

PREA Facility Audit Report: Final

Name of Facility: Hamilton County Juvenile Detention Center

Facility Type: Juvenile

Date Interim Report Submitted: 06/18/2025

Date Final Report Submitted: 11/15/2025

Auditor Certification

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.



I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.



Auditor Full Name as Signed: Robert Burns Latham

Date of Signature: 11/15/2025

AUDITOR INFORMATION

Auditor name: Latham, Robert

Email: robertblatham@icloud.com

Start Date of On-Site Audit: 04/17/2025

End Date of On-Site Audit: 04/18/2025

FACILITY INFORMATION

Facility name: Hamilton County Juvenile Detention Center

Facility physical address: 1600 East 3rd Street, Chattanooga, Tennessee - 37404

Facility mailing address:

Primary Contact

Name:	Ahren Marmolejo
Email Address:	AhrenM@hamiltontn.gov
Telephone Number:	423-309-5163

Superintendent/Director/Administrator	
Name:	Charles Cheshire
Email Address:	Chuckc@hamiltontn.gov
Telephone Number:	423-209-5161

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Health Service Administrator On-Site	
Name:	One-to-One
Email Address:	davonna.young@121.health
Telephone Number:	423-718-4894

Facility Characteristics	
Designed facility capacity:	26
Current population of facility:	11
Average daily population for the past 12 months:	15
Has the facility been over capacity at any point in the past 12 months?	Yes
What is the facility's population designation?	Both women/girls and men/boys

In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	12-17
Facility security levels/resident custody levels:	High/Secure
Number of staff currently employed at the facility who may have contact with residents:	29
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	1
Number of volunteers who have contact with residents, currently authorized to enter the facility:	9

AGENCY INFORMATION	
Name of agency:	Hamilton County Juvenile Court
Governing authority or parent agency (if applicable):	
Physical Address:	1600 East 3rd Street, Chattanooga, Tennessee - 37404
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	

Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Ahren Marmolejo	Email Address:	ahrenm@hamiltontn.gov

Facility AUDIT FINDINGS	
Summary of Audit Findings	
The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met. Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.	
Number of standards exceeded:	
0	
Number of standards met:	
43	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-04-17
2. End date of the onsite portion of the audit:	2025-04-18

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	☒ Yes ☐ No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	• Tennessee Department of Children's Services • Just Detention International • Partnership for Families, Children and Adults Rape Crisis Center • Emmy Haney House Child Advocacy Center

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	26
15. Average daily population for the past 12 months:	15
16. Number of inmate/resident/detainee housing units:	3

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☐ Yes ☐ No ☒ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)
Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	5
25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0

29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0
31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	0
34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	There were five residents in the facility as of the first day of the onsite portion of the audit. The facility identified one resident as LEP.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	29
37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	91
38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	1
39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.

INTERVIEWS**Inmate/Resident/Detainee Interviews****Random Inmate/Resident/Detainee Interviews**

40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	4
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41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☐ Age ☐ Race ☐ Ethnicity (e.g., Hispanic, Non-Hispanic) ☐ Length of time in the facility ☐ Housing assignment ☐ Gender ☐ Other ☐ None
If "Other," describe:	All five residents were interviewed.
42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	All five residents were interviewed.
43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☐ Yes ☒ No
a. Explain why it was not possible to conduct the minimum number of random inmate/resident/detainee interviews:	There were five residents in the facility as of the first day of the onsite portion of the audit. One resident was identified as LEP. The other four residents were interviewed with the random resident interview protocol.
44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	1

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Corroboration methods included interviewing staff and residents.
48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Corroboration methods included interviewing staff and residents.
49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Corroboration methods included interviewing staff and residents.
50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Corroboration methods included interviewing staff and residents.
51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Corroboration methods included interviewing staff and residents.

53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Corroboration methods included interviewing staff and residents.
54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Corroboration methods included interviewing staff and residents.

55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Corroboration methods included interviewing staff and residents.
56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Corroboration methods included interviewing staff and residents. There were no residents in isolation.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	The auditor was provided with a list of residents for selecting targeted interviews. In addition to picking residents from the list, the auditor corroborated the information provided by interviewing staff and residents and reviewing risk screening information.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	12
59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☒ Length of tenure in the facility ☒ Shift assignment ☒ Work assignment ☒ Rank (or equivalent) ☒ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
If "Other," describe:	Gender, race, ethnicity, and languages spoken were considered.
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☒ Yes ☐ No

61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	The auditor was provided a roster on the first day of the onsite audit. Staff were selected all housing units and from each shift.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	9
63. Were you able to interview the Agency Head?	☒ Yes ☐ No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	☒ Yes ☐ No
65. Were you able to interview the PREA Coordinator?	☒ Yes ☐ No
66. Were you able to interview the PREA Compliance Manager?	☒ Yes ☐ No ☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

67. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- ☐ Agency contract administrator
- ☒ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☒ Medical staff
- ☐ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☐ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☐ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☐ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☒ First responders, both security and non-security staff
- ☒ Intake staff

	☐ Other
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☐ Religious ☒ Other
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☒ Education/programming ☒ Medical/dental ☐ Food service ☐ Maintenance/construction ☐ Other
70. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

71. Did you have access to all areas of the facility?

☒ Yes

☐ No

Was the site review an active, inquiring process that included the following:

72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

☒ Yes

☐ No

73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

☒ Yes

☐ No

74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

☒ Yes

☐ No

75. Informal conversations with staff during the site review (encouraged, not required)?

☒ Yes

☐ No

76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	The auditor had access to all areas of the facility. During the site review the auditor had informal, conversations with residents and staff. The auditor tested the following critical functions: • The facility's process for securing interpretation services on-demand (Language Line Interpretation Services) • Internal reporting methods for confined persons (grievance) • External reporting methods for confined persons (developed through corrective action) • Access to outside emotional support services • Third-Party Reporting
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	☒ Yes ☐ No
78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	The auditor selected documents for staff interviewed. Documents reviewed included personnel records and training records. Additionally, the auditor reviewed documents for residents interviewed. Documents reviewed included intake records, initial risk assessments, and use of screening information.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

79. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

80. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

81. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

82. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

83. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

84. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

0

a. Explain why you were unable to review any sexual abuse investigation files:

There were no sexual abuse allegations reported.

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	There were no sexual harassment allegations reported.
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

102. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

108. Who paid you to conduct this audit?

☒ The audited facility or its parent agency

☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

☐ A third-party auditing entity (e.g., accreditation body, consulting firm)

☐ Other

Standards
Auditor Overall Determination Definitions
- Exceeds Standard (Substantially exceeds requirement of standard) - Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) - Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
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.

115.311	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: - Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.1 - Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.2 - Hamilton County Juvenile Detention Center Organizational Chart - Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) - Interview with PREA coordinator Evidence (corrective action): - Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (definitions of prohibited behaviors regarding sexual abuse and sexual harassment) Reasoning and analysis (by provision): 15.311 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The agency has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment in facilities it operates directly or under contract. The facility has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes sanctions for those found to have participated in prohibited behaviors. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of residents.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.1 (page 1):

Hamilton County Juvenile Detention Center shall be committed to a zero-tolerance standard for all forms of sexual abuse/assault/ harassment or rape within it's facility and shall be committed to reducing the risk of sexual abuse, sexual harassment, assault, misconduct and rape through implementation of the Prison Rape Elimination Act (PREA) as outlined in Standard 115.311.

The policy outlines the facility's approach to preventing, detecting, and responding to such conduct. The policy includes sanctions for those found to have participated in prohibited behaviors. The policy addresses prevention of sexual abuse and sexual harassment through the designations of a PREA coordinator, supervision and monitoring, criminal background checks, staff training, resident education, PREA posters and educational materials. The policy addresses detection of sexual abuse and sexual harassment through resident education, staff training, and intake screening for risk of sexual victimization and abusiveness. The policy addresses responding to sexual abuse and sexual harassment through the various ways of reporting, investigations, disciplinary sanctions for residents and staff, victim advocacy, access to emergency medical treatment and crisis intervention services, sexual abuse incident reviews, data collection, and data review for corrective action.

The policy did not include definitions of prohibited behaviors regarding sexual misconduct, sexual abuse and sexual harassment. Corrective action was required.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 was developed and includes definitions of prohibited behaviors regarding sexual misconduct, sexual abuse and sexual harassment.

Reasoning and analysis (by provision):

15.311 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency employs or designates an upper-level, agency-wide PREA coordinator. The PREA coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards at the facility. The

	position of the PREA coordinator is in the agency's organizational structure as the training director. The PREA coordinator reports to the assistant superintendent and has direct access to the superintendent. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.1 (page 1): HCJDC will designate a PREA Coordinator with sufficient time and authority to develop, implement and oversee efforts to comply with the PREA standards in the facility. What was heard, as part of a systematic review of evidence: Interview with the PREA coordinator: The PREA coordinator stated they have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in the facility. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.311 (c) Hamilton County Juvenile Detention Center is a single entity agency. There is no PREA compliance manager. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.312	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) Reasoning and analysis (by provision): 115.312 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency has not entered into or renewed a contract for the confinement of residents since the last PREA audit. All of the above contracts require contractors to adopt and comply with PREA Standards. Since the last PREA audit: 1. The number of contracts for the confinement of residents that the agency

	entered into or renewed with private entities or other government agencies: 0 2. The number of above contracts that DID NOT require contractors to adopt and comply with PREA standards: N/A The agency does not contract for the confinement of its residents with private agencies or other entities including other government agencies. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.312 (b) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Since the last PREA audit the number of the contracts referenced in 115.312 (a) that DO NOT require the agency to monitor contractor's compliance with PREA Standards: N/A Hamilton County Juvenile Detention Center does not contract for the confinement of its residents. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.313	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.11 • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with superintendent • Interview with PREA coordinator • Interview with intermediate or higher-level facility staff • Site review Evidence (Corrective Action): • Hamilton County Juvenile Detention Center 2025 Staffing Plan (04/23/2025) • Supervisory Monitoring Logs (Unannounced Rounds) (06/13/2025) Reasoning and analysis (by provision): 115.313 (a)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
Since the 2021 PREA audit:

- The average daily number of residents: 15
- The average daily number of residents on which the staffing plan was predicated: 15 (The PAQ incorrectly indicated 740.)

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.11 (page 1):

The HCJDC will develop, implement, and document a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, the facilities/agencies will take into consideration:

- a. Generally accepted juvenile detention and correctional/secure residential practices
- b. Any judicial finding of inadequacy
- c. Any findings of inadequacy from Federal investigative agencies
- d. Any findings of inadequacy from internal or external oversight bodies
- e. All components of the facility's physical plant (including "blind spots" or areas where staff or residents may be isolated)
- f. The composition of the resident population
- g. The number and placement of supervisory staff
- h. Institution programs occurring on a particular shift
- i. Any applicable state or local laws, regulations, or standards
- j. The prevalence of substantiated and unsubstantiated incidents of sexual abuse, and
- k. Any other relevant factors

Staffing plan:

No staffing plan was provided for review. A staffing plan was developed through corrective action.

What was heard, as part of a systematic review of evidence:

Interviews with superintendent and PREA coordinator:

The facility superintendent and PREA coordinator both stated the facility regularly develops a staffing plan, maintains adequate staffing levels to protect residents against sexual abuse, considers video monitoring as part of the plan, and documents the plan. When assessing staffing levels and the need for video monitoring, the staffing plan considers: generally accepted juvenile detention and correctional/secure residential practices; any judicial findings of inadequacy; any findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the facility's physical plant (including "blind spots" or areas where staff or residents may be isolated); the composition of the resident population; the number and placement of supervisory staff; institution programs occurring on a particular shift; any applicable State or local laws, regulations, or standards; the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and any other

relevant factors.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

A staffing plan was developed through corrective action (04/23/2025). The auditor reviewed the Hamilton County Juvenile Detention Center 2025 Staffing Plan and observed the plan is inclusive of the standard provision requirements. The staffing plan is well documented and provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against sexual abuse.

Reasoning and analysis (by provision):

115.313 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.11 (page 2):

HCJDC will comply with the staffing plan except during limited and discrete exigent circumstances and will fully document deviations from the plan during such circumstances.

Documentation of deviations:

There were no deviations from the plan reported during the 12 month audit reporting period.

What was heard, as part of a systematic review of evidence:

Interviews with superintendent:

The superintendent stated that the facility maintains appropriate staffing ratios. Documentation of non-compliance with the staffing plan would include explanations for non-compliance.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.313 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility is obligated by law, regulation, or judicial consent decree to maintain staffing ratios of a minimum of 1:8 during resident waking hours and 1:16 during resident sleeping hours. The facility maintains staff ratios of a minimum of 1:8 during resident waking hours. The facility maintains staff ratios of a minimum of 1:8 during resident sleeping hours.

In the past 12 months:

- The number of times the facility deviated from the staffing ratios of 1:8 security staff during resident waking hours: 0
- The number of times the facility deviated from the staffing ratios of 1:16 security staff during resident sleeping hours: 0

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.11 (pages 1-2):

The HCJDC will maintain the following minimum staffing plan and may increase the number of staff on duty beyond the minimum level at any time at the discretion of the Detention Superintendent and/or Juvenile Court Director.

- a. At least one male and one female will be on duty 24 hours a day.
- b. A ratio of no less than one staff for every eight residents will be maintained during residents' waking hours.
- c. A ratio of no less than one staff for every sixteen residents will be maintained during residents' sleeping hours. One male and one female staff will be present at all times
- d. Male staff will monitor male residents at all times.
- e. Female staff will monitor female residents at all times.
- f. Resident's will be visually checked every fifteen (15) minutes when a youth is in his/her room.
- g. All cameras will be monitored and adjusted for blind spots.
- h. Resident will be visually monitored and monitored by video camera during class and gym time.
- i. One resident will shower at a time.
- j. Residents will not be allowed to enter another youth's room.

What was heard, as part of a systematic review of evidence:

Interviews with superintendent:

The superintendent stated the ratios are 1:8 during resident waking hours and 1:16 during resident sleeping hours.

