days. She said she would meet with the resident at least weekly and would be monitoring behavior reports, how the resident is getting along with other residents, and any disciplinary issues. A safety plan would be developed for the resident victim and any resident who fears retaliation. The resident’s Therapist will assist the PCM and provide additional counseling sessions, if needed. The resident will also be able to call The Shelter if he requests outside emotional support.

If a staff member reports an allegation of staff-on-resident sexual abuse or sexual harassment, the staff member will be told the following,

“Facilities shall implement procedures to protect Employees (who report Staff on Inmate Abuse or Harassment or cooperate with investigations as witnesses), from retaliation by other Employees. Facilities shall have multiple protection measures, such as periodic status checks and also emotional support services for staff that fear retaliation for reporting Sexual Abuse or Sexual Harassment or for cooperating with investigations.

For at least 90 days (once a month) following a report of Sexual Abuse, the Facility shall monitor the conduct and treatment of Employees who reported the Sexual Abuse or Harassment to see if there are changes that may suggest possible retaliation by staff, and shall act promptly to remedy such retaliation. Monitoring shall terminate if the allegation is determined unfounded. Any issues discussed shall be noted below to include corrective actions taken to address the issue. Items to be monitored for Employees include negative annual performance reviews and Employee reassignments which shall be monitored by Human Resources Staff or Facility Investigators as designated by the Facility Administrator.

Methods to Privately Report Retaliation

Employees reporting possible retaliation shall be afforded the opportunity to report such information to the Chief of Security, Facility management, Facility Investigator, Corporate PREA Director or employee hotline privately if requested. EAP is also available to you for emotional support services. You may use either of these options to report possible retaliation at any time.”

The PCM said the all monitoring would be documented in a “Protection Against Retaliation Log. Logs will be maintained in the PREA Investigation file.

The Facility Director said he would assist the PCM in monitoring employees for retaliation and in ensuring steps are taken to protect the employee from retaliation.

Standard

§ 115.368 Post-allegation protective custody.

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

Abraxas Ohio has no isolation rooms.

Standard Investigations

§ 115.371 Criminal and administrative agency investigations.

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

Allegations of sexual abuse are investigated by the Richland County Sheriff's Office and Richland County Children Services. If the allegation involves an employee of Abraxas Ohio the matter is also referred to the GEO Office of Professional Responsibility. Substantiated allegations of conduct that appears to be criminal are referred to the Richland County Prosecutor. If the victim was placed by another Children Services agency, that agency can also conduct an investigation.

As previously stated, the auditor reviewed two (2) PREA investigation files from 2015, four (4) from 2016, and two (2) from 2016. Six allegations alleged staff-on-resident sexual abuse. Of the two allegations reported in 2015, one was an allegation of staff-on-resident sexual abuse. Richland County Children Services reviewed the case and declined further investigation. The GEO Office of Professional Responsibility also investigated the allegation and said there was no finding against the staff member. The second allegation was resident-on-resident sexual abuse. Richland County Children Services reviewed the case and declined further investigation.

A staff-on-resident allegation that was reported in 2016 actually happened in 2008 and was investigated in 2008. A staff member was terminated. There were two other staff-on-resident sexual abuse allegations reported in 2016. The first allegation was made by another agency and alleged staff-on-resident sexual abuse. The other agency reported the allegation to The Richland County Sheriff's Office. At the time of the audit, the investigation was still listed as an "on-going investigation." In the second allegation, a resident sent a note to a staff member which was discovered by another staff member. The staff member was placed on leave and resigned a few weeks later. The GEO OPR referred the matter to the Richland County Sheriff's Office. At the time of the audit, the Sheriff's Office reported the investigation was still, "on-going." The fourth allegation in 2016 was an allegation of resident-on-resident sexual abuse. The Richland County Children Services received the allegation and reported it to Abraxas Ohio. Children Services reviewed the allegation and declined to investigate.

In 2017, there were two allegations of staff-on-resident sexual abuse. In one allegation, the GEO OPR investigation referred the case to the Richland County Children Services who reviewed the allegation and declined to investigate. The staff member continued working, but was placed on a supervision plan. The second allegation was referred to the Sheriff's Office and Richland County Children Services. Those investigations were "on-going," at the time of the audit.

The PCM/Quality Compliance Specialist serves as the facility's lead PREA Investigator. The Investigator said she had completed the Basic PREA training, the Booster training, and also received GEO's specialized training for facility investigators. The Facility Director and two Program Managers have also received the specialized training for facility investigators and serve as back-up investigators in the absence of the lead PREA Investigator.

