

**REA AUDIT REPORT    INTERIM    FINAL**

**JUVENILE FACILITIES**

**Date of report:** August 10, 2017

<b>Auditor Information</b>			
<b>Auditor name:</b> Robert Latham			
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<b>Telephone number:</b> (205) 746-1905			
<b>Date of facility visit:</b> June 29, 2017			
<b>Facility Information</b>			
<b>Facility name:</b> Bedford County Juvenile Detention Center			
<b>Facility physical address:</b> 101 Lane Parkway, Shelbyville, Tennessee 37160			
<b>Facility mailing address:</b> <i>(if different from above)</i> same as above			
<b>Facility telephone number:</b> 931-680-9720			
<b>The facility is:</b>	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input checked="" type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
<b>Facility type:</b>	<input type="checkbox"/> Correctional	<input checked="" type="checkbox"/> Detention	<input type="checkbox"/> Other
<b>Name of facility's Chief Executive Officer:</b> Michael Bennett			
<b>Number of staff assigned to the facility in the last 12 months:</b> 13			
<b>Designed facility capacity:</b> 9			
<b>Current population of facility:</b> 8			
<b>Facility security levels/inmate custody levels:</b> Secure			
<b>Age range of the population:</b> 12-17			
<b>Name of PREA Compliance Manager:</b> N/A		<b>Title:</b> Click here to enter text.	
<b>Email address:</b> Click here to enter text.		<b>Telephone number:</b>	
<b>Agency Information</b>			
<b>Name of agency:</b> Bedford County Juvenile Detention Center			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> Bedford County			
<b>Physical address:</b> 101 Lane Parkway, Shelbyville, Tennessee 37160			
<b>Mailing address:</b> <i>(if different from above)</i> same as above			
<b>Telephone number:</b> 931-680-9720			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Michael Bennett		<b>Title:</b> Director	
<b>Email address:</b> michael.bennett@bedfordcountyttn.org		<b>Telephone number:</b> 931-680-9720	
<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Michael Bennett		<b>Title:</b> Director/PREA Coordinator	
<b>Email address:</b> michael.bennett@bedfordcountyttn.org		<b>Telephone number:</b> 931-680-9720	



## AUDIT FINDINGS

### NARRATIVE

The PREA audit for the Bedford County Juvenile Detention Center (BCJDC) in Shelbyville, Tennessee was conducted June 29, 2017.

Notices of the PREA audit, along with contact information, were posted well in advance of six weeks prior to the on-site audit. The Facility Director emailed photographs of the posted audit notices for confirmation. A flash drive containing the BCJDC Pre-Audit Questionnaire, DCS and BCJDC policies, the BCJDC mission statement, and documentation to support each standard was provided to the auditor prior to the on-site audit. The documentation was well organized.

Upon receipt and review of the flash drive, the auditor requested minimal additional documentation prior to the on-site audit. Some additional documentation was provided during the on-site audit and during the report writing period for clarification and additional support of the standards.

All items required by the PREA Pre-Audit Questionnaire were uploaded including:

- o Bedford County Juvenile Detention Center mission statement
- o Facility population reports for the 1st, 10th and 20th day of the month for the previous twelve months
- o Bedford County Juvenile Detention Center Facility Schematic

The auditor communicated with the PREA Coordinator to discuss the tentative schedule of the on-site audit. After introductions and discussing the agenda for the day, the auditor proceeded with the facility tour, accompanied by the Facility Director. All areas of the facility were toured, including: living units, dayroom/classroom, administration, shower area, control center, recreation, intake, and the visitation area.

PREA posters were located throughout the facility in both English and Spanish. They contained important PREA information and the DCS Child Abuse Hotline number. Information was provided for internal and external ways to report allegations of sexual abuse and sexual harassment and how to access community based services. Grievance forms were accessible to the residents. They are deposited directly into the Director's office.

Following the tour, the auditor began interviewing staff and residents. During the on-site audit, the auditor interviewed the Agency Head designee, Director, PREA Coordinator, nine (9) specialized staff, six (6) randomly selected staff from both shifts, all eight (8) residents at the facility, one (1) gay male resident, and one (1) resident who disclosed prior sexual victimization during intake. A total of twenty-eight (28) interviews were conducted. At the end of the day an exit briefing was conducted with the Director.

## **DESCRIPTION OF FACILITY CHARACTERISTICS**

The Bedford County Juvenile Detention Center (BCJDC) is a juvenile detention center located in Shelbyville, Tennessee. BCJDC is certified by the Tennessee Department of Children Services (DCS). The facility has the capacity to provide secure housing for up to nine (9) male and female juveniles from surrounding counties and DCS. The juveniles are detained until their scheduled court date or until they are assigned placement within the DCS system.

The facility currently employs eleven (11) staff. In addition to the Director, there are four Sergeants and six Detention Officers; five are female and five are male. Medical Services are provided by the DCS Our Kids Program in Nashville, locally by Tenova Healthcare and additionally by a nurse employed with the Bedford County Sheriff's Department (BCSD). Mental Health services are provided by a local psychologist. Educational services for short term residents are coordinated by their school and DCS provides educational services to the residents waiting for placement within the DCS system. A case manager is available through DCS. Visitation, recreation and exercise are included in the daily activity schedule. The average length of stay is approximately 5 days.

BCJDC is a one story, one building facility consisting of the Director's office, a lobby, staff restroom and storage, a central communications center referred to as "the Tower", a visitation area, booking area, single resident shower with shower curtain, a recreation area and a dayroom. There are five cells containing one to three beds. Cameras are located throughout the facility. There are no identifiable blind spots. All areas of the facility are viewed on a video monitoring system located in the central communications center.

## **SUMMARY OF AUDIT FINDINGS**

The on-site audit of the Bedford County Juvenile Detention Center (BCJDC), located in Bedford County Tennessee, was completed June 29, 2017. The results indicate the BCJDC exceeded two (2) standards; met thirty-five (35) standards; zero (0) standards were not met; and four (4) standards were not applicable.

Number of standards exceeded: 2

Number of standards met: 35

Number of standards not met: 0

Number of standards not applicable: 4

### **Standard 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator**

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

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

BCJDC policy states a commitment to a zero-tolerance standard sexual abuse and sexual harassment as outlined in Public Law 108-79, Section 3. The policy outlines how the facility will implement the zero-tolerance approach to preventing, detecting and responding to sexual abuse, sexual assault, sexual misconduct, sexual harassment, or rape. Definitions of prohibited behaviors are included in the policy. The policy is inclusive of strategies and responses to reduce and prevent sexual abuse and sexual harassment of residents. The Director/PREA Coordinator is identified on the detention center’s organizational chart.

#### **Interviews**

- PREA Coordinator  
The PREA Coordinator confirmed he has sufficient time and authority to develop, implement and oversee the detention center’s efforts to comply with the PREA standards.