What was observed as part of a systematic review of evidence:

Site review:

During the site review of the facility the auditor observed all areas where residents were present were compliant with required staffing ratios. Staff were actively supervising the residents.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.313 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

At least once every year the agency or facility, in collaboration with the PREA coordinator, reviews the staffing plan to see whether adjustments are needed to:

- The staffing plan;
- Prevailing staffing patterns;
- The deployment of monitoring technology; or
- The allocation of agency or facility resources to commit to the staffing plan to ensure compliance with the staffing plan.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.11 (page 2):

Whenever necessary, but no less frequently than once each year, consultation with the PREA Coordinator by DCS will assess, determine, and document whether adjustments are needed to:

- a. The staffing plan;
- b. Prevailing staffing patterns;
- c. The HCJDC deployment or updating of video monitoring systems and other monitoring technologies the HCJDC will consider how such technology may enhance the facility's ability to protect residents from sexual abuse.; and
- d. The resources the facility has available to commit to ensure adherence to the staffing plan.

Annual staffing plan reviews:

See 115.313 (a).

What was heard, as part of a systematic review of evidence:

Interviews with PREA coordinator:

The PREA coordinator stated they will be consulted regarding any assessments of, or adjustments to, the staffing plan. They stated the assessment will occur annually and will be documented.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.313 (e)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The facility documents unannounced rounds. The unannounced rounds cover all shifts. The facility prohibits staff from alerting other staff of the conduct of such rounds.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.11 (page 2):

HCJDC will have unannounced visits by the level Supervisors. The Supervisor will make unannounced rounds to identify and deter staff sexual abuse and sexual harassment. These rounds will be conducted on all shifts at least once a month. Staff is prohibited from alerting other staff as to when these rounds will be conducted. Any staff that alerts another staff could face serious disciplinary action.

	Documented unannounced rounds: No documented evidence of unannounced rounds was provided for review. Unannounced rounds were implemented through corrective action. What was heard, as part of a systematic review of evidence: Interviews with intermediate or higher-level facility staff (training director): The training director stated the unannounced rounds will be conducted. The rounds will be conducted on all shifts and staff are not alerted that the rounds are occurring. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed. The facility implemented the practice of intermediate-level or higher-level staff conducting unannounced rounds and provided Supervisor Monitoring logs for February 2025 to June 2025. from November 2024 to January 2025 (06/13/2025). The auditor reviewed the unannounced rounds and observed the rounds occur on all shifts and are conducted in compliance with the standard provision requirements.
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115.315	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.11 • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interviews with random sample of staff • Interviews with random sample of residents • Interviews with transgender or intersex residents • Site review Evidence (Corrective Action): • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.11 updated (04/16/2025) • “Guidance on Cross Gender and Transgender Pat Searches” training video (02/11/2025) • Intake Questionnaire revised with search preferences (04/23/2025) • Staff training acknowledgements for cross gender and transgender, and intersex pat searches (03/12/2025) Reasoning and analysis (by provision): 115.315 (a)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The facility does not conduct cross-gender strip or cross-gender visual body cavity searches of residents.

In the past 12 months:

- The number of cross-gender strip or cross-gender visual body cavity searches of residents: 0
- The number of cross-gender strip or cross-gender visual body cavity searches of residents that did not involve exigent circumstances or were performed by non-medical staff: 0

What was observed as part of a systematic review of evidence:

The auditor observed that the search room is not under video surveillance and doesn't allow for cross-gender viewing. Staff explained the searches process and confirmed that searches are completed by staff of the same gender as the residents being searched.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):**115.315 (b)****What was read, as part of a systematic review of evidence:**

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The facility does not permit cross-gender pat-down searches of residents, absent exigent circumstances.

In the past 12 months:

- The number of cross-gender pat-down searches of residents: 0
- The number of cross-gender pat-down searches of residents that did not involve exigent circumstance(s): 0

Document review:

The facility does not permit cross-gender pat-down searches of residents.

What was heard, as part of a systematic review of evidence:

Interviews with five random residents:

All five residents interviewed stated no staff of the opposite gender have performed a pat-down search of their body.

Interviews with nine random staff:

All nine staff interviewed stated they are restricted from conducting cross-gender pat-down searches. No staff interviewed provided an example of a circumstance that would warrant such a search other than an emergency.

Finding:

Based on this analysis, the facility is substantially compliant with this

provision and corrective action is not required.

Reasoning and analysis (by provision):

115.315 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
Facility policy requires that all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches be documented and justified.

Document review:

The facility does not permit cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches of residents.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.315 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The facility has implemented policies and procedures that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera). Policies and procedures require staff of the opposite gender to announce their presence when entering a resident housing unit or area where residents are likely to be showering, performing bodily functions, or changing clothing.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.11 (page 3):

Residents are able to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks, including viewing video camera.

Staff of the opposite gender shall announce their presence when entering a resident housing unit.

What was heard, as part of a systematic review of evidence:

Interviews with five random residents:

- All five residents interviewed stated staff of the opposite gender announce their presence when entering a housing unit that houses residents of the opposite gender.
- All five residents interviewed stated they are able to dress, shower and performing bodily functions without being viewed by staff of the opposite gender.

Interviews with 12 random staff:

- All 12 staff interviewed stated they or other officers announce their presence when entering a housing unit that houses residents of the opposite gender (from themselves).
- All 12 staff interviewed stated residents able to dress, shower, and use the toilet without being viewed by staff of the opposite gender

What was observed as part of a systematic review of evidence:

Site review:

Residents are able to shower, perform bodily functions, and change clothing in the privacy of an individual restroom and shower.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.315 (e)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The facility has a policy prohibiting staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status. Zero such searches occurred in the past 12 months.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.11 (page 2):

Searches or physical exams will never be done for the sole purpose of determining a resident's genital status.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

All 12 staff interviewed stated they are aware of the policy prohibiting them from searching or physically examining a transgender or intersex juvenile for the purpose of determining the juvenile's genital status.

Interviews with transgender or intersex residents:

No residents identified as transgender or intersex during the onsite phase of the audit.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

Reasoning and analysis (by provision):

115.315 (f)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The percent of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner, consistent with security needs: 100% (26 staff)

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.11 (page 3):

HCJDC will document and report any transgender and intersex resident that comes into the facility. If a transgender and intersex residents enter the facility, they can be asked to identify the gender of staff to whom they would feel most comfortable conducting the search and the appropriate staff will search and book that child in. If a transgender and intersex resident is detained in the facility and wishes to be isolated staff will accommodate that resident's wishes. If a resident poses a threat to other residents, staff will make Policy # provisions to ensure the safety of the residents. Documentation will be placed in the residents file and in the log book. The Supervisor or director will be notified if necessary to determine who should process the child or if any incidents occur.

Policy was updated through corrective action.

Transgender and Intersex Search Procedure, Training Curriculum, and Staff Training Logs:

Through corrective action, the facility implemented the "Guidance on Cross Gender and Transgender Pat Searches" training video and 23 staff completed the training.

Search preferences form:

The facility revised the Intake Questionnaire to include search preference for transgender and intersex residents (04/23/2025).

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

All 12 staff interviewed stated they have received training on how to conduct cross-gender pat down searches and searches of transgender residents in a professional and respectful manner, consistent with security needs.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The agency updated Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.11 to include the standard provision requirements for searches of transgender and Intersex residents (04/16/2025).

The facility implemented the "Guidance on Cross Gender and Transgender Pat Searches" training video (02/11/2025).

The facility provided 23 staff training acknowledgements for cross gender and transgender, and intersex pat searches training was completed (03/12/2025).

The Intake Questionnaire was revised to include search preference for transgender and intersex residents (04/23/2025).

115.316	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 • Tennessee Department of Children’s Services Youth Acknowledgement and Notification of PREA (English and Spanish) • No Means No Posters (English and Spanish) • Language Line Interpretation Services • Systems Test: Access to Interpreter • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with agency head (superintendent) • Interviews with random sample of staff • Interviews with residents (with disabilities or who are limited English proficient) • Site review Evidence (corrective action): • No Means No Posters (English and Spanish) (updated 04/16/2025) • PREA Intake Video (English, Spanish, ASL, Closed Captioning) (04/22/2025) • PREA Comprehensive Education Video (English, Spanish, ASL, Closed Captioning) (04/22/2025) Reasoning and analysis (by provision): 115.316 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency has established procedures to provide disabled residents equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (page 1): Appropriate provisions will be made as necessary for residents who are limited English proficient, have disabilities (including those who are deaf or hard of hearing, those who are blind or have low vision), and those with low intellectual, psychiatric, or speech disabilities. If a resident has low intellectual abilities and cannot interpret the PREA standards or documents, a HCJDC staff member will interpret the documents for him/her. What was heard, as part of a systematic review of evidence: Interview with agency head (superintendent): The superintendent confirmed the agency has established procedures to provide disabled residents equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual

harassment.

Interviews with residents (with disabilities or who are limited English proficient):
There were no residents identified as having a disability.

What was observed as part of a systematic review of evidence:

Site review discussions and observations:

The agency provided a detailed summary statement for procedures to provide disabled residents equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility takes measures to ensure that detainees who may be deaf, hard of hearing, blind, or have low vision and have intellectual, psychiatric, or speech disabilities are provided with appropriate accommodation and support services to communicate and access necessary resources within the facility effectively. This includes offering reading literature, asking questions and providing feedback, using Mobile Crisis for residents who have psychiatric disabilities, and using teachers to assist with residents who have intellectual disabilities. Thorough corrective action, the facility provided confirmation the PREA Intake and Comprehensive Education Videos (English, Spanish, ASL, Closed Captioning) were implemented (04/22/2025). Additionally, the facility updated the "No Means No" poster (English and Spanish) (04/16/2025).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The facility provided confirmation the PREA intake and comprehensive education videos (English, Spanish, ASL, Closed Captioning) were implemented (04/22/2025).

The facility updated the "No Means No" poster (English and Spanish) (04/16/2025).

Reasoning and analysis (by provision):

115.316 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The agency has established procedures to provide residents with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (page 1):

See 115.316 (a).

PREA educational materials:

The auditor reviewed PREA educational materials in English and Spanish. Thorough corrective action, the facility provided confirmation the PREA Intake and

Comprehensive Education Videos (English, Spanish, ASL, Closed Captioning) were implemented (04/22/2025).

What was heard, as part of a systematic review of evidence:

Interviews with residents who are limited English proficient:

One resident was identified as limited English proficient. The interview was completed with the assistance of a bilingual staff member, fluent in English and Spanish. The resident stated the facility provide information about sexual abuse and sexual harassment that they are able to understand through a PREA video in Spanish. The bilingual staff member helps when needed and Language Line was used during intake.

What was observed as part of a systematic review of evidence:

Site review:

The auditor observed the Tennessee Department of Children's Services Youth Acknowledgement and Notification of PREA is available in English and Spanish. The "No Means No Poster" (English and Spanish) was updated (04/16/2025).

Systems test of interpreter services:

The facility uses Language Line Interpretation Services to provide interpreter services. The auditor successfully tested access to the interpreter services through the assistance of the assistant director.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The facility provided confirmation the PREA intake and comprehensive education videos (English, Spanish, ASL, Closed Captioning) were implemented (04/22/2025).

The updated "No Means No Poster" is available in Spanish (04/16/2025).

Reasoning and analysis (by provision):

115.316 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Agency policy prohibits use of resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.364, or the investigation of the resident's allegations. The agency or facility documents the limited circumstances in individual cases where resident interpreters, readers, or other types of resident assistants are used.

In the past 12 months, the number of instances where resident interpreters, readers, or other types of resident assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the resident's safety, the performance of first-response duties under §115.364, or the

	investigation of the resident's allegations: 0 Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (page 1): HCJDC will not rely on resident interpreters except in urgent circumstances where safety may be compromised. What was heard, as part of a systematic review of evidence: Interviews with 12 random staff: All 12 staff interviewed stated the agency would use a professional for interpretation. No staff interviewed had any knowledge of resident interpreters, resident readers, or any other types of resident assistants being used in relation to allegations of sexual abuse or sexual harassment. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.317	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure • Tennessee Department of Children's Services Self-Declaration of Sexual Abuse/ Sexual Harassment for YDC Employees forms • Criminal Background Records Checks for Employees • Five Year Criminal Background Records Checks • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with administrative (human resources) staff Evidence (corrective action): • Five Year Criminal Background Records Checks (04/29/2025) • Criminal Background Records Checks for Contractors (04/22/2025) • Tennessee Department of Health Abuse Registry Checks for Employees (03/27/2025) • Tennessee Department of Health Abuse Registry Checks for Contractors (04/24/2025) • Tennessee Department of Children's Services PREA Questionnaire for Prior Institutional Employers (04/18/2025) Reasoning and analysis (by provision): 115.317 (a) What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Agency policy prohibits hiring or promoting anyone who may have contact with residents, and prohibits enlisting 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 (as defined in 42 U.S.C. 1997);
- Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
- Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

Review of files of persons hired or promoted in the past 12 months to determine whether questions regarding past conduct were asked and answered:

The auditor reviewed 10 Self-Declaration of Sexual Abuse/Sexual Harassment for YDC Employees forms and observed the facility asked applicants and employees about the three questions about previous misconduct when hiring new employees.

What was heard, as part of a systematic review of evidence:

Interview with administrative (human resources) staff (assistant director):

The assistant director stated the facility asks all applicants and employees about previous misconduct when hiring new employees.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.317 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents.

Documented evidence that the facility considers prior incidents of sexual harassment:

The auditor reviewed 10 Tennessee Department of Children's Services Self-Declaration of Sexual Abuse/Sexual Harassment for YDC Employees forms and observed the form includes the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents.

What was heard, as part of a systematic review of evidence:

Interview with administrative (human resources) staff (assistant director):

The assistant director stated the facility considers prior incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with the residents.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.317 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Agency policy requires that before it hires any new employees who may have contact with residents, it (a) conducts criminal background record checks, (b) consults any child abuse registry maintained by the State or locality in which the employee would work; and (c) consistent with Federal, State, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.