The PREA Investigator said Abraxas Ohio would not terminate an investigation solely because the source of the allegation recants the allegation. She also said the credibility of an alleged victim, suspect, or witness would be assessed on an individual basis and would not be determined by the person's status as a resident or staff. A resident would never be asked to take a polygraph exam.

Administrative reports are conducted to if determine of staff actions or failures to act contributed to an abuse.

The PREA Investigator said all investigations are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind the credibility assessments and the investigative facts and findings.

All written reports are retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years, unless the abuse was committed by a juvenile resident and applicable law requires a shorter retention period.

The departure of the alleged abuser or victim from employment or control of Abraxas Ohio does not provide a basis for terminating an investigation.

Standard

§ 115.372 Evidentiary standard for administrative investigations.

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

The Abraxas Ohio will not impose any standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

Standard

§ 115.373 Reporting to residents.

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

GEO Policy 5.1.2-B, Investigating Allegations of Sexual Abusive Behavior and Evidence Collection describes how the person who made the allegation is to be informed of the outcome of the investigation.

Abraxas Ohio has a form that is used to notify a victim of the outcome of the investigation and what has happened to the alleged abuser.

In the eight investigations reviewed by the auditor, all of the alleged victims were discharged from the facility before they could be informed of the outcomes of the investigations or the investigations were on-going. The Facility Director said that if a resident was still in the program when an investigation was completed the resident would be informed of the outcome on Abraxas Ohio form.

Standard Discipline

§ 115.376 Disciplinary sanctions for staff.

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

for the relevant review period)

Does Not Meet Standard (requires corrective action)

GEO Policy 5.1.2-B, "Investigating Allegations of Sexual Abusive Behavior and Evidence Collection," states,

"M. Disciplinary Actions

1. Employee Disciplinary Sanctions (§115.376)

a. Employees may be subject to significant disciplinary sanctions for sustained violations of Sexual Abuse and Harassment policies, up to and including termination for any Employee found guilty of Sexual Abuse.

b. Termination shall be the presumptive disciplinary sanction for staff who have engaged in Sexual Abuse.

c. Disciplinary sanctions for violations of agency policies relating to Sexual Abuse or Sexual Harassment (other than actually engaging in Sexual Abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

d. All terminations and resignation for such conduct shall be reported to law enforcement and licensing agencies, unless the activity was clearly not criminal"

The Abraxas Ohio Policy LD-05, "Sexual Abusive Behavior Prevention and Intervention," states, "Engaging in a romantic and/or sexual relationship with Residents may result in employment termination and/or termination of the Contractual or Volunteer status, and/or criminal charges." The policy continues, "Upon substantiation of any allegations of sexual conduct, appropriate disciplinary actions will be taken against Employees, Contractors or Volunteers, including possible criminal prosecution."

The Abraxas Ohio Employee Handbook states, "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 termination,"

Any termination of staff for sexual abuse, or resignation by staff who would have been terminated for sexual abuse shall also be reported to law enforcement.

The Facility Director said there have been no terminations of any employee, contractor, or volunteer as a result of substantiated allegation of sexual abuse.

Standard

§ 115.377 Corrective action for contractors and volunteers.

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

As stated in the previous paragraph, the Abraxas Ohio Policy LD-05, "Sexual Abusive Behavior Prevention and Intervention," states, "Engaging in a romantic and/or sexual relationship with Residents may result in employment termination and/or termination of the Contractual or Volunteer status, and/or criminal charges." The policy continues, "Upon substantiation of any allegations of sexual conduct, appropriate disciplinary actions will be taken against Employees, Contractors or Volunteers, including possible

criminal prosecution.”

GEO Policy 5.1.2-B, states, “Corrective Action for Volunteers (§115.377)

a. Any Volunteer who engages in Sexual Abuse or Sexual Harassment shall be prohibited from contact with Residents and shall be reported to law enforcement, unless the activity was clearly not criminal, and relevant licensing bodies. GEO is committed to investigating, and referring for prosecution, any Volunteer that engages in such behavior.

b. In the case of any other violation of GEO Sexual Abuse or Sexual Harassment policies by the Volunteer, the Facility shall notify the applicable GEO Contracting Authority who will take remedial measures, and shall consider whether to prohibit further contact with Residents.