#### **Policy**

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

#### **Supporting Documentation**

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- BCJDC Organizational Chart

### **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)
- Non-Applicable Standard (exempt from standard)

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

BCJDC does not contract with other facilities for the confinement of residents.

## Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

## Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

## 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)

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BCJDC Policy requires a 1:5 staff to resident ratio during both twelve-hour shifts to protect residents against sexual abuse. Deviations would be documented. During the twelve-month audit period, there were no deviations from the staffing plan. The facility, in collaboration with the PREA Coordinator, reviews the staffing plan at least annually.

When assessing the staging plan, the detention center takes into consideration generally accepted juvenile detention practices; any findings of inadequacy; blind spots; the composition of the juvenile population; the number and placement of supervisory staff; programs occurring on a particular shift; applicable State or local laws, regulations, or standards; the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and any other relevant factors.

Supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment on both shifts. Policy prohibits staff from alerting other staff members that supervisory rounds are occurring. Documentation is included in the shift reports.

BCJDC exceeds the requirements of the standard with excellent staff supervision and staffing ratios of 1:5 on both shifts. The detention center has not reported having any allegations of sexual abuse or sexual harassment within the twelve-month audit period and since the 2014 PREA audit.

## Interviews

- Facility Director  
The interview with the Facility Director confirmed the facility regularly develops a staffing plan. The plan maintains adequate staffing levels and ratios of 1:5 during waking hours and 1:5 during sleeping hours to protect residents against sexual abuse. The plan is documented. The Facility Director confirmed all aspects of the standard are considered in developing the plan.
- PREA Coordinator  
The PREA Coordinator confirmed that when assessing adequate staffing levels and the need for video monitoring, the assessment of the facility staffing plan considers all factors required by the standard. He participates in making

assessments of, or adjustments to, the staffing plan for the facility and the assessments happen at least annually.

- Intermediate or Higher-Level Facility Staff  
Interviews confirmed the documented, unannounced, supervisory rounds occur on both shifts and staff are not alerted when they occur.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero - Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA
- DCS Policy 27.38 - Youth Supervision

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Staffing Plan Assessment
- Unannounced Supervisory Rounds (both shifts)

### 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)

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BCJDC does not conduct cross-gender pat down, strip searches or visual body cavity searches. Policy does not allow any types of cross-gender searches including pat down searches. Staff members are prohibited from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident’s genital status. There were no cross-gender searches during the twelve-month audit period. Also, no residents identified as transgender during the twelve-month audit period.

Facility policies and procedures enable residents to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their buttocks or genitalia. Showering is supervised by staff of the same gender. Residents are required to remove their clothing and shower behind the privacy of a shower curtain. Cameras within the cells of both female and male residents are viewed by staff of both genders. A strict dress code is in place that requires residents only change clothing in the shower area. In all other areas of the facility, including their sleeping areas, the residents are clothed at all times. Staff of the opposite gender do not enter the shower area when residents of the opposite gender are showering.

### Interviews

- Random Sample of Staff  
Interviews with staff confirmed they are knowledgeable policy does not allow any types of cross-gender searches. No staff reported having to conduct cross-gender pat-down searches and searches of transgender and intersex residents. All staff interviewed confirmed they are aware of the policy prohibiting them from searching or physically

examining a transgender or intersex resident for the sole purpose of determining the resident's genital status.

- Random Sample of Residents  
Resident interviews confirmed staff of the opposite gender do not enter the shower area when they are showering. All residents interviewed confirmed staff of their same gender would perform pat down searches. All residents interviewed confirmed they are never naked in full view of staff of the opposite gender.
- Transgender or Intersex Residents  
No residents identified as transgender or intersex.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### Standard 115.316 Residents with disabilities and residents who are limited English proficient

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

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

The facility director confirmed residents with disabilities would be referred to DCS to ensure they have an equal opportunity to participate and benefit from all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and harassment.

The facility ensures meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient. An interpreter is available through the court and the facility has a bilingual Spanish/English speaking staff member. Hotline numbers, PREA brochures and PREA posters are available in Spanish and English.

The facility does not rely on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances. No resident interpreters, resident readers, or other types of resident assistants were used during the twelve-month audit period. The facility did not identify any limited English proficient residents during the on-site audit.

### Interviews

- Agency Head  
The interview with the Facility Director confirmed residents with disabilities would be referred to DCS to ensure they have an equal opportunity to participate and benefit from all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and harassment. Residents who are limited English proficient are provided with an

interpreter.

- Random Sample of Staff  
Interviews with staff confirmed they would use an interpreter for residents who are limited English proficient. No staff interviewed recalled resident interpreters, resident readers, or other types of resident assistants being used in relation to allegations of sexual abuse or sexual harassment during the twelve-month audit period.
- Disabled and Limited English Proficient Residents  
No residents were identified as having a disability or being limited English proficient during the on-site audit.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Interpreter Services
- PREA Posters with Phone Numbers and Mailing Addresses for Outside Support Services
- End Silence Brochure: Youth Speaking Up about Sexual Abuse in Custody (English and Spanish)

### 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)

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Before hiring new employees, who may have contact with residents, the facility performs an extensive criminal background records check including: the National Sex Abuse Registry, Vulnerable Persons Abuse Registry, Tennessee Felony Database Clearance, Drug Offence Registry, and the Tennessee Department of Children’s Services Database. They contact prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Initial and three-year criminal background checks are reported on the Background Check History and IV-E Eligibility Checklist form.

The facility does not hire or promote anyone who may have contact with residents, and does not enlist the services of any contractor who may have contact with residents, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in 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.

These questions previously were not asked as part of the hiring process, promotions or during performance reviews. The PREA Audit Report

facility and the auditor agreed the questions needed to be included in applications and performance reviews. All employees at BCJDC were given an acknowledgement form, the PREA Employment Questionnaire, with the three questions. All employees answered affirmatively that they have not engaged in the activities listed in paragraph (a) of the standard. The PREA Coordinator provided the auditor with copies of the completed acknowledgement forms. All future applicants will answer the questions as part of the hiring process. These corrective actions brought the facility in to compliance with this standard. Employees have a continuing affirmative duty to disclose any such misconduct and material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

BCJDC exceeds this standard due to their extensive background check process and three-year follow-up checks.

### **Interview**

- Administrator (Human Resources) Staff  
The Facility Director reported the facility complies with the standard. Extensive criminal records background checks are conducted every three years.

### **Policy**

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### **Supporting Documentation**

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Employee Acknowledgement and Notification of PREA
- CS-0687, Background Check History and IV-E Eligibility Checklist
- Tennessee Department of Children's Services Database Search Results
- PREA Employment Questionnaire

### **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)

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BCJDC added a new video surveillance system since their 2014 PREA audit. The facility considered the ability to protect residents from sexual abuse when installing the system. The new system consists of sixteen (16) cameras and a new monitor.

### **Interviews**

- Agency Head  
The Facility Director confirmed the facility would consider the ability to protect residents from sexual abuse when designing and upgrading facilities and when installing video surveillance or other technologies.