During the past 12 months:

- The number of persons hired who may have contact with residents who have had criminal background record checks: 16
- The percent of persons hired who may have contact with residents who have had criminal background record checks: 100%

Review of files of personnel hired in the past 12 months to determine that the agency has completed checks consistent with 115.317(c):

The auditor reviewed initial criminal background records checks for four staff and observed they are conducted according to the standard provision requirements.

No documented evidence was provided that agency consults the Tennessee Department of Health Abuse Registry. Corrective action was required.

No documented evidence was provided that the facility contacts all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Corrective action was required.

What was heard, as part of a systematic review of evidence:

Interview with administrative (human resources) staff (assistant director):

The assistant director stated the agency performs criminal background record checks and considers pertinent civil or administrative adjudications for all newly hired employees who may have contact with the residents and all employees, who may have contact with residents who are being considered for promotions.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The facility implemented the Tennessee Department of Children's Services PREA Questionnaire for Prior Institutional Employers (04/18/2025) to document efforts to contact all prior institutional employers for

information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.

The facility completed Tennessee Department of Health Abuse Registry Checks for Employees for 27 staff (03/27/2025).

Reasoning and analysis (by provision):

115.317 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Agency policy requires that a criminal background records check be completed, and applicable child abuse registries consulted before enlisting the services of any contractor who may have contact with residents.

During the past 12 months:

- The number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with residents: 2
- The percent of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with residents: 100%

Records of background checks of contractors who might have contact with residents:

No criminal background records checks or child abuse registry checks for contractors were provided for review. Corrective action was required.

What was heard, as part of a systematic review of evidence:

Interview with administrative (human resources) staff (assistant director): The assistant director stated the facility performs criminal background record checks and considers pertinent civil or administrative adjudications for all contractors who may have contact with the residents and all contractors, who may have contact with residents who are being considered for promotions. Additionally, the facility consults with the child abuse registry maintained by the State.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The facility completed criminal background records checks for three contractors (04/22/2025).

The facility completed Tennessee Department of Health Abuse Registry checks for three contractors (04/24/2025).

Reasoning and analysis (by provision):

115.317 (e)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Agency policy requires that either criminal background records checks be conducted at least every five years of current employees and contractors who may have contact with residents or that a system is in place for otherwise capturing such information for current employees.

Hamilton County Juvenile Detention Center PREA Policy and Procedure (page 5): WCJDC shall conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents.

Documentation of background records checks of current employees and contractors at five year intervals when applicable:

No documented evidence was provided indicating staff receive criminal background records checks at five year intervals. Corrective action was required.

What was heard, as part of a systematic review of evidence:

Interview with administrative (human resources) staff (assistant director):

The assistant director stated the agency conducts criminal background records checks biannually for current employees and contractors who may have contact with residents.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

Five year criminal background records checks were completed for three staff who have been at the facility for over five years (04/29/2025).

Reasoning and analysis (by provision):

115.317 (f)

What was read, as part of a systematic review of evidence:

The auditor reviewed 15 Self-Declaration of Sexual Abuse/Sexual Harassment for YDC Employees forms and observed the facility asked applicants and employees about the three questions about previous misconduct when hiring new employees annually. The form is also used for promotions, but there were no applicable examples.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.317 (g)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

What was heard, as part of a systematic review of evidence:

	Interview with administrative (human resources) staff (assistant director): The assistant director stated the agency would provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.318	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with agency head (superintendent) • Interview with superintendent • Site review Findings (By Provision): 115.318 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency or facility has not acquired a new facility or made a substantial expansion or modification to existing facilities since the last PREA audit. The auditor observed the PAQ indicates the modifications included painting the exterior of the building. What was heard, as part of a systematic review of evidence: Interview with the agency head/superintendent: The superintendent stated the facility considers the ability to protect residents from sexual abuse when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities. Also, the agency would consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.318 (b) What was read, as part of a systematic review of evidence:

	Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency or facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit. What was heard, as part of a systematic review of evidence: Interview with the agency head/superintendent: The superintendent stated when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect residents from sexual abuse. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.321	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion Evidence relied upon in making the compliance determinations: • State of Tennessee Department of Children's Services Administrative Policies and Procedures: 14.10 Special Investigations Unit Child Protective Services Investigations dated December 1, 2023 • Tennessee Department of Children's Services Protocol for DCS PREA Investigators to Conduct Prison Rape Elimination Act (PREA) Investigation • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with PREA coordinator • Interviews with a random sample of staff • Interviews with residents who reported a sexual abuse Evidence (corrective action): • 2025-2027 Child Protective Investigation Team of Hamilton County Tennessee Interagency Agreement (07/01/2025) • Email Correspondence with Partnership for Families, Children and Adults Rape Crisis Center (09/15/2025) • Email Correspondence with Hamilton County Sheriff's Department (07/01/2025) Reasoning and analysis (by provision): 115.321 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility is not responsible for conducting administrative (including resident-on-resident sexual abuse or staff sexual misconduct).

The Tennessee Department of Children's Services Special Investigations Unit and the Williamson County Sheriff's Office would be responsible for conducting criminal sexual abuse investigations.

State of Tennessee Department of Children's Services Administrative Policies and Procedures: 14.10 Special Investigations Unit Child Protective Services Investigations (page 1):

The Department of Children's Services (DCS) Special Investigations Unit (SIU) conducts investigations on allegations of child abuse and neglect which occur while a child is in DCS custody or when the case involves non-custodial children where the alleged perpetrator (AP) is acting in an official employment, volunteer, or foster care capacity. The SIU conducts investigations where the allegations would affect the employment or volunteer status of those working with children.

SIU is responsible for conducting investigations when the abuse or neglect involves children who are not in the legal custody of DCS, but they are under the supervision or care of an individual(s) functioning in an official employment or volunteer capacity within detention facilities.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

The staff interviewed stated they are knowledgeable of the agency's protocol for obtaining usable physical evidence if a resident alleges sexual abuse. They were also knowledgeable about who is responsible for conducting sexual abuse investigations.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.321 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The protocol is developmentally appropriate for youth. The protocol was adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, 'A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,' or similarly comprehensive and authoritative protocols developed after 2011.

Uniform evidence protocol:

The auditor reviewed the Tennessee Department of Children's Services Protocol for DCS PREA Investigators to Conduct Prison Rape Elimination Act (PREA) Investigation and observed the protocol is developmentally appropriate for youth.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.321 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility offers all residents who experience sexual abuse access to forensic medical examinations. Forensic medical examinations are offered without financial cost to the victim. Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations.

During the past 12 months:

- The number of forensic medical exams conducted: 0
- The number of exams performed by SANEs/SAFEs: 0
- The number of exams performed by a qualified medical practitioner: 0

Agreement for access to forensic medical examinations:

The facility provided the 2025–2027 Child Protective Investigation Team of Hamilton County, Tennessee Interagency Agreement (dated July 1, 2025), which documents the availability of forensic medical examinations through the Emmy Haney House Child Advocacy Center.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.321 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility makes a victim advocate from a rape crisis center available to the victim, in person or by other means. document efforts to secure services from rape crisis centers.

Memorandums of understanding for victim advocate services:

No agreement or documented efforts to secure services from a rape crisis center were provided for review. This was accomplished through corrective action.

What was heard, as part of a systematic review of evidence:

Interview with PREA coordinator:

The PREA coordinator stated the facility is in the process of providing a qualified victim advocate.

Interviews with residents who reported a sexual abuse:

There were no residents, present during the onsite phase of the audit, who reported a sexual abuse allegation.

Finding:

Based on this analysis, the facility is not substantially compliant with this

	provision and corrective action is completed. The facility provided email correspondence with the Partnership for Families, Children and Adults Rape Crisis Center dated September 15, 2025, demonstrating that a victim advocate from the rape crisis center is available to support victims. Reasoning and analysis (by provision): 115.321 (e) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: If requested by the victim, a victim advocate, or qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. Memorandums of understanding for victim advocate services: See 115.321 (d). Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.321 (f) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: If the agency is not responsible for administrative or criminal investigating allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of paragraphs §115.321 (a) through (e) of the standards. Documentation of the request regarding requirements of §115.321(a) through (e) with outside investigating agency: No documented request was provided for review. This was accomplished through corrective action. Finding: Based on this analysis, the facility is not substantially compliant with this provision and corrective action is completed. The facility provided email correspondence with the Hamilton County Sheriff's Department dated July 1, 2025, demonstrating a documented request with local law enforcement regarding compliance with the requirements of §115.321(a) through (e).
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115.322	Policies to ensure referrals of allegations for investigations
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Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.7
- Agency Website: <https://www.hamiltontn.gov/Courts.aspx>
- Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities)
- Interview with agency head (superintendent)

Evidence (corrective action):

- Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.7 (updated 04/23/2025)
- Hamilton County Juvenile Detention Center Investigations Policy (11/07/2025)

Findings (By Provision):

115.322 (a)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

In the past 12 months:

- The number of allegations of sexual abuse and sexual harassment that were received: 0
- The number of allegations resulting in an administrative investigation: 0
- The number of allegations referred for criminal investigation: 0

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.7 (page 1):

HCJDC will ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse/assault/misconduct/harassment.

Investigation reports:

The facility reported there were no allegations of sexual abuse or sexual harassment.

What was heard, as part of a systematic review of evidence:

Interview with agency head (superintendent):

The superintendent confirmed the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.322 (b)

	What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. The Hamilton County Sheriff's Office investigators would conduct criminal investigations. What was observed as part of a systematic review of evidence: The auditor reviewed the agency website at https://www.hamiltontn.gov/Courts.aspx and observed the Hamilton County Juvenile Detention Center's policy to investigate allegations of sexual abuse or sexual harassment was not published. This was accomplished through corrective action. Finding: Based on this analysis, the facility is not substantially compliant with this provision and corrective action is required. The Hamilton County Juvenile Detention Center Investigations Policy was posted on the facility's website on November 7, 2025. Reasoning and analysis (by provision): 115.322 (c) What was read, as part of a systematic review of evidence: Publication (website or paper) that describes investigative responsibilities of both the agency and the separate entity that conducts criminal investigations for the agency: No publication was provided for review. This was accomplished through corrective action. Finding: Based on this analysis, the facility is not substantially compliant with this provision and corrective action is completed.
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115.331	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.10 • Corrections One Academy curriculum • Corrections One Academy course report • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile

Facilities)

- Interviews with random sample of staff

Findings (By Provision):

115.331 (a)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The agency trains all employees who may have contact with residents on the eleven required topics.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.10 (page 1):

HCJDC will be trained on:

- a. The zero-tolerance policy for sexual abuse and sexual harassment;
- b. How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention; detection, reporting, and response policies and procedures;
- c. Residents' right to be free from sexual abuse and sexual harassment;
- d. The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- e. The dynamics of sexual abuse and sexual harassment in juvenile facilities;
- f. The common reactions of juvenile victims of sexual abuse and sexual harassment;
- g. The common reactions of juvenile victims of sexual abuse and sexual harassment;
- h. 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;
- i. How to avoid inappropriate relationships with residents;
- j. How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents;
- k. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; and
- l. Relevant laws regarding the applicable age of consent.

Training curriculum and training records:

- The auditor reviewed the Corrections One Academy curriculum and observed the curriculum includes the topics required by the standard provision.
- The auditor reviewed the Corrections One Academy course report and observed 28 staff received the training in 2025.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

The staff interviews revealed the training occurs annually.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.331 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Training is tailored to the unique needs and attributes and gender of the residents at the facility. Employees who are reassigned from facilities housing the opposite gender are given additional training.

Sample of training records:

See 115.331 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.331 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Between trainings the agency provides employees who may have contact with residents with refresher information about current policies regarding sexual abuse and harassment. The frequency with which employees who may have contact with residents receive refresher training on PREA requirements: annually

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.10 (pages 1-2):

All HCJDC employees and volunteers that have direct contact with residents will receive training during orientation and annual refresher training thereafter.

Sample of training records:

See 115.331 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.331 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency documents that employees who may have contact with residents understand the training they have received through employee signature or electronic verification.

Hamilton County Juvenile Detention Center PREA Policy and Procedure (page 7):

All HCJDC employees, volunteers and contractors are required to sign form CS-0940, Employee Acknowledgement and Notification of Prison Rape Elimination Act (PREA) to acknowledge they have read the MCJDC zero-tolerance policy and understand the training they have received.

HCJDC will maintain documentation on all employees, volunteers and contractors

	who receive training on PREA. Sample of training records: The auditor reviewed the Corrections One Academy course report and observed 28 staff received the training in 2025. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.332	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.10 • Prison Rape Elimination Act Acknowledgement forms • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interviews with Volunteers and Contractors who have Contact with Residents Evidence (corrective action): • Prison Rape Elimination Act Acknowledgement form updated with correct information (04/18/2025) • Corrections One Academy certificates for medical staff (05/12/2025) • NIC Training Certificates – PREA 201 for Medical and Mental Health Practitioners (04/26/2025) Reasoning and analysis (by provision): 115.332 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: All volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency’s policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. The number of volunteers and contractors, who have contact with residents, who have been trained in agency’s policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response: 11 Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.10 (page 1): All HCJDC employees and volunteers that have direct contact with residents will receive training during orientation and annual refresher training thereafter.

Review of training records of volunteers and contractors:
The auditor reviewed Prison Rape Elimination Act Acknowledgement forms and observed nine volunteers and contractors signed that they received training. The acknowledgements indicate the training included the zero-tolerance policy regarding sexual abuse and sexual harassment, response, and how to report such incidents.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.332 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents, but all volunteers and contractors who have contact with residents shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

Review of training records of volunteers and contractors:
The auditor reviewed the training documents for the contracted medical staff completed through corrective action. The medical staff received the training topics required under § 115.331. The training was documented with the Corrections One Academy certificates. The specialized training topics required by § 115.335 were completed through National Institute of Corrections (NIC).