With regard to contractors, the GEO Policy states,
“Corrective Action for Contractors (§115.377)

a. Any Contractor who engages in Sexual Abuse or Sexual Harassment shall be prohibited from contact with Residents and shall be reported to law enforcement, unless the activity was clearly not criminal, and relevant licensing bodies. GEO is committed to investigating, and referring for prosecution, any Contractor that engages in such behavior.

b. In the case of any other violation of GEO Sexual Abuse or Sexual Harassment policies by the Contractor, the Facility shall notify the applicable GEO Contracting Authority who will take remedial measures, and shall consider whether to prohibit further contact with Residents.”

The contractors interviewed by the auditor confirmed they were trained on Abraxas Zero Tolerance Policy and the consequences of sexual abuse or sexual harassment of residents. As previously noted, there are no volunteers at this facility.

The PCM told the auditor that no contractors or volunteers have been terminated for violation of the Abraxas Ohio PREA policies.

Standard

§ 115.378 Interventions and disciplinary sanctions for residents.

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

The GEO Policy 5.1.2-B states,

“Interventions and Disciplinary Sanctions for Residents (§115.378)

a. Residents who are found guilty of engaging in Resident-on-Resident Sexual Abuse (either through administrative or criminal investigations) shall be subject to a formal intervention or disciplinary sanctions.

b. In the event a disciplinary sanction results in isolation of the Resident, Facilities shall not restrict daily large-muscle exercise or access to any legally required educational programming or special education services. Residents in isolation shall receive daily visits from a medical or mental health care clinician and shall have access to other programs and work opportunities to the extent possible.

c. The disciplinary process shall consider whether a Resident’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 therapy, counseling or other interventions designed to address the reasons or motivations for the abuse, the Facility shall consider requiring the offending Resident to participate

as a condition of access to any rewards-based behavior management system or other behavior-based incentives, but not as a condition to access to general programming or education.

e. Disciplining a Resident for sexual contact with an Employee is prohibited unless it is found that the Employee did not consent to the contact.

f. A Resident's report of Sexual Abuse made in good faith 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 Residents is Sexual Abuse unless it is determined that the activity was coerced.

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 referred for prosecution, unless the activity was clearly not criminal."

The Abraxas Ohio Policy TX-O2, "Behavior Intervention/Level System" lists sexual abuse and sexual harassment as a Major Community Violation (MCV). The consequences of such a major rule violation can mean an extended stay in Abraxas Ohio or transfer out of the facility to either a juvenile detention facility or state facility. The resident could also be charged by the Prosecutor and taken to a trial.

The disciplinary process would consider whether the resident's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, should be imposed.

The Mental Health staff said they could consider additional therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for the abuse to the offending resident.

In the "Youth Safety Guide" the following question is asked and answered:

"What will happen if I abuse someone?"

We will investigate the abuse and will seek criminal charges. If you are found guilty you will likely face more time in Abraxas custody, be placed in a correctional facility, or placed in detention or jail depending on your age and the charges filed.

If you have trouble controlling your actions, seek help so that you don't harm anyone."

The Facility Director told the auditor there have been no disciplinary sanctions taken against residents related to a substantiated allegation of sexual abuse.

Standard Medical and Mental Care

§ 115.381 Medical and mental health screenings; history of sexual abuse.

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

In Abraxas Ohio Policy PE-01, "Clinical Assessment Process," it states,

"6. Screening for the Risk of Victimization and Sexually Aggressive Behavior

No later than 72 hours of the client's arrival at the facility and periodically throughout the client's stay in the program, the program will use information about his personal history and behavior to reduce the risk of sexual abuse by or upon the resident.

During the intake process, the Assessment Therapist will complete an objective screening instrument with the client. The purpose of the screening instrument will be to obtain and use information about the client's personal history and behavior to reduce the risk of sexual abuse by or upon the client. If the client has experienced prior sexual victimization or has previously perpetrated sexual abuse, he will be offered a follow-up meeting with a Therapist within 14 days. If the client scored vulnerable to victimization on the initial PREA risk screening assessment, the client will be reassessed within 30 days.

The program will use the information gathered to make room and programming assignments for the client with the goal of keeping him safe and free from sexual abuse. The program is prohibited from isolating clients from others. Placement and programming assignments for each transgender or intersex client shall be reassessed at least monthly to review any threats to safety experienced by the client."