### **Supporting Documentation**

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Facility Schematic

**Standard 115.321 Evidence protocol and forensic medical examinations**

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

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BCJDC is required to have all investigations conducted according to DCS guidelines. No investigators are employed by BCJDC. BCJDC follows instructions from the DCS Special Investigative Unit (SIU) in matters relating to sexual abuse and harassment allegations and investigations. Whenever an allegation is called in or communicated to the SIU they are the responsible agency for determining whether an allegation is substantiated, unsubstantiated or unfounded. It is possible that an allegation is called in and then determined not to meet the criteria of a sexual assault or harassment charge. If so these are categorized as being screened out. DCS adheres to the National Protocol for Sexual Assault Medical Forensic Examinations for Adults and Adolescents.

BCJDC has a MOU with the Bedford County Sheriff’s Department for criminal investigations of sexual assault and abuse allegations. BCJDC has a MOU with the Sexual Assault Center (SAC). SAC provides victim advocacy and crisis intervention services. The Our Kids program provides qualified medical practitioners for forensic examinations and victim advocacy services to the residents of BCJDC. This was verified by a telephone interview with a representative of the Our Kids Program.

BCJDC has had no allegations of sexual abuse during the twelve-month audit period. There have been no administrative or criminal investigations. Accordingly, there have been no referrals for forensic medical examinations.

**Interviews**

- PREA Coordinator  
The PREA Coordinator confirmed a qualified victim advocate from the Sexual Assault Center (SAC) would provide emotional support, crisis intervention, information, and referrals during the forensic medical examination process and investigatory interviews.
- Random Sample of Staff  
All staff interviewed stated they know and understand the agency’s protocol for obtaining usable physical evidence if a resident alleges sexual abuse. All staff interviewed stated DCS investigators are responsible for conducting administrative sexual abuse investigations.

**Policy**

- BCJDC PREA Policy
- DCS Policy 14.25 Special Child Protective Services Investigations
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

## Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Memorandum of Understanding with the Sexual Assault Center (SAC)
- Memorandum of Understanding with the Bedford County Sheriff's Department (BCSD)

## 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)

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DCS ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse, sexual assault, sexual misconduct and sexual harassment. All incidents are documented on the Tennessee Family and Child Tracking System (TFACTS). The policy regarding the referral of allegations of sexual abuse or sexual harassment for a criminal investigation is published on the BCJDC and DCS websites. BCJDC has a MOU with the Bedford County Sheriff's Department (BCSD) for criminal investigations of sexual assault and abuse allegations. The MOU describes the responsibilities for both BCJDC and BCSD.

There were no allegations of sexual abuse or sexual harassment received during the twelve-month audit period. Therefore, there were no administrative or criminal investigations.

## Interviews

- Agency Head  
The Facility Director confirmed an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Allegations are documented on TFACTS and a DCS investigator is assigned to investigate all allegations.
- Investigative Staff  
A DCS investigator interviewed confirmed all allegations of sexual abuse or sexual harassment are referred for criminal investigations, unless the allegation does not involve potentially criminal behavior.

## Policy

- BCJDC PREA Policy
- DCS Policy 14.25 Special Child Protective Services Investigations
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

## Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Memorandum of Understanding with the Bedford County Sheriff's Department (BCSD)

## Standard 115.331 Employee training

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

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All BCJDC employees and who have direct contact with residents receive training during orientation or in-service and through annual refresher training thereafter. Training is tailored to the unique needs and attributes of the residents of juvenile facilities and to the gender of the residents of the facility. The facility does not employ contractors.

All BCJDC employees who have contact with residents complete training on:

(1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Residents’ right to be free from sexual abuse and sexual harassment; (4) The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in juvenile facilities; (6) The common reactions of juvenile victims of sexual abuse and sexual harassment; (7) How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents; (8) How to avoid inappropriate relationships with residents; (9) How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents; (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; and (11) Relevant laws regarding the applicable age of consent.

### Interviews

- Random Sample of Staff  
Staff interviewed confirmed they have received training on the eleven (11) PREA topics in standard 115.331 when hired and annually thereafter.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Required Training Chart for all DCS Staff
- PREA PowerPoint
- Form CS-0940 Employee/Volunteer/Contractor Acknowledgement and Notification of Prison Rape Elimination Act (PREA)

### 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)

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All BCJDC volunteers and contractors receive training on their responsibilities under the facility’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures, based on the services they provide and the level of contact they have with residents. The facility maintains form CS-0940 Employee/Volunteer/Contractor Acknowledgement and Notification of Prison Rape Elimination Act (PREA) confirming that volunteers and contractors understand the training they have received. The Facility Director reported not using the services of any volunteers or contractors during the twelve-month audit period and during the on-site audit.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Form CS-0940 Employee/Volunteer/Contractor Acknowledgement and Notification of Prison Rape Elimination Act (PREA)

### 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)

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During the intake process, residents receive information explaining, in an age appropriate fashion, the BCJDC zero-tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse or sexual harassment, their right to be free from retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and detention center policies for responding to incidents of sexual abuse or sexual harassment. Resident education is accomplished through viewing a PREA video, reviewing the PREA Education Curriculum, and PREA brochures.

The facility director confirmed residents with disabilities would be referred to DCS to ensure they have an equal opportunity to participate and benefit from all aspects of the facility’s efforts to prevent, detect and respond to sexual abuse and harassment. Limited English proficient residents will be provided with an interpreter for assessments and to provide educational materials. BCJDC does not rely on resident interpreters for PREA information and education.

All residents sign DCS form CS-0939, Youth Acknowledgment and Notification of Prison Rape Elimination Act (PREA) to acknowledge they have been notified and informed of PREA and on how to report incidents of sexual abuse, sexual assault, sexual misconduct, and sexual harassment.

The facility ensures that key information is continuously and readily available or visible to residents through posters, and resident PREA brochures. Posters and PREA brochures are available in English and Spanish.

### Interviews

- Intake Staff  
The interview revealed resident education is accomplished through viewing a PREA video, reviewing PREA information and providing PREA brochures. All residents sign DCS form CS-0939, Youth Acknowledgment and Notification of Prison Rape Elimination Act (PREA).
  
- Random Sample of Residents  
Residents interviewed confirmed they were informed of their right not to be sexually abused and sexually harassed, how to report, and their right not be punished for reporting, during the intake process. They confirmed they received information about the facility's rules against sexual abuse and sexual harassment through education, viewing a PREA video, and reviewing PREA brochures.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Resident PREA Education Curriculum
- PREA Video
- DCS form CS-0939, Youth Acknowledgment and Notification of Prison Rape Elimination Act (PREA)
- PREA Posters with Phone Numbers and Mailing Addresses for Outside Support Services
- End Silence Brochure: Youth Speaking Up about Sexual Abuse in Custody (English and Spanish)

### 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)
- Non-Applicable Standard (exempt from standard)

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

BCJDC does not employ investigators. Investigators are employed and trained by DCS. DCS investigators receive specialized training from the Tennessee Bureau of Investigations (TBI) and National Institute of Corrections (NIC) online training in sexual abuse investigations involving juveniles.