What was heard, as part of a systematic review of evidence:

Interviews with volunteers or contractors who have contact with residents:
The auditor interviewed one volunteers and two contractors. All three individuals stated they have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

The contracted nurse stated they had not received the required training topics for § 115.331 and § 115.335.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The four medical staff completed PREA 201 for Medical and Mental Health Practitioners provided by the National Institute of Corrections (NIC) (04/26/2025).

The medical staff also completed the required training topics for § 115.331 through Corrections One Academy Training (05/12/2025).

Reasoning and analysis (by provision):

	115.332 (c) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency maintains documentation confirming that volunteers and contractors understand the training they have received. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.10 (page 1): HCJDC will maintain documentation on all employees, volunteers and contractors who receive training on PREA. Review of training records of volunteers and contractors: See 115.332 (a) and (b). Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.333	Resident education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 • Tennessee Department of Children’s Services Youth Acknowledgement and Notification of PREA (English and Spanish) • No Means No poster (English and Spanish) • Language Line Interpretation Services • Systems Test: Access to Interpreter • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with agency head (superintendent) • Interviews with random sample of staff • Interviews with residents (with disabilities or who are limited English proficient) • Site review Evidence (corrective action): • PREA Intake Video (English, Spanish, ASL, Closed Captioning) (04/22/2025) • PREA Comprehensive Education Video (English, Spanish, ASL, Closed Captioning) (04/22/2025) • No Means No poster (English and Spanish) (updated 04/16/2025) • Intake examples (6/17/2025) • Comprehensive education examples (06/17/2025) Reasoning and analysis (by provision):

115.333 (a)**What was read, as part of a systematic review of evidence:**

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Residents receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. This information is provided in an age-appropriate fashion.

Of residents admitted during the past 12 months, the number who were given this information at intake: 452

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (page 1):

PREA information will be covered during the intake process.

What was observed as part of a systematic review of evidence:

Process observation:

The supervisor demonstrated the intake process. The auditor observed residents sign the Tennessee Department of Children's Services Youth Acknowledgement and Notification of PREA to document they have received the PREA educational materials during the intake process. The auditor reviewed the acknowledgement and determined it is inclusive of the information required during the intake process.

To improve the intake process the facility implemented a new PREA intake video and updated the "No Means No" poster to provide additional information about outside victim advocates for emotional support services related to sexual abuse.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The facility implemented a new PREA intake video provided by the PREA Resource Center (04/22/2025) to improve the intake process and provide additional resources such as ASL and closed captioning. The video includes the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

The facility provided examples of the Youth Acknowledgement and Notification of PREA demonstrating the new PREA intake video has been implemented (06/17/2025).

The facility updated the "No Means No" poster to improve the intake process and provide additional information about outside victim advocates for emotional support services related to sexual abuse and procedures for reporting anonymously to an outside agency (04/16/2025).

Reasoning and analysis (by provision):**115.333 (b)****What was read, as part of a systematic review of evidence:**

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
Of residents admitted during the past 12 months, the number who received such education within 10 days of intake: unknown

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (page 2):

HCJDC will educate the resident every ten (10) days on PREA.

To improve the PREA comprehensive education provided to the residents the facility implemented a new PREA Comprehensive Education Video (English, Spanish, ASL, and Closed Captioning) (04/22/2025) through corrective action.

Additionally, the facility updated the Youth Acknowledgement and Notification of PREA (04/22/2025) to document receipt of comprehensive education within 10 days of intake.

Lastly, the facility provide examples demonstrating comprehensive education was provided within 10 days of intake (06/17/2025).

What was heard, as part of a systematic review of evidence:

Interview with intake staff:

The supervisor confirmed the facility did not provide age-appropriate education on residents' rights to be free from sexual abuse and sexual harassment, from retaliation for reporting such incidents, and on agency policies and procedures for responding to such incidents within 10 days of intake.

Interviews with five random residents:

Two of the five residents interviewed had been confined at the facility for less than 10 days. The two residents stated they watched the comprehensive training video.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The facility implemented a new PREA comprehensive education video provided by the PREA Resource Center (04/22/2025). The comprehensive information includes: a resident's right to be free from sexual abuse and sexual harassment, a resident's right to be free from retaliation for reporting such incidents, and agency policies and procedures for responding to such incidents.

The facility updated the Youth Acknowledgement and Notification of PREA (04/22/2025) to document receipt of comprehensive education within 10 days of intake.

The facility provided examples demonstrating comprehensive education was provided within 10 days of intake (06/17/2025).

Reasoning and analysis (by provision):

115.333 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
All residents were educated within 10 days of intake.

What was heard, as part of a systematic review of evidence:

Interview with intake staff:

The supervisor stated all residents, including those transferred from other facilities, are educated on the agency's zero-tolerance policy on sexual abuse and sexual harassment.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):**115.333 (d)****What was read, as part of a systematic review of evidence:**

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The agency shall provide resident education in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to residents who have limited reading skills.

What was observed as part of a systematic review of evidence:

Site review:

The auditor observed the Youth Acknowledgement and Notification of PREA is available in in English and Spanish. The facility uses Language Line Interpretation Services to provide interpreter services. The agency provided a detailed summary statement for procedures to provide disabled residents equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility takes measures to ensure that detainees who may be deaf, hard of hearing, blind, or have low vision and have intellectual, psychiatric, or speech disabilities are provided with appropriate accommodation and support services to communicate and access necessary resources within the facility effectively. This includes offering reading literature, asking questions and providing feedback, using Mobile Crisis for residents who have psychiatric disabilities, and using teachers to assist with residents who have intellectual disabilities. Thorough corrective action, the facility provided confirmation the PREA Intake and Comprehensive Education Videos (English, Spanish, ASL, Closed Captioning) were implemented (04/22/2025). Additionally the facility updated the "No Means No" poster (English and Spanish) (04/16/2025).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The facility implemented a new PREA intake video (04/22/2025), and new PREA comprehensive education video (04/22/2025). Both videos are provided by the PREA Resource Center. The videos are available in English and Spanish, ASL, and have closed captioning.

The facility updated the “No Means No” poster (English and Spanish) (04/16/2025).

Reasoning and analysis (by provision):

115.333 (e)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency maintains documentation of resident participation in PREA education sessions.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (page 2):

All HCJDC residents are required to sign DCS/HCJDC Acknowledgement and Notification of Prison Rape Elimination Act (PREA) to acknowledge that they have been notified and informed of PREA and on how to report incidents of sexual abuse/assault/misconduct/harassment.

HCJDC staff will document PREA activities and efforts for educating and informing residents in their intake file.

Review of documentation of resident participation in education sessions:

The auditor reviewed resident participation in education sessions is documented with the Youth Acknowledgement and Notification of PREA. The facility updated the Youth Acknowledgement and Notification of PREA (04/22/2025) to document receipt of comprehensive education within 10 days of intake.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The facility updated the Youth Acknowledgement and Notification of PREA (04/22/2025) to document receipt of comprehensive education within 10 days of intake.

The facility provided examples demonstrating comprehensive education was provided within 10 days of intake (06/17/2025).

Reasoning and analysis (by provision):

115.333 (f)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency ensures that key information about the agency’s PREA policies is continuously and readily available or visible through posters, resident handbooks, or other written formats.

What was observed as part of a systematic review of evidence:

Site review:

The facility updated the “No Means No” poster (English and Spanish) (04/16/2025).

Finding:

	Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed. The facility updated the “No Means No” poster to provide additional information about outside victim advocates for emotional support services related to sexual abuse (04/16/2025).
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115.334	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • State of Tennessee Department of Children’s Services Administrative Policies and Procedures: 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse and Sexual Harassment Incidents and Prison Rape Elimination Act (PREA) dated May 7, 2024 • PREA Investigator Training Edison Completion Log • National Institute of Corrections’ Prison Rape Elimination Act (PREA) Investigating Sexual Abuse in a Confinement Setting Course Certificates • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with investigative staff (Tennessee Department of Children’s Services) Reasoning and analysis (by provision): 115.334 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings. State of Tennessee Department of Children’s Services Administrative Policies and Procedures: 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse and Sexual Harassment Incidents and Prison Rape Elimination Act (PREA) (page 11): Employees who conduct investigations of allegations of sexual abuse/harassment on children/youth in YDC/agencies care receive training in compliance with PREA Standards. Review of training records/logs of investigative staff: The auditor reviewed annual training required by § 115.331 and National Institute of Corrections’ Prison Rape Elimination Act (PREA) Investigating Sexual Abuse in a Confinement Setting Course Certificates. The training was completed by 21 Tennessee Department of Children’s Services investigators. What was heard, as part of a systematic review of evidence: Interview with investigative staff (Tennessee Department of Children’s Services):

	The Tennessee Department of Children’s Services investigator interviewed stated they received training specific to conducting sexual abuse and sexual harassment investigations in confinement settings. They stated they received the training required by §115.331 and completed the specialized training topics. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.334 (b) Specialized training includes techniques for interviewing juvenile sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. What was heard, as part of a systematic review of evidence: Interview with investigative staff (Tennessee Department of Children’s Services): The Tennessee Department of Children’s Services investigator interviewed stated they received the required training. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.334 (c) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency maintains documentation showing that investigators have completed the required training. The number of investigators the agency currently employs: Zero The number of investigators currently employed who have completed the required training: Zero (Investigators are employed by the Tennessee Department of Children’s Services.) Review of training records/logs of investigative staff: See 115.334 (a). Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.335	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

- Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.10
- Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities)
- Interviews with medical staff and mental health staff

Evidence (corrective action):

- Corrections One Academy certificates for medical staff (05/12/2025)
- NIC Training Certificates: PREA 201 for Medical and Mental Health Practitioners (04/26/2025)

Reasoning and analysis (by provision):**115.335 (a)****What was read, as part of a systematic review of evidence:**

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities.

- The number of all medical and mental health care practitioners who work regularly at this facility who received the training: 3
- The percent of all medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy: 100%

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.10 (page 1):

All HCJDC employees and volunteers that have direct contact with residents will receive training during orientation and annual refresher training thereafter.

Review of training records of medical staff and mental health staff:

No documented evidence was provided that the medical staff received the specialized training topics. The specialized training topics were completed through corrective action.

What was heard, as part of a systematic review of evidence:

Interviews with medical staff and mental health staff:

The nurse interviewed stated they had not received the specialized training topics regarding sexual abuse and sexual harassment.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The four medical staff completed PREA 201 for Medical and Mental Health Practitioners provided by the National Institute of Corrections (NIC) (04/26/2025).

Reasoning and analysis (by provision):**115.335 (b)****What was read, as part of a systematic review of evidence:**

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

Hamilton County Juvenile Detention Center does not employ medical staff that conduct forensic exams. Forensic medical examinations are performed offsite.

What was heard, as part of a systematic review of evidence:

Interviews with medical staff and mental health staff:

The nurse stated forensic medical examinations are not conducted at the facility. Forensic examinations would be conducted at Children's Hospital at Erlanger.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.335 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency maintains documentation showing that medical and mental health practitioners have completed the required training.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.10 (page 1):

All HCJDC employees, volunteers and contractors are required to sign form CS-0940, Employee Acknowledgement and Notification of Prison Rape Elimination Act (PREA) to acknowledge they have read the MCJDC zero-tolerance policy and understand the training they have received.

HCJDC will maintain documentation on all employees, volunteers and contractors who receive training on PREA.

Review of training records of medical staff and mental health staff:

See 115.335 (a):

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

See 115.335 (a).

Reasoning and analysis (by provision):

115.335 (d)

Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.331 or for contractors and volunteers under § 115.332, depending upon the practitioner's status at the agency.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.10 (page 1):

Medical and mental health care practitioners will also receive the training mandated for employees under PREA Standards §115.331 and volunteers under PREA standards § 115.332.

	Review of training records of volunteers and contractors: No documented evidence was provided that the medical staff received the specialized training topics or the training topics required under § 115.331. Training was completed through corrective action. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed. The medical staff completed PREA 201 for Medical and Mental Health Practitioners provided by the National Institute of Corrections (NIC) (04/26/2025). The medical staff completed the required training topics for § 115.331 through Corrections One Academy Training (05/12/2025).
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115.341	Obtaining information from residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 • Assessment, Checklist and Protocol for Behavior and Risk for Victimization form • Statement: no applicable risk reassessments during the 12 month audit period • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with PREA coordinator • Interview with staff responsible for risk screening • Interviews with random sample of residents • Site review Evidence (corrective action): • Statement regarding implementing the Tennessee Department of Children's Services Prison Rape Elimination Act (PREA) Risk Assessment (05/15/2025) • Tennessee Department of Children's Services Prison Rape Elimination Act (PREA) Risk Assessment examples (April 2025 - May 2025) • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 updated to include periodic reassessments (04/23/2025) Reasoning and analysis (by provision): 115.341 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual

abusiveness toward other residents.

Through corrective action, the policy requires that residents be screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their intake.

The policy requires that a resident's risk level be reassessed periodically throughout their confinement at six month intervals.

In the past 12 months:

- The number of residents entering the facility (either through intake or transfer) whose length of stay in the facility was for 72 hours or more who were screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their entry into the facility: 104 (The PAQ incorrectly stated five.)
- The percent of residents entering the facility (either through intake or transfer) whose length of stay in the facility was for 72 hours or more who were screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their entry into the facility: 100%

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (page 1):

During the intake process, DCS form CS-0946 Assessment, Checklist and Protocol for Behavior and Risk for Victimization will be administered to all resident within seventy-two (72) hours of admission into the facility.

Review of records for residents admitted to the facility:

- The auditor reviewed five r Assessment, Checklist and Protocol for Behavior and Risk for Victimization forms for the residents interviewed and observed the assessments were completed within 72 hours of entry into the facility.
- There were no applicable risk reassessments for the residents interviewed.

Additionally, the facility provided a statement that no residents remained at the facility for 90 days or more during the 12 month audit period, therefore there were no applicable historical risk reassessments.