The auditor interviewed a Therapist who performs the screening for risk of victimization and abusiveness. The Therapist said if the screening indicates that a resident has experienced prior sexual victimization, regardless of where it occurred, he is offered a follow-up meeting with medical or mental health staff. Likewise, if the screening indicates that a resident has previously perpetrated sexual abuse, regardless of where it occurred, that resident is also offered a follow-up meeting with a mental health practitioner within 14 days. She also said that information related to the victimization or abusiveness shall be limited to medical and mental health practitioners and other staff, as necessary to create treatment plans, security and safety plans, and housing and program assignments or as otherwise required by Federal, State, or local law. The Therapist stated that the follow-up meetings would be held within a few days, if not hours.

The PCM provided the auditor with several examples of the assessment and the follow-up assessments that were completed in less than 14 to 30 days.

The auditor selected seven resident files and found very complete documentation that the initial screening was completed and that follow-up screenings were completed within the first 30 days and every 90 days thereafter. The auditor found the Therapist's recordings to be very thorough.

Standard

§ 115.382 Access to emergency medical and mental health services.

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

The Nurse Manager stated that the medical department at Abraxas Ohio is staffed four with LPNs, a contract pediatrician, a contract psychiatrist and the Nurse Manager. The nurses are on duty from 7:30 a.m. to 9:00 p.m., seven days a week. The medical staff arrange for all medical care, required dental care, and pharmacological services, including psychological and mental health services as accessed through third party insurance and/or Medicaid. If there are medical issues after the medical hours, the staff call the Nurse Manager.

The Clinical Director said there are seven Therapists and three clinical supervisors.

If an allegation of sexual abuse is made when nurses or mental health staff are not on duty, the On-Duty Administrator and staff are trained to take preliminary steps to protect the victim pursuant to Standard 115.362. The On-Duty Administrator will immediately notify the appropriate medical and mental health practitioners, Facility Administrator, and the PREA Investigator. The Facility Director will call Richland County Children Services, the Richland County Sheriff's Department, and the agency that placed the resident.

A resident/victim of sexual abuse will be transported by the Richland County Sheriff's Department to the Ohio Health Mansfield Hospital which is located in Mansfield, Ohio, approximately eight miles from Abraxas Ohio and is part of the Sexual Assault Response Network of Central Ohio. The hospital will provide SAFE/SANE exams, as needed, without financial cost to the victim.

At the hospital, a resident/victim of sexual abuse will be offered timely information about and timely access to sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

The Facility Director told the auditor there have not been any allegations of sexual abuse that required emergency medical treatment at the hospital. The Director also said a resident would not be responsible for any financial costs associated with treatment services provided, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Standard

§ 115.383 Ongoing medical and mental health care for sexual abuse victims and abusers.

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

GEO Policy 5.1.2-B states,

"Ongoing Actions After Reports of Sexual Abuse

1. Ongoing Medical and Mental Health Care (§115.383)

- 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 Resident-on-Resident abusers within 60 days of learning of such abuse history and offer treatment deemed appropriate by Mental Health Practitioners. Note: "known abusers" are those Resident abusers in which a PREA investigation determined either administratively substantiated or substantiated by outside law enforcement.
- f. All refusals for mental health services shall be documented."

An Abraxas Ohio resident who is a victim of sexual abuse will be seen by his Therapist and the medical staff and offered continuing medical and mental health treatment services. These services will become part of the resident's overall treatment plan. The scope of these evaluations and treatment services will include services for continued care, as appropriate, following their transfer or release from Abraxas Ohio. The resident/victim and the alleged resident/abuser will be seen by a Therapist as soon as possible following the alleged incident.

The Nurse Manager said the involved residents will be offered tests for sexually transmitted infections, as needed.

As previously stated, Abraxas Ohio will attempt to conduct a mental health evaluation on the alleged abuser within 60 days of learning of such abuse history and offer treatment deemed appropriate by

a mental health team. Services will be provided without financial cost to the resident.

The Nurse Manager said she believes the medical and mental health services at Abraxas Ohio are better than the level of care provided in the community because there are more therapists per child and because services are more intensive.

Standard Data Collection and Review

§ 115.386 Sexual abuse incident reviews.

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

GEO Policy 5.1.2-B states,

“Sexual Abuse Incident Reviews (§115.386)

- 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.
- c. 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.
- d. A “PREA After-Action Review Report” (see attachment J) of the team’s finding shall be completed and submitted to the PREA Compliance Manager and 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.”

The Facility Director said the Abraxas Ohio After Action Review Team includes the Facility Director, the PCM/PREA Investigator, the Clinical Director, the Nurse Manager, and other Program Managers as needed.