The DCS Special Investigators Unit Training Curriculum includes: (1) What is PREA; (2) Confined Settings and Sexual Abuse Investigations; (3) Receiving a Referral for a Sexual Abuse Investigation in a Confined Setting; (4) Gathering Information during a Sexual Abuse Investigation in a Confined Setting; (5) Conducting a Sexual Abuse Investigation within a Confined Setting; (6) Interviewing Juvenile Sexual Abuse Victims; (7) Sexual Abuse Evidence Collection in Confinement Settings; (8) False Allegations; (9) Recanting Information; (10) Witnessing Sexual Abuse; (11) Substantiating a Case for Prosecution Referral; (12) Miranda Warning; and (13) Garrity Warning

The BCSD conducts criminal investigations. The MOU with the BCSD requires that in addition to the general training provided to all employees pursuant to (115.331) the investigators receive training on: (1) Conducting investigations in confinement settings; (2) Techniques for interviewing juvenile sexual abuse victims; (3) Proper use of Miranda and Garrity warnings; (4) Sexual abuse evidence collection in confinement settings; and (5) The criteria and evidence required to substantiate a case for administrative action or prosecution referral.

### **Interview**

- Investigator  
An interview with a DCS investigator confirmed receipt of general and specialized training.

### **Policy**

- BCJDC PREA Policy
- DCS Policy 5.2 Professional Development and Training Requirements
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### **Supporting Documentation**

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- DCS Special Investigations Unit Training Curriculum
- Required Training Chart for all DCS Staff
- Memorandum of Understanding with the Bedford County Sheriff's Department (BCSD)

### **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)
- Non-Applicable Standard (exempt from standard)

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

BCJDC does not employ full time or part-time medical staff or mental health staff.

## Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

## Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

## Standard 115.341 Screening for risk of victimization and abusiveness

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

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

During the intake process, DCS form CS-0946 Assessment, Checklist, and Protocol for Behavior and Risk for Victimization is administered to residents within twenty-four (24) hours of admission. This information is ascertained through conversations with residents during the intake process and by reviewing relevant documentation.

The assessment ascertains information about: (1) prior sexual victimization or abusiveness; (2) any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse; (3) current charges and offense history; (4) age; (5) level of emotional and cognitive development; (6) physical size and stature; (7) mental illness or mental disabilities; (8) intellectual or developmental disabilities; (9) physical disabilities; (10) the resident's own perception of vulnerability; and (11) any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents.

## Interviews

- PREA Coordinator  
The interview confirmed detention center policy outlines who should have access to a resident's risk assessment within the facility in order to protect sensitive information from exploitation. These individuals would include the facility director and staff on a need-to-know basis.
- Staff That Perform Screening for Risk of Victimization and Abusiveness  
The interview confirmed residents are screened upon admission or transfer from another facility within 72 hours. The screening includes all eleven (11) topics required by the standard. DCS form CS-0946 Assessment, Checklist, and Protocol for Behavior and Risk for Victimization is completed by asking the residents questions and reviewing resident's files. Risk levels are reassessed as needed. The screening information is available to the facility director and staff on a need-to-know basis.
- Randomly Selected Residents  
Interviews with the residents confirmed they were asked questions like the following examples at intake:  
(1) Have you have ever been sexually abused?

- (2) Do you identify with being gay, bisexual or transgender?
- (3) Do you have any disabilities?
- (4) Do you think you might be in danger of sexual abuse at the Facility?

**Policy**

- o BCJDC PREA Policy
- o DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

**Supporting Documentation**

- o PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- o DCS form CS-0946 Assessment, Checklist, and Protocol for Behavior and Risk for Victimization (English and Spanish)

**Standard 115.342 Use of screening information**

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

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

The “At-Risk Protocol” section of form CS-0946 Assessment, Checklist, and Protocol for Behavior and Risk for Victimization is initiated and completed on all residents who are identified as vulnerable for being at-risk of sexual victimization or identified as having the potential to victimize others. All information obtained pursuant to § 115.341 and subsequently to make housing, bed, program, education, and work assignments for juveniles is made with the goal of keeping all juveniles safe and free from sexual abuse. BCJDC does not use isolation.

Gay, bisexual, transgender, or intersex residents are not placed in a particular housing, bed or other assignment solely on the basis of such identification or status, nor does the facility consider gay, bisexual, transgender or intersex identification or status as an indicator of likelihood of being sexually abusive.

In making housing and programming assignments for transgender or intersex residents, the facility considers on a case-by-case basis whether a placement would ensure the resident’s health and safety, and whether the placement would present management or security problems. Placement and programming assignments for each transgender or intersex resident would be reassessed daily to review any threats to safety experienced by the resident. A transgender or intersex resident’s own views with respect to his or her own safety is given serious consideration. Transgender and intersex residents are given the opportunity to shower separately from other residents.

**Interviews**

- o PREA Coordinator  
The PREA Coordinator confirmed the facility uses all information obtained pursuant to §115.341 and subsequently to make housing, bed, program, education, and work assignments for residents with the goal of keeping all residents safe and free from sexual abuse.

Gay, bisexual, transgender, or intersex residents are not placed in particular housing, bed, or other assignments solely on the basis of such identification or status, nor does the facility consider lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator of likelihood of being sexually abusive.

Housing and programming assignments for transgendered and intersex residents are considered on a case-by-case basis whether the placement would ensure the resident's health and safety, and whether the placement would present management or security problems. Placement and programming assignments would be reassessed daily to review any threats to safety experienced by the resident. A transgender or intersex resident's own views with respect to his or her own safety is given serious consideration. He confirmed transgender and intersex residents are given the opportunity to shower separately from other residents. All residents shower separately.

- Staff That Perform Screening for Risk of Victimization and Abusiveness  
The interview confirmed that if a screening indicates that a resident has experienced prior sexual victimization, whether in an institutional setting or in the community, the resident is offered a follow-up meeting with a medical and/or mental health practitioner within two weeks. The facility uses the risk screening information to make housing assignments. A transgender or intersex resident's safety would be given serious consideration. Transgender or intersex residents would be permitted to shower separately. All residents shower separately.
- Facility Director  
The Facility Director confirmed isolation is not used at the facility.
- Transgendered/Intersex/Gay/Bisexual Residents  
One male resident identified as gay. He confirmed the detention center does not have a housing unit only for LGBTI residents.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- DCS form CS-0946 Assessment, Checklist, and Protocol for Behavior and Risk for Victimization
- At-Risk Protocol section of DCS form CS-0946

### Standard 115.351 Resident reporting

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

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

The facility provides internal ways for residents to privately report sexual abuse and sexual harassment, retaliation by other

residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. These internal ways of reporting include telling any staff member or filing a grievance. Grievance forms are available for the residents. Residents can request to use a pencil for writing grievances and the Grievance are placed in a slot that delivers them directly in to the facility director's office.