What was observed as part of a systematic review of evidence:

Site review:

The staff responsible for risk screening (supervisor) demonstrated the screening process. The screening process occurs at the intake desk, ensuring as much privacy as possible. They confirmed they screen residents upon admission to the facility or transfer from another facility for risk of sexual abuse victimization or sexual abusiveness toward other residents. They stated they screen residents for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their intake. The information is ascertained through conversations with residents during intake using the Assessment, Checklist and Protocol for Behavior and Risk for Victimization.

What was heard, as part of a systematic review of evidence:

Interviews with five random residents:

All five of the residents stated they were asked questions like the following

examples at intake:

- Have you have ever been sexually abused?
- Do you identify with being gay, bisexual, or transgender?
- Do you have any disabilities?
- Do you think you might be in danger of sexual abuse at the facility?

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 was updated (04/23/2025) to include periodic reassessments at 90-day intervals.

Reasoning and analysis (by provision):

115.341 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
Risk assessment is conducted using an objective screening instrument.

Screening instrument:

The auditor observed the Assessment, Checklist and Protocol for Behavior and Risk for Victimization and observed the risk assessment is an objective screening instrument. There is a set format of objective yes and no questions and a subjective observation of gender nonconforming appearance, and the scoring system leads to a determination of risk level. The tool includes the following risk levels:

Vulnerable to victimization is indicated if a score is nine or higher.

Sexually aggressive behavior is indicated with a score of five or higher.

Violent aggressive behavior is indicated if a score is five or higher.

New screening instrument:

The auditor observed the Tennessee Department of Children's Services Prison Rape Elimination Act (PREA) Risk Assessment and observed the risk assessment is an objective screening instrument. There is a set format of objective yes and no questions and a subjective observation of gender nonconforming appearance, and the scoring system leads to a determination of risk level. The tool includes the following risk levels:

Vulnerable to victimization is indicated if a score is nine or higher.

Sexually aggressive behavior is indicated with a score of four or higher.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.341 (c)

What was read, as part of a systematic review of evidence:

Screening instrument:

The auditor reviewed the Assessment, Checklist and Protocol for Behavior and Risk

for Victimization and observed the risk assessment tool did not include the criteria required of intersex.

Trough corrective action, the facility implemented the Tennessee Department of Children's Services Prison Rape Elimination Act (PREA) Risk Assessment. The presence of each required risk factor was assessed as such:

a. Prior sexual victimization or abusiveness - Asked in questions 5., and 5b. Question 5., "Have you ever been attacked, bullied, or abused by people your own age (peers)?" Question 5.b, "Have you ever had a sexual experience you did not want to have?"

b. Any gender nonconforming appearance or manner or whether the resident identifies as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse - Affirmatively asked in the "Youth Interview" and subjectively observed in the "Features of the youth presentation and behaviors". Youth interview, Gender Identity: male, female, transgender, intersex, or Non-binary?" and Sexual Orientation: straight, gay, lesbian, bisexual, or other?" Question 4, "Does the juvenile's response match collateral information?" Features of the youth presentation and behaviors, "Gender nonconformity (e.g. cross-gender clothing, cross-gender identity?"

c. Current charges and offense history - Asked in questions 2, 6, and 7. Question 2, "Have you ever been in a juvenile facility?" Question 6, "Have you ever been adjudicated (found guilty of) for a sexual offense?" Question 7, "Have you ever been adjudicated (found guilty of) for a violent offense?"

d. Age - Asked in question 1. "Age of youth?"

e. Level of emotional and cognitive development - Observed in "Features of the youth presentation and behaviors", "Behaviors that are likely to irritate and annoy other youth (e.g. immature, silly)".

f. Physical size and stature - "Features of the youth's physical appearance", "Small build" and "looks younger than stated age."

g. Mental illness or mental disabilities - "Features of the youth's physical appearance", "Behaviors that appear related to mental illness (e.g. jittery, crying, bizarre)."

h. Intellectual or developmental disabilities - Asked in question 8. "Intellectual impairment" From the file review is there evidence that this youth has been previously reported to have an intellectual impairment (low IQ), learning disability or special education classes?"

i. Physical disabilities - Observed in "Features of the youth's physical appearance", "Pronounced disfigurement", "Physical disability", or "Deaf."

j. The resident's own perception of vulnerability - Asked in question 4, "Do you feel at risk from attack or abuse from other youths?"

k. Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents - Observed in "Features of the youth's physical appearance", "Having a lack of exposure to criminal lifestyle", "Being from an ethnic minority not well represented in the facility population (e.g. Vietnamese, Indian, Middle Eastern" and "Membership in a gang that is likely to be a target of attack from others."

	Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed. The agency provided a statement that the Tennessee Department of Children’s Services Prison Rape Elimination Act (PREA) Risk Assessment form was implemented (05/15/2025). The agency provided five Tennessee Department of Children’s Services Prison Rape Elimination Act (PREA) Risk Assessment examples (April 2025 - May 2025) to document the new risk assessment has been implemented. Reasoning and analysis (by provision): 115.341 (d) What was heard, as part of a systematic review of evidence: Interview with staff responsible for risk screening (supervisor): The supervisor stated the information is ascertained through conversations with the residents using the Tennessee Department of Children’s Services Prison Rape Elimination Act (PREA) Risk Assessment form. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.341 (e) What was heard, as part of a systematic review of evidence: Interview with the PREA coordinator: The PREA coordinator stated the agency has outlined who can have access to a resident’s risk assessment within the facility, to protect sensitive information from exploitation. The supervisors have access and the risk assessment are kept in a locked file cabinet in control. Interview with staff responsible for risk screening (supervisor): The supervisor stated the agency has outlined who can have access to a resident’s risk assessment within the facility, to protect sensitive information from exploitation. The supervisors have access. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.342	Placement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

- Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4
- Protocol for At-Risk Vulnerable/Sexually Vulnerable Youth
- Detention Officer Shift Record (Wing Sheet)
- Hamilton County Juvenile Detention Center Admittance Form
- Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities)
- Interview with superintendent
- Interview with PREA coordinator
- Interview with staff responsible for risk screening
- Interview with staff who supervise residents in isolation
- Interview with medical staff
- Interview with mental health staff
- Interviews with residents in isolation (for risk of sexual victimization/who allege to have suffered sexual abuse
- Interviews with transgender/intersex/gay/lesbian/bisexual residents
- Site review

Reasoning and analysis (by provision):**115.342 (a)****What was read, as part of a systematic review of evidence:**

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency/facility uses information from the risk screening required by §115.341 to inform housing, bed, work, education, and program assignments with the goal of keeping all residents safe and free from sexual abuse.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (page 1):

The information obtained from the risk assessment will be used to make housing, bed, program, education, and work assignments for residents with the goal of keeping all residents safe and free of sexual abuse.

Review of risk-based housing decisions:

The auditor reviewed five completed Assessment, Checklist and Protocol for Behavior and Risk for Victimization forms for residents interviewed and five Tennessee Department of Children's Services Prison Rape Elimination Act (PREA) Risk Assessment forms completed through corrective action. The auditor observed no residents required a Protocol for At-Risk Vulnerable/Sexually Vulnerable Youth based on their risk for violent aggressive behavior.

The auditor reviewed one Detention Center Admittance Form and wing sheet for a resident interviewed and observed the resident was on no roommate status.

What was heard, as part of a systematic review of evidence:

Interview with PREA coordinator:

The PREA coordinator discussed how the facility uses information from risk screening during intake to keep residents safe and free from sexual abuse. No roommate status is indicated on the face sheet and wing sheets are used to alert

staff during programming and education. All residents program with their living unit and residents are under direct supervision 100% of the time while they are out of their rooms to ensure their safety.

Interview with staff responsible for risk screening (supervisor):

The supervisor stated the facility uses information from the risk screening during intake to keep residents safe and free from sexual abuse and sexual harassment. They stated bed placement would indicate no roommate status. Wing sheets provide information to staff during programming and education.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.342 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The facility has a policy that residents at risk of sexual victimization may only be placed in isolation as a last resort if less restrictive measures are inadequate to keep them and other residents safe, and only until an alternative means of keeping all residents safe can be arranged. The facility policy requires that residents at risk of sexual victimization who are placed in isolation have access to legally required educational programming, special education services, and daily large-muscle exercise.

In the past 12 months:

- The number of residents at risk of sexual victimization who were placed in isolation: 0
- The number of residents at risk of sexual victimization who were placed in isolation who have been denied daily access to large muscle exercise, and/or legally required education, or special education services: 0
- The average period of time residents at risk of sexual victimization who were held in isolation to protect them from sexual victimization: N/A

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The superintendent confirmed Hamilton County Juvenile Detention Center has not used isolation for residents at risk of sexual victimization.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.342 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The facility prohibits placing lesbian, gay, bisexual, transgender, or intersex

residents in particular housing, bed, or other assignments solely on the basis of such identification or status. The facility prohibits considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator of likelihood of being sexually abusive.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (page 1):

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

What was heard, as part of a systematic review of evidence:

Interviews with the PREA coordinator:

The PREA coordinator confirmed the facility does not have a special housing unit for lesbian, gay, bisexual, transgender, or intersex residents.

Interviews with transgendered/intersex/gay/lesbian/bisexual residents:

No resident identified as gay, lesbian, bisexual, transgender, or intersex during the onsite phase of the audit.

What was observed as part of a systematic review of evidence:

Site review:

The auditor observed the housing units. There was no particular housing, bed, or other assignments of gay, bisexual, transgender, or intersex residents solely on the basis of such identification or status.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.342 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The agency or facility makes housing and program assignments for transgender or intersex residents in the facility on a case-by-case basis.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (page 1):

Hamilton County Juvenile Detention Center PREA Policy and Procedure (page 10):

When deciding to assign housing for a transgender or intersex resident the facility will consider on a case-by-case basis whether a placement would ensure the residents health and safety, and whether the placement would present management or security problems.

What was heard, as part of a systematic review of evidence:

Interview with PREA coordinator:

The PREA coordinator stated housing and programming assignments for transgender or intersex residents are made 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.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.342 (e)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Placement and programming assignments for each transgender or intersex resident shall be reassessed at least twice each year to review any threats to safety experienced by the resident.

What was heard, as part of a systematic review of evidence:

Interviews with PREA coordinator and staff responsible for risk screening (supervisor):

The PREA coordinator and supervisor both stated placement and programming assignments are reassessed at least twice each year to review any threats to safety experienced by the resident.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.342 (f)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: A transgender or intersex resident's own views with respect to his or her own safety shall be given serious consideration.

What was heard, as part of a systematic review of evidence:

Interview with PREA coordinator:

The PREA coordinator stated the agency considers whether placement will ensure a resident's health and safety and stated transgender or intersex residents' views of their safety are given serious consideration in placement and programming assignments.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.342 (g)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Transgender and intersex residents shall be given the opportunity to shower separately from other residents.

What was heard, as part of a systematic review of evidence:

Interviews with PREA coordinator and staff responsible for risk screening (supervisor):

The PREA coordinator and supervisor both stated transgender and intersex residents are given the opportunity to shower separately from other residents. They could shower at a different time.

Interviews with transgendered/intersex:

No residents identified as transgender or intersex during the onsite phase of the audit.

What was observed as part of a systematic review of evidence:

Site Review:

Residents are able to shower and change clothing in the privacy of a shower with a shower curtain. Transgender or intersex residents would be given the opportunity to shower separately by showering at a different time.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.342 (h)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: From a review of case files ofidents at risk of sexual victimization who were held in isolation in the past 12 months, the number of case files that include BOTH:

- A statement of the basis for facility's concern for the resident's safety, and
- The reason or reasons why alternative means of separation cannot be arranged:

N/A

No residents at risk of sexual victimization were held in isolation in the past 12 months. Hamilton County Juvenile Detention Center does not use isolation for residents at risk of sexual victimization.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.342 (i)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: If a resident at risk of sexual victimization is held in isolation, the facility affords each such resident a review every 30 days to determine whether there is a

	continuing need for separation from the general population. No residents at risk of sexual victimization were held in isolation in the past 12 months. Hamilton County Juvenile Detention Center does not use isolation for residents at risk of sexual victimization. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.351	Resident reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 1.11 • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 • “No Means No” poster (English and Spanish) • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with PREA coordinator • Interviews with random sample of staff • Interviews with random sample of residents • Interviews with residents who reported a sexual abuse • Systems tests • Site review Evidence (corrective action): • “No Means No” poster (English and Spanish) (11/07/2025) • “End the Silence” brochure (English and Spanish) (11/07/2025) • Contract between Upper East Tennessee Regional Juvenile Detention Center and Hamilton County Juvenile Detention Center (09/25/2025) Reasoning and analysis (by provision): 115.351 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency has established procedures allowing for multiple internal ways for residents to report privately to agency officials about: Sexual abuse or 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. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (page

1):

Written verbal information on PREA will be provided and explained to the resident within forty-eight (48) hours of arrival at a YDC/Agency and will include, but not limited to:

How to safely report sexual abuse such as:

- a. Reporting the abuse incident directly to DCS Child Abuse Hotline at (877)237-0004
- b. Reporting the abuse incident to the facility/agency personnel (e.g Director, Detention Supervisor, line staff, teacher, nurse, intake officer or physician).
- c. Reporting the abuse incident to their Attorney or Guardian ad Litem.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

Staff interviews confirmed residents can privately report sexual abuse or sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, or staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment by calling the hotline or writing a grievance.

Interviews with five random residents:

Residents stated they would report sexual abuse or sexual harassment that happened to them or someone else by telling staff, telling a supervisor, calling the hotline, through a third-party.

What was observed as part of a systematic review of evidence:

Site review:

The auditor reviewed the "No Means No" poster (English and Spanish).

The "No Means No" poster provides the following internal reporting methods:

- Report to any staff, volunteer, contractor, or medical or mental health staff.
- Submit a grievance or sick call slip.
- Report to the PREA Coordinator or PREA compliance manager.
- You can also submit a report on someone's behalf, or someone can report for you using the ways listed here.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.351 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of the agency. The facility does not detain youth solely for civil immigration purposes.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.4 (page 1):

Written verbal information on PREA will be provided and explained to the resident

within forty-eight (48) hours of arrival at a YDC/Agency and will include, but not limited to:

How to safely report sexual abuse such as:

a. Reporting the abuse incident directly to DCS Child Abuse Hotline at (877)237-0004

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 (page 1):

Residents may report allegations of sexual abuse/assault/ misconduct/ harassment to local law enforcement (Chattanooga Police Department) and may remain anonymous upon request. Standard 115.322(b)-1.