GEO/Abraxas has a PREA After-Action Review Report that requires the Team to answer all the areas in 115.386 (d) (1) through (5).

The Facility Director said the After Action Review Team (Sexual Abuse Incident Review Team) would meet as soon as possible, after the investigations by the Children Services Agency, the Richland County Sheriff’s Department, the GEO OPR, and the internal administrative investigations were completed. The Team then prepares an After-Action Review Report. The After-Action Review Report would then be forwarded to the GEO PREA Director and the Office of Professional Responsibility for review.

At the time of the audit, the Facility Director said there had been no After-Action Review Team Meetings because the investigations being conducted by the Sheriff’s Department and the GEO OPR were still listed as “on-going.”

Standard

§ 115.387 Data collection.

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

The GEO Policy 5.1.2-B regarding data collection states,

"N. Data

1. Data Collection (§115.387)

- 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 (DOJ) 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 forwarding statistical reports to the Corporate PREA Coordinator on a monthly basis. (see attachment D, "Monthly PREA Incident Tracking Log").
- 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."

Abraxas Ohio uses a Monthly PREA Incident Tracking Log that provides an overview of every PREA incident at the facility. Per GEO policy, when an allegation is reported and investigated, a PREA Incident Report Survey is also completed by the PCM. This form captures all the information necessary to answer all questions on the most recent version of the Survey of Sexual Violence (DOJ) and more. This form is sent to the PREA Director in the corporate office. The GEO Group collects and maintains data from all incident-based documents, including reports, investigations, and After Action Review Team analyses.

The PCM is responsible for the collection of all PREA information and data at Abraxas Ohio. The PCM provided written documentation of the data collection procedure.

Because of the comprehensive and professional approach GEO/Abraxas has taken, agency-wide, to data collection, the auditor finds this facility exceeds the standard.

Standard

§ 115.388 Data review for corrective action.

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

GEO Policy 5.1.2-B regarding Data Review for Corrective Action states,

"2. Data Review for Corrective Action (§115.388)

- a. GEO shall review all data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by:
 1. Identifying problem areas;
 2. Taking corrective action on an ongoing basis; and
 3. Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.
- b. Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of GEO's progress in addressing sexual abuse.
- c. The annual report shall be approved by the appropriate divisional authority and made readily available to the public upon approval, at least annually through GEO's website or the client's website

as required by contract.

d. GEO may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.”

The GEO/Abraxas collects data from the PREA Incident Report Survey, identifies problem areas, and takes corrective action, as needed, on an on-going basis.

The GEO Group publishes its Annual PREA Report. This report identifies issues needing attention, corrective actions to be taken, training that has been done, policies and procedures that have been enhanced, and presents data from all GEO facilities, including the Abraxas programs. The Annual Report is a working document and is used to improve sexual safety in all facilities. The report is approved by the head of GEO Corrections. The auditor was very impressed by the transparency of the data and the comprehensiveness of the report. This report is available on the GEO Web site.

Because the Annual Report captures all the data required by the standard and much more, the auditor finds that company exceeds the requirements of this standard.

Standard

§ 115.389 Data storage, publication, and destruction.

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

GEO Policy 5.1.2-B states,

“3. Data Storage, Publication, and Destruction (§115.389)

Data collected pursuant to this procedure shall be securely retained for at least 10 years or longer if required by state statute. Before making aggregated Sexual Abuse data publicly available, all personal identifiers shall be removed.”

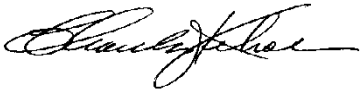
The PCM stated that she secures all data collected pursuant to 115.387 in a secure cabinet, in a secure office and access to these files is limited to a small number on the administrative team. This data is maintained for at least 10 years, in accordance with this standard and GEO policy.

As previously mentioned, the Annual Report, which includes aggregated sexual abuse data, is available on the GEO Web site.

The GEO Group raised the importance of the data collection and analysis even further by creating a position titled Corporate PREA Data Specialist in April 2014. This person manages the collection and analysis of PREA data from all GEO facilities with PREA obligations via the automated secure agency PREA database. The creation of this position clearly exceeds this standard.

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 July 23, 2017, Abraxas Ohio, Shelby, Ohio meets the requirements of the Prison Rape Elimination Act, Juvenile Facility Standards.



Auditor Signature

May 12, 2019

Date