Residents may also report externally to a public or private entity or office that is not part of the agency. This includes but is not limited to: calling the DCS Child Abuse Hotline at 1-877-237-0004 and Writing a letter to or calling the Sexual Assault Center (SAC). Residents may remain anonymous upon request

Residents detained solely for civil immigration purposes are provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security. The facility has not had any residents detained solely for civil immigration purposes.

Residents may get assistance in filing requests for administrative remedies relating to allegations of sexual abuse from third parties. Third parties may also file such requests on behalf of residents. If the resident declines to have third-party assistance in filing a grievance alleging sexual abuse, staff members of the facility must document the resident's decision to decline.

Pursuant to Tennessee Code Annotated 37-1-403, any person who has knowledge of or is called upon to render aid to any child/youth who is being sexually abused, sexually assaulted or sexually harassed has the duty to report such abuse. In terms of PREA standards, this duty to report includes but is not limited to any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the detention center. All reports made verbally, in writing, anonymously, by third parties or by any other means must be reported.

The facility allows for staff to privately report sexual abuse and sexual harassment of residents by calling the DCS Child Abuse Hotline at 1-877-237-0004.

There were no allegations of sexual abuse or sexual harassment received during the twelve-month audit period.

## **Interviews**

- PREA Coordinator  
The Facility Director was knowledgeable of the outside entities for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Residents can request to use a pencil for writing grievances and the Grievance are placed in a slot that delivers them directly in to the facility director's office. The Sexual Assault Center (SAC) was identified as one way for residents to report sexual abuse or sexual harassment to a private entity that is not part of the facility. All reports are immediately transmitted to CPS through TFACTS and contacting the DCS Child Abuse Hotline.
- Random Sample of Staff  
All staff interviewed identified the DCS Child Abuse Hotline as a way for residents to privately report sexual abuse and sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed an incident of sexual abuse or sexual harassment. Filing a grievance was an alternate way for residents to privately report. All staff confirmed they would immediately document verbal reports. All staff interviewed identified the DCS Child Abuse Hotline as a way for them to privately report sexual abuse and sexual harassment of residents.
- Random Sample of Residents  
Interviews with residents confirmed they are knowledgeable of internal and external ways of reporting sexual abuse or sexual harassment if it were to happen to them or other residents. All of them could identify someone who does not work at the facility whom they could report to and most knew that they could make anonymous reports. All residents

interviewed knew they could make reports in person or in writing and most knew they could have someone make the report for them so they would not have to give their name.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Duty to Report - Tennessee Code Annotated 37-1-403 and 37-1-605
- Youth Grievance Form
- Memorandum of Understanding with the Sexual Assault Center (SAC)
- PREA Posters with Phone Numbers and Mailing Addresses for Outside Support Services
- End Silence Brochure: Youth Speaking Up about Sexual Abuse in Custody (English and Spanish)

### 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)
- Non-Applicable Standard (exempt from standard)

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

BCJDC is exempt from this standard. BCJDC does not have administrative procedures to address resident grievances regarding sexual abuse. DCS is responsible for all administrative procedures to address resident grievances regarding sexual abuse.

Residents may report allegations of sexual abuse at any time regardless of when the incident is alleged to have occurred. Residents are not required to nor should they attempt to resolve with staff an alleged incident of sexual abuse. Incidents are not required to be and should not be referred to the staff member who is the subject of the complaint.

Residents may get assistance in filing requests for administrative remedies relating to allegations of sexual abuse from third parties. Third parties may also file such requests on behalf of residents. If the resident declines to have third-party assistance in filing a grievance alleging sexual abuse, staff members of BCJDC must document the resident’s decision to decline.

Pursuant to Tennessee Code Annotated 37-1-413, any person who either verbally or by written/printed communication reports false accusations of sexual abuse commits a Class E felony. A report made in good faith upon reasonable belief of the alleged incident will not constitute a false report and may not be used as grounds for disciplinary action.

There were no allegations of sexual abuse or sexual harassment during the twelve-month audit period.

## Policy

- BCJDC PREA Policy
- DCS Policy 14.15 Reporting False Allegations of Child Sexual Abuse
- DCS Policy 24.5 DOE Youth Grievance Procedures
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

## Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Duty to Report - Tennessee Code Annotated 37-1-403 and 37-1-605
- Tennessee Code Annotated 37-1-413
- Youth Grievance Form

## Standard 115.353 Resident access to outside confidential support services

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

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

BCJDC provides residents with access to outside victim advocates for emotional support services related to sexual abuse. The facility has a Memorandum of Understanding with Sexual Assault Center (SAC). Resources, including mailing addresses and telephone numbers, including toll free hotline numbers are provided to the residents. Information includes local, state and national victim advocacy and rape crisis organizations. For persons detained solely for civil immigration purposes, immigrant services agency information is posted on the wall.

The facility informs residents, prior to giving them access, of the extent to which such communications will be monitored. Everyone in Tennessee is a mandated reporter. Duty to Report - Tennessee Code Annotated 37-1-403 and 37-1-605 requires all persons to report suspected cases of child abuse or neglect. The facility enables reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible. Telephone calls are monitored with sight, but not sound supervision.

## Interviews

- Facility Director  
The Facility Director/PREA Coordinator confirmed the facility would provide residents with reasonable and confidential access to their attorneys or other legal representation and reasonable access to parents or legal guardians.
- Random Sample of Residents  
Interviews with residents revealed they knew where to find the telephone numbers and mailing addresses of outside organizations. They all could list the DCS Sexual Abuse Hotline Number, but they were less familiar with the outside victim advocate support for emotional support services related to sexual abuse. The auditor pointed out the location of the mailing addresses and phone numbers and explained what outside support services would be available. They all were knowledgeable of Tennessee's mandatory reporting law. They all confirmed they could see or talk with a lawyer

and their guardian if needed.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Memorandum of Understanding with the Sexual Assault Center (SAC)
- Duty to Report - Tennessee Code Annotated 37-1-403 and 37-1-605
- PREA Posters with Phone Numbers and Mailing Addresses for Outside Support Services

### Standard 115.354 Third-party reporting

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

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

BCJDC has a Third-Party Reporting Form to receive third-party reports of sexual abuse and sexual harassment. The form is linked to the detention center’s website.

Also, the DCS website has the Child Abuse Hotline number listed and provides a secure online system for reporting abuse, <https://apps.tn.gov/carat/>. Hotline case managers are available to assist callers in reporting abuse.