What was heard, as part of a systematic review of evidence:

Interview with PREA coordinator:

The PREA coordinator stated the facility is in the process of establishing a way for residents to report abuse or harassment to a public entity that is not part of the agency. Residents are permitted to call the Tennessee Department of Children's Services (DCS) Child abuse hotline,

Interviews with five random residents:

Residents stated they would report sexual abuse or sexual harassment that happened to them or someone else by telling staff, calling the hotline, or writing a grievance. Residents also could identify someone that does not work at the facility they could report to.

What was observed as part of a systematic review of evidence:

Site review:

The auditor observed the Tennessee Department of Children's Services Child Abuse Hotline number is included in the "No Means No" poster. Residents are permitted to call the Tennessee Department of Children's Services (DCS) Child abuse hotline, but DCS is not able to forward reports of sexual abuse and sexual harassment to detention center officials. Additionally, residents don't have direct access to use a telephone to make an anonymous report without knowledge of facility staff. This was accomplished through corrective action.

Systems test:

The auditor tested was unable to test external reporting due to no entity being identified that can follow the standard provision requirements.

Finding:

Based on this analysis, the facility is not substantially compliant with this provision and corrective action is completed.

The contract Between Upper East Tennessee Regional Juvenile Detention Center and Hamilton County Juvenile Detention Center (09/25/2025) -

- Establishes an external reporting mechanism by mail.
- Ensures resident anonymity while requiring Upper East Tennessee Regional Juvenile Detention Center to immediately forward reports to the facility in compliance with PREA standard requirements.

The facility revised the “No Means No” poster and the “End the Silence” brochure (11/07/2025) to identify the external reporting entity and provide instructions for making an anonymous report through the grievance process.

Reasoning and analysis (by provision):

115.351 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Staff are required to document verbal reports. The time frame that staff are required to document verbal reports: immediately

Hamilton County Juvenile Detention Center PREA Policy and Procedure 1.11(page 1):
Any report of physical abuse of a resident while in the custody of the Detention Center will be reported to the Superintendent or Assistant Superintendent immediately. The Superintendent will notify the Court Administrator. The Shift Supervisor will notify D.C.S. Child Protective Services as soon as possible.

Any report or evidence of physical or sexual abuse of a resident that did not occur at the Detention Center will be reported to D.C.S. Child Protective Services immediately. A written report will be submitted to the Superintendent no later than the next judicial day. The Court Administrator must be notified first thing the next business day.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

Staff interviewed confirmed verbal reports would be documented immediately.

Interviews with five random residents:

All five residents interviewed stated they could make reports of sexual abuse or sexual harassment either in person or in writing and someone could make the report for them so that they would not have to give their name.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.351 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The facility provides residents with access to tools to make written reports of sexual abuse or 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.

What was heard, as part of a systematic review of evidence:

	Interview with PREA coordinator: The PREA coordinator stated paper, and a pencil are available to residents to make written reports of sexual abuse and sexual harassment, retaliation by other residents or staff for reporting sexual abuse or sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. What was observed as part of a systematic review of evidence: Site review: The auditor observed a grievance box in the classroom for making written reports. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.351 (e) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency has established procedures for staff to privately report sexual abuse and sexual harassment of residents. Staff are informed of these procedures in the following ways: through the child abuse hotline What was heard, as part of a systematic review of evidence: Interviews with 12 random staff: Staff interviews revealed they would privately report sexual abuse and sexual harassment of residents by calling the Tennessee Department of Children Services Abuse Hotline, a private meeting with the director, or by reporting to human resources. What was observed as part of a systematic review of evidence: Site review: The “No Means No” poster provides staff with a method to privately report sexual abuse and sexual harassment of residents by reporting to the Tennessee Department of Children’s Services Child Abuse Hotline by calling 877-237-0004. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.352	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile

	Facilities) Reasoning and analysis (by provision): 115.352 (a) N/A What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency does not have an administrative procedure for dealing with resident grievances regarding sexual abuse. All allegations of sexual abuse are referred to the Department of Children’s Services and the Hamilton County Sheriff’s Office for investigation. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.353	Resident access to outside confidential support services and legal representation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • No Means No Posters (English and Spanish) • Interview with superintendent • Interview with PREA coordinator • Interviews with random sample of residents • Interviews with residents who reported a sexual abuse Evidence (corrective action): • “No Means No” poster (English and Spanish) (11/07/2025) • “End the Silence” brochure (English and Spanish) (11/07/2025) • Email Correspondence with Partnership for Families, Children and Adults Rape Crisis Center (09/15/2025) Findings (By Provision): 115.353 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility provides residents access to outside victim advocates for emotional support services related to sexual abuse by: • Giving residents (by providing, posting, or otherwise making accessible) mailing addresses and telephone numbers (including toll-free hotline numbers where available) of local, State, or national victim advocacy or rape crisis organizations.

- Enabling reasonable communication between residents and these organizations, in as confidential a manner as possible.

What was heard, as part of a systematic review of evidence:

Interview with PREA coordinator:

The PREA coordinator stated the facility does not accept residents detained solely for civil immigration purposes.

Interviews with five random residents:

Resident interviews revealed limited knowledge of outside victim advocates for emotional support services related to sexual abuse if they ever need it. Corrective action is required.

Interviews with residents who reported a sexual abuse:

There were no residents, present during the onsite phase of the audit, who reported a sexual abuse allegation.

What was observed as part of a systematic review of evidence:

Site review:

Contact information for outside victim advocate services for emotional support related to sexual abuse was included in the “No Means No” poster. The auditor observed a telephone number, was provided for the Emmy Haney House Child Advocacy Center.

Systems test:

The auditor called the Emmy Haney House Child Advocacy Center by dialing the telephone number provided and learned, due to agency operational procedures, the child advocacy center would not be able to allow a resident to speak to a victim advocate. This was accomplished through corrective action.

Finding:

Based on this analysis, the facility is not substantially compliant with this provision and corrective action is completed.

- **The facility identified Partnership for Families, Children and Adults Rape Crisis Center as an outside source that is able to provide victim advocates for emotional support services by telephone and mail.**
- **The facility revised the “No Means No” poster to include a mailing address and telephone number for Partnership for Families, Children and Adults Rape Crisis Center (11/07/2025).**
- **The “End the Silence” brochure was revised to include a telephone number for Partnership for Families, Children and Adults Rape Crisis Center (11/07/2025).**

Reasoning and analysis (by provision):

115.353 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility informs residents, prior to giving them access to outside support

services, the extent to which such communications will be monitored. The facility informs residents, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant Federal, State, or local law.

Document review:

The “No Means No” poster indicated the Hamilton County Juvenile Detention Center staff will not monitor calls to Emmy Haney House Child Advocacy Center.

Additionally, the poster indicated Emmy Haney House Child Advocacy Center victim advocates are mandatory reporters and therefore there are limits to confidentiality.

What was heard, as part of a systematic review of evidence:

Interviews with five random residents:

- None of the residents interviewed (0%) were knowledgeable that their conversations with people from these services would be told to or listened to by someone else and if they reported harm to themselves or others it would be reported.
- None of the residents interviewed (0%) stated they were knowledgeable of services available outside of the facility for dealing with sexual abuse if they ever need it.

Corrective action is required.

Interviews with residents who reported a sexual abuse:
See 115.353 (a).

Finding:

Based on this analysis, the facility is not substantially compliant with this provision and corrective action is completed.

To increase knowledge of services available outside of the facility information for victim advocacy the facility revised the “No Means No” poster and “End the Silence” brochure (11/07/2025) to include information for Partnership for Families, Children and Adults Rape Crisis Center. The brochure and poster are discussed during intake.

Reasoning and analysis (by provision):

115.353 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency or facility maintains memoranda of understanding (MOUs) or other agreements with community service providers that are able to provide residents with emotional support services related to sexual abuse. The agency or facility maintains copies of those agreements.

Document review:

No memoranda of understanding (MOUs) or other agreements with community service providers that are able to provide residents with emotional support services

	related to sexual abuse was provided for review. Finding: Based on this analysis, the facility is not substantially compliant with this provision and corrective action is completed. The facility provided email correspondence with the Partnership for Families, Children and Adults Rape Crisis Center dated September 15, 2025, demonstrating that a victim advocate from the rape crisis center is available to support victims. Reasoning and analysis (by provision): 115.353 (c) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility provides residents with reasonable and confidential access to their attorneys or other legal representation. The facility provides residents with reasonable access to parents or legal guardians. What was heard, as part of a systematic review of evidence: Interview with superintendent: The superintendent 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. Interviews with five random residents: • All five of the residents interviewed (100%) stated the facility allows them to see or talk with a lawyer and the facility will allow them to talk with that person privately. • All five of the residents interviewed (100%) stated the facility allows them to see or talk with their parents or someone else. Interviews with residents who reported a sexual abuse: See 115.353 (a). Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.354	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Website: https://www.hamiltontn.gov/

	Courts.aspx • No Means No Posters (English and Spanish) (updated 04/16/2025) • Third-party Reporting Test • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Site review Reasoning and analysis (by provision): 115.354 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency or facility provides a method to receive third-party reports of resident sexual abuse or sexual harassment. What was observed as part of a systematic review of evidence: Site Review: Third party-reporting information is included in the No Means No poster. Reports are informed they can report by calling the Tennessee Department of Children’s Service Child Abuse Hotline at 877-237-0004. The auditor reviewed the Hamilton County Juvenile Detention Center website at https://www.hamiltontn.gov/Courts.aspx and observed the agency website includes the following third-party reporting information, “The Hamilton County Juvenile Detention Center has a zero tolerance policy regarding sexual abuse. To report sexual abuse, call the Department of Children’s Services Child Abuse Hotline at 877-237-0004 or contact online at Tennessee’s Child Abuse Referral and Tracking. All allegations of sexual abuse are investigated by the Department of Children’s Services and Law Enforcement if indicated. You can also contact the Hamilton County Juvenile Detention Center directly at 423-209-5158.” Systems test: The auditor successfully tested third-party reporting by calling the facility at the telephone number provided. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.361	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile

Facilities)

- Interview with superintendent
- Interview with PREA coordinator
- Interviews with a random sample of staff
- Interviews with medical and mental health staff

Reasoning and analysis (by provision):

115.361 (a)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The agency requires all staff to report immediately and according to agency 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.
- Any retaliation against residents or staff who reported such an incident.
- Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 (page 1):

All HCJDC staff will 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 the facility, whether or not it is part of 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.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

All 12 staff stated they are required to report 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.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action not required.

Reasoning and analysis (by provision):

115.361 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The agency requires all staff to comply with any applicable mandatory child abuse reporting laws.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 (page 1):

Duty to Report – Tennessee Code Annotated 37-1-403 and 37-1-605 Pursuant to TCA 37-1-403 and 37-1-605, Standard 115.361 any person who has knowledge of or is called upon to render aid to any youths who is being sexually abused, sexually assaulted or sexually harassed has the duty to report such abuse. All allegations of sexual abuse must be reported to the DCS Child Abuse hotline at (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.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

All 12 staff stated they are aware of Tennessee laws related to mandatory reporting of sexual abuse.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.361 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

Apart from reporting to designated supervisors or officials and designated State or local service agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

All 12 staff stated they are prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. They stated they would report to their supervisor.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.361 (d)

What was heard, as part of a systematic review of evidence:

Interviews with mental health and medical staff:

The medical staff stated the limitations of confidentiality and duty to report are disclosed during intake. They confirmed they are required to report any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment upon learning of it. They stated they have not become aware of such incidents.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

	Reasoning and analysis (by provision): 115.361 (e) What was heard, as part of a systematic review of evidence: Interview with superintendent: The superintendent stated when the facility receives an allegation of sexual abuse, the Tennessee Department of Children's Services, Chattanooga Police Department, and the Hamilton County Sheriff's Office immediately. They stated if the victim is under the guardianship of the child welfare system, the allegation is immediately reported to the victim's caseworker instead of the parents or legal guardians. If a juvenile court retains jurisdiction over the victim, the allegation would be reported to the juvenile's attorney or other legal representative of record immediately. Interview with PREA coordinator: The PREA coordinator stated when the facility receives an allegation of sexual abuse, the Tennessee Department of Children's Services immediately. They stated if the victim is under the guardianship of the child welfare system, the allegation is immediately reported to the victim's caseworker instead of the parents or legal guardians. If a juvenile court retains jurisdiction over the victim, the allegation would be reported to the juvenile's attorney or other legal representative of record immediately. Reasoning and analysis (by provision): 115.361 (f) What was heard, as part of a systematic review of evidence: Interview with superintendent: The superintendent stated allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are reported directly to the Tennessee Department of Children's Services, Chattanooga Police Department, and the Hamilton County Sheriff's Office. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.362	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with agency head (superintendent) • Interview with superintendent • Interview with random sample of staff

	Reasoning and analysis (by provision): 115.362 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: When the agency or facility learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay). In the past 12 months: The number of times the agency or facility determined that a resident was subject to substantial risk of imminent sexual abuse: 0 What was heard, as part of a systematic review of evidence: Interview with agency head (superintendent): The superintendent stated immediate actions would be taken to protect a resident who is subject to a substantial risk of imminent sexual abuse. Protective measures would include separation. Interviews with 12 random staff: Staff stated if they learn a resident is at risk of imminent sexual abuse, actions they would take to protect the resident would include separation, cell movement, calling control, close observation, placement in a safe area, and removing an individual from potential harm. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.363	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with agency head (director) • Interview with superintendent (detention administrator) Reasoning and analysis (by provision): 115.363 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency has a policy requiring that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where

sexual abuse is alleged to have occurred. The agency's policy also requires that the head of the facility notify the appropriate investigative agency.

In the past 12 months, the number of allegations the facility received that a resident was abused while confined at another facility: 0

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.363 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Agency policy requires that the facility head provides such notification as soon as possible, but no later than 72 hours after receiving the allegation.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.363 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency or facility documents that it has provided such notification within 72 hours of receiving the allegation.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.363 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Agency/facility policy requires that allegations received from other facilities/agencies are investigated in accordance with the PREA standards. The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.

In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities: 0

What was heard, as part of a systematic review of evidence:

Interview with agency head (superintendent):

The superintendent stated they would contact the head of the facility and the Tennessee Department of Children's Services, as well as report the allegation to be investigated. They reported no allegations of sexual abuse or sexual harassment

	have been received from other facilities during the 12-month audit period. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.364	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.6 • Tennessee Department of Children’s Services Protocol: First Responder Guidelines for Sexual Assaults • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interviews with security staff and non-security staff first responders • Interviews with a random sample of staff • Interviews with residents who reported a sexual abuse Evidence (corrective action): • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.6 updated (04/22/2025) • Staff first responder training (05/19/2025) Reasoning and analysis (by provision): 115.364 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report separate the alleged victim and abuser. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report 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.

In the past 12 months, the number of allegations that a resident was sexually abused: 0

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.6 (page 1):

Upon receiving notice of an incident of sexual abuse by a resident, or if an employee witnesses or unexpectedly encounters an assault taking place, the employee will ensure the resident is safe and kept separated from the perpetrator, immediately notify their Supervisor, and:

- a. Request the victim does not change clothes, shower, wash, brush teeth, rinse mouth, eat, drink, or use the toilet until after all physical evidence is obtained in connection with the violation; and
- b. Ensure the abuser does not change clothes, shower, wash, brush teeth, rinse mouth, eat, drink, or use the toilet until after all physical evidence is obtained in connection with the violation; and
- c. Secure the incident area and treat it as a crime scene.

Refer to Protocol-First Responders Guidelines for Sexual Assault for guidelines on responding to sexual assaults.

Tennessee Department of Children's Services Protocol: First Responder Guidelines for Sexual Assaults (pages 1-2):

You and other available staff will need to separate the alleged victim and alleged perpetrator as quickly as possible. If it is immediately apparent that someone else has taken part in or witnessed the assault, you may need to separate that individual as well. Maintain separation of all the individuals involved to prevent them from collaborating on the details of the incident or pressuring the alleged victim to change his or her story.

As you control the situation, make sure that no one is tampering with the scene or with any evidence. This means immediately notifying a supervisor, controlling child/youth movement, securing or locking up the crime scene and calling the local police as outlined in DCS policy/Private Provider Manual. It is unlikely, but if you feel reporting to your supervisor will compromise the integrity of the report, find another appropriate authority and report the incident. Also maintain a log of who is present, what time they entered and what time they departed.

Emergency medical attention for the alleged victim must be the first priority of the response. Call for facility nursing personnel if the YDC clinic is open, or transport child/youth to the nearest emergency facility.

Both the alleged victim's and the alleged perpetrator's bodies should be treated as crime scenes. In addition, their clothing, bedding, towels, and other personal objects may be considered part of the crime scene and should be secured for the investigator. If you're responding to an assault that was recent, you'll need to request the alleged victim and ensure that the alleged perpetrator involved don't compromise the evidence by immediately showering, washing, using the toilet,

changing their clothes, eat or drink, brush their teeth, or rinse their mouth until all physical evidence is obtained. Also do not allow any bedding or sheets to be removed and do not allow any fluids to be cleaned up. Safeguard any items found at the scene or given to you by the alleged victim. If the alleged victim has already taken any of these actions, evidence may still be recoverable, just let the MD/RN examiner know. It may be helpful to bring an extra set of clothing in the event that clothing is collected as evidence.

What was heard, as part of a systematic review of evidence:

Interviews with security staff and non-security staff first responders:

Staff interviews revealed refresher training is needed for first responder duties if they are the first person to be alerted that a resident has allegedly been the victim of sexual abuse.

Interviews with residents who reported a sexual abuse:

There were no residents, present during the onsite phase of the audit, who reported sexual abuse or sexual harassment.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.6 was updated (04/22/2025) to include the standard provision requirement regarding requesting a victim not destroy evidence and ensuring a perpetrator not destroy evidence.

The facility completed staff first responder training (05/19/2025). The auditor reviewed 26 staff acknowledgements and observed staff signed that they received the training.

Reasoning and analysis (by provision):

115.364 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The agencies policy requires that if the first staff responder is not a security staff member, that responder shall be required to:

1. Request that the alleged victim not take any actions that could destroy physical evidence.
2. Notify security staff.

Of the allegations that a resident was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder: N/A

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff and security staff and non-security staff first responders:

All facility staff are mandated reporters and would therefore follow the same policy requirements as security staff if they are a first responder.

	Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.365	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.6 • Protocol: First Responders Guidelines for Sexual Assaults • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with superintendent Reasoning and analysis (by provision): 115.365 (a): What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility has developed 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 facility leadership. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.6 (page 1): In response to an allegation of sexual abuse, the HCJDC will develop a written plan to coordinate actions taken among staff first responders, medical and mental health practitioners, investigators, and HCJDC leadership. Coordinated response plan: The auditor reviewed the Protocol: First Responders Guidelines for Sexual Assaults and observed the plan coordinates actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. What was heard, as part of a systematic review of evidence: Interview with superintendent: The superintendent stated the facility has a plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.366	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with agency head (superintendent) Reasoning and analysis (by provision): 115.366 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has not entered into a collective bargaining agreement since the last PREA audit. What was heard, as part of a systematic review of evidence: Interview with agency head (superintendent): The superintendent stated the agency has not entered into or renewed any collective bargaining agreements. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.366 (b) N/A Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.367	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 • Protections Against Retaliation monitoring form

- Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities)
- Interview with agency head (superintendent)
- Interview with superintendent
- Interview with designated staff member charged with monitoring retaliation (PREA coordinator)
- Interviews with residents in isolation (for risk of sexual victimization/who allege to have suffered sexual abuse)
- Interviews with residents who reported a sexual abuse

Reasoning and analysis (by provision):

115.367 (a)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The agency has a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff.

The agency has designated the detention center supervisor/PREA coordinator with monitoring for possible retaliation.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 (page 1):

Retaliation or negative consequences for reporting sexual abuse/harassment or cooperating with sexual abuse/harassment investigations will not be tolerated and may result in disciplinary action up to and including termination.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.367 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 (page 1):

If any individual involved in a report expresses fear of retaliation, the HCJDC will take appropriate measures to protect the individual that includes segregated housing, as applicable, if voluntarily requested by the individual.

What was heard, as part of a systematic review of evidence:

Interview with agency head (superintendent):

The superintendent confirmed the agency would protect residents and staff from retaliation for sexual abuse or sexual harassment allegations through close observation and separation.

Interview with designated staff member charged with monitoring retaliation (PREA coordinator):

The PREA coordinator stated the role they play in preventing retaliation against

residents and staff who report sexual abuse or sexual harassment, or against those who cooperate with sexual abuse or sexual harassment investigations would be to ruse the overflow area and contact the supervisor. The different measures they would take to protect those residents and staff from retaliation would include contact the supervisor. They confirmed they would initiate contact with residents who have reported sexual abuse and monitoring would occur.

Interviews with residents in isolation (for risk of sexual victimization/who allege to have suffered sexual abuse):

There were no residents in isolation, during the onsite phase of the audit.

Interviews with residents who reported a sexual abuse:

There were no residents, present during the onsite phase of the audit, who reported a sexual abuse allegation.

What was observed as part of a systematic review of evidence:

Site review:

There were no residents in isolation (for risk of sexual victimization/who allege to have suffered sexual abuse) or residents who reported a sexual abuse.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.367 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The agency and/or facility monitors the conduct or treatment of residents or staff who reported sexual abuse and of residents who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by residents or staff.

- The length of time that the agency and/or facility monitors the conduct or treatment: 90 days
- The agency/facility acts promptly to remedy any such retaliation.
- The agency/facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.
- The number of times an incident of retaliation occurred in the past 12 months: 0

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 (page 1):

For a period of ninety (90) days following a report, HCJDC will monitor the treatment of the resident or staff that made a report and the resident who were reported to be abused to identify attempts at retaliation or negative consequences and will act immediately to remedy any such actions.

Monitoring should include, but not limited to:

- a. Resident disciplinary reports, housing, or program changes.
- b. Negative performance reviews or staff reassignments.

c. Periodic status checks of residents

The HCJDC will continue monitoring beyond ninety (90) days if evidence indicates a continued need.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The superintendent stated measures they would take when they suspect retaliation would include the PREA coordinator and himself reviewing the situation.

Interview with designated staff member charged with monitoring retaliation (PREA coordinator):

The PREA coordinator stated things they look for to detect possible retaliation would include verbally abusive behavior, blackmailing, and harassment. They would monitor disciplinary reports and perform periodic status checks. Monitoring the conduct and treatment of residents and staff who report the sexual abuse of a resident or were reported to have suffered sexual abuse would occur for at least 90 days. If there is concern that potential retaliation might occur, the maximum length of time monitoring conduct and treatment would be until retaliation has ended or a resident is released from the facility.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.367 (d)

What was read, as part of a systematic review of evidence:

Documentation of monitoring of residents:

The auditor reviewed the Protections Against Retaliation monitoring form and observed the form is designed for weekly periodic status checks for 90 days or longer.

What was heard, as part of a systematic review of evidence:

Interview with designated staff member charged with monitoring retaliation (PREA coordinator):

The PREA coordinator stated monitoring in the form of periodic status checks occurs for at least 90 days and longer if needed.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.367 (e)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 (page 1):

If any individual involved in a report expresses fear of retaliation, the HCJDC will take appropriate measures to protect the individual that includes segregated

	housing, as applicable, if voluntarily requested by the individual. What was heard, as part of a systematic review of evidence: Interview with superintendent: The superintendent stated if an individual who cooperates with an investigation expresses fear of retaliation, measures the agency takes to protect that individual against retaliation include close observation and separation. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.367 (f) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 (page 1): Hamilton County Juvenile Court responsibility to monitor will terminate if the allegation is unfounded. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.368	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with superintendent • Interviews with residents in isolation (for risk of sexual victimization) Reasoning and analysis (by provision): 115.368 (a): What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility has a policy that residents who allege to have suffered sexual abuse may only be placed in isolation as a last resort if less restrictive measures are inadequate to keep them and other residents safe, and only until an alternative means of keeping all residents safe can be arranged. The number of residents who allege to have suffered sexual abuse who were placed in isolation in the past 12 months: 0

	What was heard, as part of a systematic review of evidence: Interview with superintendent: The superintendent stated the facility has not used segregated housing in this manner. Interviews with residents in isolation (for risk of sexual victimization): There were no residents in isolation during the onsite phase of the audit. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.371	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.7 • State of Tennessee Department of Children’s Services Administrative Policies and Procedures: 14.10 Special Investigations Unit Child Protective Services Investigations dated May 7, 2024 • State of Tennessee Department of Children’s Services Administrative Policies and Procedures: 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse and Sexual Harassment Incidents and Prison Rape Elimination Act (PREA) dated March 31, 2023 • Tennessee Department of Children’s Services Protocol for DCS PREA Investigators to Conduct Prison Rape Elimination Act (PREA) Investigation • PREA Investigator Training Edison Completion Log • National Institute of Corrections’ Prison Rape Elimination Act (PREA) Investigating Sexual Abuse in a Confinement Setting Course Certificates • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with superintendent • Interview with PREA coordinator • Interview with investigative staff (Tennessee Department of Children’s Services) • Interviews with residents who reported a sexual abuse Reasoning and analysis (by provision): 115.371 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency/facility has a policy related to criminal and administrative agency investigations. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.7 (page

1):

HCJDC will ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse/assault/misconduct/harassment.

State of Tennessee Department of Children's Services Administrative Policies and Procedures: 14.10 Special Investigations Unit Child Protective Services Investigations (page 1):

The Department of Children's Services (DCS) Special Investigations Unit (SIU) conducts investigations on allegations of child abuse and neglect which occur while a child is in DCS custody or when the case involves non-custodial children where the alleged perpetrator (AP) is acting in an official employment, volunteer, or foster care capacity. The SIU conducts investigations where the allegations would affect the employment or volunteer status of those working with children.

Sample of investigative records/reports for allegations of sexual abuse or sexual harassment:

There were no allegations of sexual abuse or sexual harassment and therefore no investigative reports.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff (Tennessee Department of Children's Services): The Tennessee Department of Children's Services investigator stated once a case is received, an investigation is initiated. Additionally, the investigator confirmed they handle anonymous or third-party reports of sexual abuse and sexual harassment in the same manner as all investigations.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (b)

What was read, as part of a systematic review of evidence:

State of Tennessee Department of Children's Services Administrative Policies and Procedures: 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse and Sexual Harassment Incidents and Prison Rape Elimination Act (PREA) (page 11): Employees who conduct investigations of allegations of sexual abuse/harassment on children/youth in YDC/agencies care receive training in compliance with PREA Standards.

Review of training records/logs of investigative staff:

The auditor reviewed annual training required by § 115.331 and National Institute of Corrections' Prison Rape Elimination Act (PREA) Investigating Sexual Abuse in a Confinement Setting Course Certificates.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff (Tennessee Department of Children's Services): The Tennessee Department of Children's Services investigator interviewed confirmed they received training specific to conducting sexual abuse and sexual

harassment investigations in confinement settings. They stated they received the training required by §115.331 and completed the specialized training topics.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (c)

What was read, as part of a systematic review of evidence:

Investigation reports:

There were no reported allegations of sexual abuse or sexual harassment.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff (Tennessee Department of Children's Services): The Tennessee Department of Children's Services investigator interviewed stated the first steps in initiating an investigation is contacting the facility where an allegation of sexual abuse or sexual harassment has been made, requesting all available information, and identifying interviews. They then would arrive on scene, making sure it is secure. They would review any actions taken by the medical department, conduct interviews, and review video evidence. Direct and circumstantial evidence they would be responsible for gathering in an investigation of an incident of sexual abuse would include video footage, risk assessments, risk reassessments, logbook entries, telephone logs, incident reports, medical reports, and all available paperwork.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The agency does not terminate an investigation solely because the source of the allegation recants the allegation.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff (Tennessee Department of Children's Services): The Tennessee Department of Children's Services investigator stated an investigation does not terminate if the source of the allegation recants the allegation.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (e)

What was read, as part of a systematic review of evidence:

Investigation reports:
See 115.371 (c).