No third-party reports of sexual abuse or sexual harassment were received during the twelve-month reporting period.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Duty to Report - Tennessee Code Annotated 37-1-403 and 37-1-605
- BCJDC Third Party Reporting Form

### Standard 115.361 Staff and agency reporting duties

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

relevant review period)

- Does Not Meet Standard (requires corrective action)

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

Duty to Report - Tennessee Code Annotated 37-1-403 and 37-1-605 Laws and BCJDC requires all staff to report immediately and according to policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against residents or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. All allegations of sexual abuse must be reported immediately to the DCS Child Abuse Hotline at 1-877-237-0004. Failure to comply with "duty to report" requirements will result in disciplinary action up to and including termination and/or criminal charges.

Medical and mental health practitioners are required to report sexual abuse and to CPS. They are mandated to follow Duty to Report laws. Medical and mental health practitioners are required to inform residents at the initiation of services of their duty to report and the limitations of confidentiality.

Upon receiving any allegation of sexual abuse, the Facility Director or his designee shall promptly report the allegation to the alleged victim's parents or legal guardians, unless BCJDC has official documentation showing the parents or legal guardians should not be notified. If the alleged victim is under the guardianship of DCS, the report shall be made to the alleged victim's Family Services Worker instead of the parents or legal guardians.

There were no reported allegations of sexual abuse or sexual harassment within the twelve-month audit period.

## Interviews

- Facility Director  
The Facility Director confirmed when the facility receives an allegation of sexual abuse the allegation is reported to the DCS Child Abuse Hotline and the victim's legal guardians as appropriate. This notification would occur immediately upon the allegation being received. He confirmed if a juvenile court retains jurisdiction over a victim the victim's attorney would be contacted. All allegations of sexual abuse and sexual harassment are reported to the DCS Special Investigations Unit. BCJDC does not conduct administrative or criminal investigations.
- PREA Coordinator  
The Facility Director stated when the facility receives an allegation of sexual abuse she reports the allegation to the DCS Child Abuse Hotline, the Campus Director, and the agency PREA Coordinator. If the victim is under the guardianship of the child welfare system the facility would report the allegation to the victim's Family Services Worker. Lastly, she stated all residents are in DCS custody.
- Medical and Mental Health Staff  
An interview with a mental health practitioner confirmed he discloses the limitations of confidentiality and his duty to report at the initiation of services to a resident. He confirmed he is required by law to report any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment upon learning of it. He revealed he has not become aware of such incidents.
- Random Sample of Staff  
All staff interviewed confirmed they are required by law to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility; retaliation against residents or staff who

reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. All staff interviewed revealed they would report to their immediate supervisor and the DCS Child Abuse Hotline.

### Policy

- BCJDC PREA Policy
- BCJDC Reporting Abuse and Neglect Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Duty to Report - Tennessee Code Annotated 37-1-403 and 37-1-605

### Standard 115.362 Agency protection duties

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

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

When a juvenile is subject to a substantial risk of imminent sexual abuse, BCJDC shall take immediate action to protect the juvenile and the facility director is notified.

### Interviews

- Agency Head  
The Facility Director confirmed immediate action would be taken to protect a resident subject to a substantial risk of imminent sexual abuse. These actions would include separating the resident from the potential abuser and moving to a single room for safety.
- Random Sample of Staff  
All staff interviewed confirmed they would immediately separate the resident from the potential perpetrator.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### Standard 115.363 Reporting to other confinement facilities

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

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

Upon receiving an allegation that a juvenile was sexually abused while confined at another facility, the Director of BCJDC shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred and shall notify the appropriate investigative agency as soon as possible, and call the DCS Sexual Abuse Center Hotline no later than 72 hours after receiving the allegation. All notifications will be document and the facility head or agency that receives such notification shall ensure that the allegation is investigated in accordance with these standards.

There were no allegations received that a resident was sexually abused while confined at another facility during the twelve-month audit period.

#### **Interviews**

- o Agency Head  
The Facility Director confirmed if an allegation is received from another facility or agency that an incident of sexual abuse or harassment occurred in the facility the facility director would be notified and the allegation would be reported to CPS.

#### **Policy**

- o BCJDC PREA Policy
- o DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

#### **Supporting Documentation**

- o PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

#### **Standard 115.364 Staff first responder duties**

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

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

Upon learning of an allegation that a juvenile was sexually abused, the first staff member to respond to the report shall be required to:

- (1) Call for back-up
- (2) Separate individuals involved
- (3) Do not disturb evidence
- (4) Ensure that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating
- (5) Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- (6) Take any emergency medical action if needed.
- (7) Call DCS Hotline (Get instructions for Emergency Care)
- (8) Call BCSD (Criminal Investigation)
- (9) Contact Supervisor and Facility Director
- (10) Contact DCS Case Worker and Parents or Legal Guardian
- (11) Complete Serious Incident Report

Additionally, the DCS Protocol: First Responder Guidelines for Sexual Assaults provides in-depth guidelines regarding emergency medical attention, evidence collection, and treating both the victim's and perpetrator's bodies as crime scenes to safeguard evidence.

There were no reported allegations of sexual abuse or sexual harassment during the twelve-month audit period.

### Interviews

- Security Staff and Non-Security Staff First Responders  
The staff interviewed were knowledgeable of the steps to take as a first responder to an allegation of sexual abuse.
- Random Sample of Staff  
The staff interviewed were knowledgeable of the steps to take as a first responder to an allegation of sexual abuse. All staff interviewed stated they would report to their supervisor and call the DCS Sexual Abuse Hotline. They said they would not share sensitive information with individuals not involved with the allegation.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- DCS Protocol: First Responder Guidelines for Sexual Assaults

### Standard 115.365 Coordinated response

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

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

### **corrective actions taken by the facility.**

BCJDC has a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and detention center leadership.

#### **Interviews**

- Facility Director  
The Facility Director confirmed that all allegations are reported to DCS and the detention center follows the BCJDC Written Institutional Plan.

#### **Policy**

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

#### **Supporting Documentation**

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- BCJDC Written Institutional 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)

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

BCJDC does not have a collective bargaining agreement or other agreement that limits the detention center's ability to remove alleged staff sexual abusers from contact with residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

#### **Interviews**

- Agency Head  
The Facility Director confirmed BCJDC has not entered or renewed any collective bargaining agreements.

#### **Policy**

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

#### **Supporting Documentation**

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### **Standard 115.367 Agency protection against retaliation**

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

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

Multiple protection measures shall be available such as: room changes or transfers for juvenile victims or abusers; removal of alleged staff or juvenile abusers from contact with victims; and emotional support services for juveniles or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

For at least 90 days following a report of sexual abuse, staff shall monitor the conduct or treatment of juveniles or staff who reported the sexual abuse and of juveniles who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by juveniles or staff, and shall act promptly to remedy any such retaliation. Juvenile monitoring includes periodic status checks.

BCJDC will monitor any juvenile disciplinary reports, room, or program changes, or negative performance reviews or reassignments of staff. Monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. If any other individual who cooperates with an investigation expresses a fear of retaliation, the detention center shall take appropriate measures to protect that individual against retaliation. BCJDC will terminate monitoring if the detention center determines that an allegation is unfounded.

There was no reported retaliation during the twelve-month audit period.

### **Interviews**

- Agency Head  
The Facility Director stated protective measures would include changes in housing placement and providing emotional support services.
- Designated Staff Member Charged with Monitoring Retaliation  
The Facility Director is charged with monitoring for retaliation. He said his role in preventing retaliation is to make housing changes to address safety concerns. Some measures to protect residents and staff from retaliation would include housing changes and transfers. He would initiate contact with residents who have reported sexual abuse, review all related paperwork, and monitor the actions of staff and residents. He stated he would monitor for retaliation for the duration of a resident’s stay at the detention center.

### **Policy**

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### **Supporting Documentation**

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### Standard 115.368 Post-allegation protective custody

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

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

BCJDC does not use of segregated housing or isolation to protect a resident who is alleged to have suffered sexual abuse. Other protective measures would be used.

There were no occurrences of the use of segregated housing or within the twelve-month audit period.

#### Interviews

- Facility Director  
The Facility Director confirmed BCJDC does not uses segregated housing or isolation in response to a resident who is alleged to have suffered sexual abuse.

#### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

#### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### Standard 115.371 Criminal and administrative agency investigations

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

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

BCJDC does not conduct its own investigations into allegations of sexual abuse and sexual harassment. DCS ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse, sexual assault, sexual misconduct, and sexual harassment. DCS investigators receive specialized training from the Tennessee Bureau of Investigations (TBI) and National Institute of Corrections (NIC) online training in sexual abuse investigations involving juveniles.

The DCS Investigator will gather all evidence, review video surveillance footage if available, and interview alleged victims, PREA Audit Report

suspected perpetrators and witnesses. The investigation will include reviewing any prior complaints and reports of sexual abuse involving the suspected perpetrator. The investigator will not terminate the investigation solely because the victim recants the allegation.

When the evidence supports criminal prosecution, the Child Protective Services Investigations Team includes law enforcement, the local district attorney, the local health authority and the Child Advocacy/Rape Crisis center in the investigation. The credibility of an alleged victim, suspect or witness is not assessed on an individual basis, nor whether they are a resident or staff. Substantiated allegations of conduct that appears to be criminal are referred for prosecution. The detention center has a MOU with the Bedford County Sheriff's Department for criminal investigations.

Administrative investigations consider how staff actions or neglect of duties are a contributing factor to the abuse. The investigations are documented in the appropriate TFACTS incident reporting section. The report includes all statements, a description of all evidence, assessments of credibility, and facts and findings. Criminal investigations are also documented with thorough descriptions of physical, testimonial and documentary evidence. Documentation is maintained for a period of no less than the last day of employment of an allegedly perpetrating employee, plus five (5) years and seven (7) years after a resident's twenty-second (22<sup>nd</sup>) birthday.

If an alleged abuser or victim is no longer employed at the detention center, the investigation continues to conclusion. BCJDC cooperates with the DCS investigators and remains informed about the progress of investigations through TFACTS and contact with the investigator.

### **Interviews**

- DCS Investigator  
The interview with a DCS investigator was very educational and provided the auditor with an in-depth knowledge of DCS investigative procedures. The investigator confirmed DCS is compliant with all aspects of the Criminal and Administrative Agency Investigations standard. If administrative investigations require referral for criminal prosecution, DCS investigators remain actively involved in the process and inform the facility of the progress of the investigation.

### **Policy**

- BCJDC PREA Policy
- DCS Policy 14.7 Special Child Protective Services Investigations
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### **Supporting Documentation**

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- Memorandum of Understanding with the Bedford County Sheriff's Department (BCSD)

### **Standard 115.372 Evidentiary standard for administrative investigations**

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

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

## **corrective actions taken by the facility.**

BCJDC imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. DCS policy states a report of child abuse by the alleged perpetrator may be classified as substantiated if there is a preponderance of evidence, in light of the entire record, which substantiated the individual committed physical, severe or child sexual abuse, as defined in Tennessee Code Annotated 37-1-102 or 37-1-602.

### **Interviews**

- DCS Investigator  
A DCS Investigator interviewed confirmed the preponderance of evidence is required to substantiate allegations of sexual abuse or sexual harassment.

### **Policy**

- BCJDC PREA Policy
- DCS Policy 14.25 Special Child Protective Services Investigations
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### **Supporting Documentation**

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### **Standard 115.373 Reporting to residents**

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

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

Following an investigation into a juvenile's allegation of sexual abuse that occurred at BCJDC, the detention center shall inform the juvenile as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

All relevant information will be requested from the DCS and the BCSD.

Following a juvenile's allegation that a staff member has committed sexual abuse against a juvenile, the Director shall subsequently inform the juvenile (unless the detention center has determined that the allegation is unfounded) whenever: the staff member is no longer posted within the detention center; the staff member is no longer employed at the detention center; the detention center learns that the staff member has been indicted on a charge related to sexual abuse at the detention center; or the detention center learns that the staff member has been convicted on a charge related to sexual abuse at the detention center.

Following a juvenile's allegation that he or she has been sexually abused by another juvenile, the BCJDC shall subsequently inform the alleged victim whenever: the detention center learns that the alleged abuser has been indicted on a charge related to sexual abuse within the detention center; or the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the detention center. All such notifications or attempted notifications shall be documented.

BCJDC's obligation to report under this standard shall terminate if the juvenile is released from the detention center's custody.

There were no residents who reported a sexual abuse allegation within the twelve-month audit period and therefore there were no notifications made.

### Interviews

- DCS Investigator  
The interview with a DCS Investigator confirmed residents are informed of investigative outcomes.
- Facility Director  
The Facility Director confirmed the BCJDC would inform residents of investigative outcomes.

### Policy

- BCJDC PREA Policy
- DCS Policy 14.25 Special Child Protective Services Investigations
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### Standard 115.376 Disciplinary sanctions for staff

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

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

BCJDC Staff shall be subject to disciplinary sanctions up to and including termination for violating detention center sexual abuse or sexual harassment policies. Staff who have engaged in sexual abuse shall be terminated. Disciplinary sanctions for violations of the detention center 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.

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

No staff violated the facility's sexual abuse and sexual harassment policies within the twelve-month audit period.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### Standard 115.377 Corrective action for contractors and volunteers

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

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

BCJDC shall terminate the services of any volunteer who sexual abuses a juvenile and report the abuse to law enforcement agencies and relevant licensing bodies. The Facility reported not using the services of any volunteers or contactors during the twelve-month audit period and during the on-site audit. No contractor or volunteer violated the facility’s sexual abuse and sexual harassment policies within the twelve-month audit period.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### Standard 115.378 Disciplinary sanctions for residents

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

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

A juvenile may be subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the juvenile engaged in juvenile-on-juvenile sexual abuse or following a criminal finding of guilt for juvenile-on-juvenile sexual abuse.

Disciplinary sanctions are proportionate to: the nature and circumstances of the abuse committed; the juvenile’s disciplinary history, and the sanctions imposed for comparable offenses by other juveniles with similar histories. The disciplinary process shall consider whether a juvenile’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

DCS caseworker offers counseling if requested. On an individual basis BCJDC may require participation in counseling 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.

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

There have been no administrative or criminal findings of resident-on-resident sexual abuse within the twelve-month audit period.

### Interviews

- Facility Director  
The Facility Director confirmed disciplinary sanctions would be used when a resident has engaged in resident-on-resident sexual abuse. Isolation would not be used as a disciplinary sanction.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### Standard 115.381 Medical and mental health screenings; history of sexual abuse

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

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

Juveniles are offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening if the screening indicates the juvenile experienced prior sexual victimization or a juvenile perpetrated sexual abuse in an institutional setting or in the community. These services are provided by the DCS caseworker. Medical and mental health practitioners obtain informed consent before reporting about prior victimization that did not occur in an institutional setting. The detention center does not admit juveniles over seventeen years old.

## Interviews

- Staff Responsible for Risk Screening  
The interview confirmed that if screening indicates that a resident has experienced prior sexual victimization, whether in an institutional setting or in the community, a follow-up meeting is offered. The meeting would occur within fourteen (14) days. The same follow-up meeting would be offered to a perpetrator, within fourteen (14) days of the intake screening. The facility director informs the DCS case worker through a written request.
- Residents Who Disclose Sexual Victimization at Screening  
One resident reported disclosing prior sexual victimization during the initial screening. The interview with the resident confirmed she was offered a follow-up meeting.

## Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

## Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- DCS Case Worker Request Form

## Standard 115.382 Access to emergency medical and mental health services

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

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

Juvenile victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services through the DCS Our Kids Program. Staff first responders shall take preliminary steps to protect the victim pursuant to the first responder duties outlined in standard 115.362. In coordination with the DCS Our Kids Program, juvenile victims of sexual abuse, while at BCJDC, are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

There were not reported allegations of sexual abuse within the twelve-month audit period.

## Interviews

- Security and Non-Security First Responders  
The staff member interviewed as a first responder could identify the measures they would take to protect a victim of sexual abuse.

## Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

## Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### Standard 115.383 Ongoing medical and mental health care for sexual abuse victims and abusers

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

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

In coordination with the DCS Our Kids Program, BCJDC offers medical and mental health evaluation and, as appropriate, treatment to all juveniles who have been victimized by sexual abuse. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Medical and mental health services are consistent with the community level of care. Female victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from sexual abuse involving vaginal penetration, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. Victims of sexual abuse while at the BCJDC shall be offered tests for sexually transmitted infections as medically appropriate.

Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. In addition to the DCS Our Kids Program, these services may be provided by Tennova Healthcare. The detention center shall attempt to have a mental health evaluation completed on all known juvenile-on-juvenile abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

There were not reported allegations of sexual abuse within the twelve-month audit period.

## Interviews

- Facility Director  
The Facility Director confirmed residents who have been victimized would be offered follow-up care.

## Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

## Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

## Standard 115.386 Sexual abuse incident reviews

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

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

BCJDC conducts a sexual abuse incident review within 30 days of the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. The review team shall include the BCJDC Facility Director, Sergeants, investigators and DCS medical and/or mental health practitioners when appropriate.

The BCJDC review team shall: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or, gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; (6) Prepare a report of its findings and recommendations, including recommendations for improvement. The Director will maintain the report; and (7) The detention center shall implement the recommendations for improvement, or shall document its reasons for not doing so.

There were no sexual abuse allegations during the twelve-month audit period, and therefore no sexual abuse incident review team meetings were held.

### Interviews

- Facility Director/ Incident Review Team Member

The Facility Director confirmed BCJDC has a sexual abuse incident review team. The team would include input from BCJDC Facility Director, Sergeants, investigators and DCS medical and/or mental health practitioners when appropriate. He stated the team would use information from the incident review to address all possible problem areas and provide additional training if needed. He confirmed all motivating factors would be considered, the area in the facility where the incident occurred would be examined to assess whether physical barriers in the area may enable abuse, staffing levels would be assessed, and video surveillance would be considered. He stated there are no known blind spots.

- PREA Coordinator

The Facility Director revealed he is a member of the PREA Incident Review Team. Incident review reports include any recommendations for improvement.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

## Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### Standard 115.387 Data collection

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

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

BCJDC shall collect accurate, uniform data for every allegation of sexual abuse using the DOJ Form SSV-IJ Survey of Sexual Victimization Incident Report, standardized instrument and set of definitions. The detention center shall aggregate the incident-based sexual abuse data at least annually. The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization conducted by the Department of Justice. DCS maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

Upon request, BCJDC shall provide all such data from the previous calendar year to the Department of Justice no later than August 15th of each year on the U.S. Justice Department’s Form SSV-5 Survey of Sexual Victimization, State Juvenile Systems Summary Form. BCJDC has not been requested to do so.

## Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

## Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities

### Standard 115.388 Data review for corrective action

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

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

BCJDC shall review data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including: identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for the detention center.

The 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 the agency's progress in addressing sexual abuse. The detention center's report shall be approved by the Director and made readily available to the public through its website. The detention center may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of the detention center, but must indicate the nature of the material redacted.

The auditor reviewed the BCJDC website and confirmed the report was posted. The report indicated the detention center did not have any allegations of sexual abuse or sexual harassment in 2016.

### Interviews

- Agency Head/PREA Coordinator  
The Facility Director confirmed he composes the Annual PREA Report and the detention center would use incident-based sexual abuse data to assess and improve sexual abuse prevention, detection, response policies, practices, and training by identifying problem areas and taking corrective actions. All data would be securely retained by DCS. All identifying information would be redacted from the report. and corrective actions are taken as needed.

### Policy

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

### Supporting Documentation

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- BCJDC 2016 Annual PREA Report
- DCS Annual PREA Report

### Standard 115.389 Data storage, publication, and destruction

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

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

BCJDC shall ensure that data collected pursuant to § 115.387 are securely retained. BCJDC shall make all aggregated sexual abuse data readily available to the public at least annually through its website. Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers. All sexual abuse data collected pursuant to § 115.387 shall be maintained in the juvenile files for at least 10 years after the date of its initial collection.

### Interviews

- PREA Coordinator  
The Facility Director confirmed BCJDC reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training. He confirmed data collected would be securely retained by DCS and BCJDC takes corrective action on an ongoing basis based on the data.

**Policy**

- BCJDC PREA Policy
- DCS Policy 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse, Sexual Harassment, Assault or Rape Incidents and PREA

**Supporting Documentation**

- PREA Audit: Pre-Audit Questionnaire Juvenile Facilities
- BCJDC 2016 Annual PREA Report
- DCS Annual PREA Report

**AUDITOR CERTIFICATION**

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Robert Burns Latham

August 10, 2017

Auditor Signature

Date