What was heard, as part of a systematic review of evidence:

Interview with investigative staff (Tennessee Department of Children's Services):
The Tennessee Department of Children's Services investigator stated if there is evidence that a prosecutable crime may have taken place, detectives would consult with prosecutors before conducting compelled interviews.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (f)

What was heard, as part of a systematic review of evidence:

Interview with investigative staff (Tennessee Department of Children's Services):
The Tennessee Department of Children's Services investigator stated they judge the credibility of an alleged victim, suspect, or witness based on evidence. They stated under no circumstance, do they require a resident who alleges sexual abuse to submit to a polygraph examination or truth telling device as a condition for proceeding with an investigation.

Interviews with residents who reported a sexual abuse:

There were no residents, present during the onsite phase of the audit, who reported a sexual abuse allegation.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (g)

What was read, as part of a systematic review of evidence:

Investigation reports:
See 115.317 (c).

What was heard, as part of a systematic review of evidence:

Interview with investigative staff (Tennessee Department of Children's Services):
The Tennessee Department of Children's Services investigator stated the efforts they make during an administrative investigation to determine whether staff actions or failures to act contributed to the sexual abuse include looking at supervision, staff actions, room checks, etc. They confirmed they document administrative investigations in written reports. The reports include a full description of the investigation, referrals, contacts made, interviews, case concerns, and a conclusion.

Interviews with residents who reported a sexual abuse:

See 115.381 (f).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (h)

What was read, as part of a systematic review of evidence:

Criminal investigations are conducted by the Hamilton County Sheriff's Office and the Chattanooga Police Department.

Criminal investigation reports:

There were no criminal investigation reports.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff (Tennessee Department of Children's Services):

The Tennessee Department of Children's Services investigator stated criminal investigations are documented.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (i)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Substantiated allegations of conduct that appear to be criminal are referred for prosecution.

The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit: 0

Local law enforcement would refer substantiated allegations that appear to be criminal for prosecution.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff (Tennessee Department of Children's Services):

The Tennessee Department of Children's Services investigator confirmed the sheriff's department would take the lead and cases would be referred for prosecution only when there are substantiated allegations of conduct that appears to be criminal.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (j)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

Investigation reports:
See 115.371 (c).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (k)

What was heard, as part of a systematic review of evidence:

Interview with investigative staff (Tennessee Department of Children's Services):
The Tennessee Department of Children's Services investigator stated an investigation would proceed when a staff member alleged to have committed sexual abuse or sexual harassment terminates employment prior to a completed investigation into his/her conduct. They stated when a victim alleging sexual abuse or sexual harassment leaves the facility prior to a completed investigation into the allegation they would continue with the investigation.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (l) Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (m)

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The detention center supervisor stated if an outside agency investigates allegations of sexual abuse, the facility remains informed of the progress of a sexual abuse investigation through contact with outside investigative agencies.

Interview with PREA coordinator:

The PREA coordinator stated if an outside agency investigates allegations of sexual abuse, the facility remains informed of the progress of a sexual abuse investigation through communication by telephone and email.

Interview with investigative staff (Tennessee Department of Children's Services):
The Tennessee Department of Children's Services investigator stated they would

	remain in contact with Child Protection Services and the sheriff's office. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.372	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.7 • State of Tennessee Department of Children's Services Administrative Policies and Procedures: 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse and Sexual Harassment Incidents and Prison Rape Elimination Act (PREA) dated March 31, 2023 • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with investigative staff (Tennessee Department of Children's Services) Reasoning and analysis (by provision): 115.372 (a): What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.7 (page 1): A report of child abuse by the alleged perpetrator may be classified as "Indicated" if there is preponderance of evidence, in light of the entire record, which indicates the individual committed physical, severe or child sexual abuse, as defined TCA §§ 37-1-102 or 37-1-602. State of Tennessee Department of Children's Services Administrative Policies and Procedures: 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse and Sexual Harassment Incidents and Prison Rape Elimination Act (PREA) (page 8): DCS imposes a standard of preponderance of the evidence for determining whether allegations of sexual abuse or sexual harassment are substantiated. What was heard, as part of a systematic review of evidence: Interview with investigative staff (Tennessee Department of Children's Services): The investigator stated they require the preponderance of the evidence to substantiate allegations of sexual abuse or sexual harassment.

	Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.373	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • State of Tennessee Department of Children’s Services Administrative Policies and Procedures: 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse and Sexual Harassment Incidents and Prison Rape Elimination Act (PREA) dated March 31, 2023 • Tennessee Department of Children’s Services Sexual Abuse/Harassment Juvenile Notification Investigation Outcome form • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with investigative staff (Tennessee Department of Children’s Services) • Interview with superintendent (detention administrator) • Interviews with residents who reported a sexual abuse Reasoning and analysis (by provision): 115.373 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency has a policy requiring that any resident who makes an allegation that he or he suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. In the past 12 months: • The number of criminal and/or administrative investigations of alleged resident sexual abuse that were completed by the agency: 0 • Of the investigations that were completed of alleged sexual abuse, the number of residents who were notified, verbally or in writing, of the results of the investigation: N/A State of Tennessee Department of Children’s Services Administrative Policies and Procedures: 18.8 Zero-Tolerance Standards and Guidelines for Sexual Abuse and Sexual Harassment Incidents and Prison Rape Elimination Act (PREA) (page 9): At the completion of PREA investigations, the outcome is documented on form CS-4232, Investigation Outcome of Allegations of Sexual Abuse/Harassment by the DCS PREA Investigator and submitted to SPC. After review, the SPC provides the document to the YDC/agency for notification of investigation outcome and

signature.

The YDC/Agency completes form CS-4233, Sexual Abuse/Harassment Juvenile Notification Investigation Outcome confirming the youth has been notified of the investigation results. A signed copy is submitted to the SPC upon request.

Review of resident outcome notification form:

The auditor reviewed the Tennessee Department of Children's Services Sexual Abuse/Harassment Juvenile Notification Investigation Outcome form and observed the form is inclusive of the standard provision requirements of informing residents as to whether an allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The superintendent stated the facility notifies a resident who makes an allegation of sexual abuse, that the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

Interview with investigative staff (Tennessee Department of Children's Services):

The investigator stated they are aware that when a resident makes an allegation of sexual abuse, the resident must be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.373 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: If an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the resident of the outcome of the investigation.

In the past 12 months:

- The number of investigations of alleged resident sexual abuse in the facility that were completed by an outside agency: 0
- Of the outside agency investigations of alleged sexual abuse that were completed, the number of residents alleging sexual abuse in the facility who were notified verbally or in writing of the results of the investigation: N/A

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.373 (c)**What was read, as part of a systematic review of evidence:**

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency/facility subsequently informs the resident (unless the agency/facility has determined that the allegation is unfounded) whenever:

- The staff member is no longer posted within the resident's unit;
- The staff member is no longer employed at the facility;
- The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
- The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

Review of resident outcome notification form:

The auditor reviewed the Tennessee Department of Children's Services Sexual Abuse/Harassment Juvenile Notification Investigation Outcome form and observed the form is inclusive of the standard provision requirements.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):**115.373 (d)****What was read, as part of a systematic review of evidence:**

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Following a resident's allegation that he or she has been sexually abused by another resident in an agency facility, the agency subsequently informs the alleged victim whenever:

- The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
- The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

Review of resident outcome notification form:

The auditor reviewed the Tennessee Department of Children's Services Sexual Abuse/Harassment Juvenile Notification Investigation Outcome form and observed the form is inclusive of the standard provision requirements.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):**115.373 (e)****What was read, as part of a systematic review of evidence:**

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency has a policy that all notifications to residents described under this standard are documented.

	Review of resident outcome notification form: The auditor reviewed the Tennessee Department of Children’s Services Sexual Abuse/Harassment Juvenile Notification Investigation Outcome form and observed the form would be used to document notifications. Reasoning and analysis (by provision): 115.373 (f) N/A Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.376	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) Reasoning and analysis (by provision): 115.376 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.376 (b) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: In the past 12 months: • The number of staff from the facility that have violated agency sexual abuse or sexual harassment policies: 0 • The number of those staff from the facility that have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: N/A Finding: Based on this analysis, the facility is substantially compliant with this

	provision and corrective action is not required. Reasoning and analysis (by provision): 115.376 (c) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. In the past 12 months, the number of staff from the facility that have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies: 0 Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.376 (d) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: 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, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies: 0 Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.377	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities)

	• Interview with superintendent Reasoning and analysis (by provision): 115.377 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with residents. In the past 12 months, no contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of residents. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.377 (b) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility takes appropriate remedial measures and considers whether to prohibit further contact with residents in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. What was heard, as part of a systematic review of evidence: Interview with superintendent: The superintendent stated the facility would take remedial measures and prohibit further contact with residents pending investigation. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.378	Interventions and disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities)

- Interview with superintendent

Reasoning and analysis (by provision):

115.378 (a)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse.

Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for resident-on-resident sexual abuse.

In the past 12 months:

- The number of administrative findings of resident-on-resident sexual abuse that have occurred at the facility: 0
- The number of criminal findings of guilt for resident-on-resident sexual abuse that have occurred at the facility: 0

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.378 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

In the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, the facility policy requires that residents in isolation have daily access to large muscle exercise, legally required educational programming, and special education services. In the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, residents in isolation receive daily visits from a medical or mental health care clinician. In the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, residents in isolation have access to other programs and work opportunities to the extent possible.

In the past 12 months:

- The number of residents placed in isolation as a disciplinary sanction for resident-on resident sexual abuse: 0
- The number of residents placed in isolation as a disciplinary sanction for resident-on resident sexual abuse, who were denied daily access to large muscle exercise, and/or legally required educational programming, or special education services: N/A
- The number of residents placed in isolation as a disciplinary sanction for resident-on resident sexual abuse, who were denied access to other programs and work opportunities: N/A

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The superintendent stated disciplinary sanctions residents are subject to following an administrative or criminal finding the resident engaged in resident-on-resident sexual abuse would be determined by the disciplinary process. The sanctions would be proportionate to the nature and circumstances of the abuses committed, the residents' disciplinary histories, and the sanctions imposed for similar offenses by other residents with similar histories. Hamilton County Juvenile Detention Center does not use isolation as a disciplinary sanction.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.378 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center PREA Policy and Procedure (page 14): The disciplinary process shall consider whether a resident's mental disabilities or mental illness contributed to his or her behavior in determining appropriate sanctions.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The superintendent stated mental disability or mental illness is considered when determining sanctions.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.378 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. If the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility considers whether to require the offending resident to participate in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives. Access to general programming or education is not conditional on participation in such interventions.

What was heard, as part of a systematic review of evidence:

Interview with mental health staff:

The mental health staff stated if the facility offers therapy, counseling, or other intervention services designed to address and correct the underlying reasons or motivations for sexual abuse, the facility would offer these services to an offending resident. They would not require a resident's participation as a condition of access to any rewards-based behavior management system, programming or education.

	Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.378 (e) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency disciplines residents for sexual contact with staff only upon finding that the staff member did not consent to such contact. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.378 (f) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.5 (page 2): 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. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.378 (g) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency prohibits all sexual activity between residents. The agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.381	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

- Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.3
- Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities)
- Interview with staff responsible for risk screening
- Interviews with medical and mental health staff
- Interviews with residents who disclose sexual victimization at risk screening
- Site review

Evidence (corrective action):

- Policy 16.13 regarding offering 14-day follow-up meetings (11/06/2025)

Reasoning and analysis (by provision):**115.381 (a)****What was read, as part of a systematic review of evidence:**

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

All residents at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.341 are not offered a follow-up meeting with a medical or mental health practitioner. The follow-up meeting was offered within 14 days of the intake screening. Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.

In the past 12 months, the number of residents who disclosed prior victimization during screening who were offered a follow up meeting with a medical or mental health practitioner: 0%

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.3 (page 1):

If further screening or assessments indicates that a resident has experienced prior sexual victimization, whether it occurred in a institutional setting or in the communication, designated staff will ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within fourteen (14) days of the intake screening.

The auditor requested documented evidence of follow-up meetings with a medical or mental health practitioner are provided according to agency policy and the standard provision. No documented evidence has been provided for review. This was accomplished through corrective action.

What was heard, as part of a systematic review of evidence:

Interviews with residents who disclose sexual victimization at risk screening:

During the onsite phase of the audit, no residents were identified as reporting prior sexual victimization during risk screening.

Interview with staff responsible for risk screening

The supervisor stated if a screening indicates that a resident has experienced prior sexual victimization, whether in an institutional setting, or in the community, the facility is implementing the practice of offering a follow-up meeting with a medical/ and or mental health practitioner within 14 days.

Finding:

Based on this analysis, the facility is not substantially compliant with this provision and corrective action is completed.

The facility provided a policy dated November 6, 2025, detailing the procedures that will be implemented to achieve compliance with the standard.

Reasoning and analysis (by provision):

115.381 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

All residents who have previously perpetrated sexual abuse, as indicated during the screening pursuant to § 115.341, are not offered a follow-up meeting with a mental health practitioner. The follow-up meeting was offered within 14 days of the intake screening. Mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.

In the past 12 months, the percent of residents who previously perpetrated sexual abuse, as indicated during screening, who were offered a follow up meeting with a mental health practitioner: 0%

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.3 (page 2):

If the screening indicates that a resident has previously perpetrated sexual abuse/ assault/misconduct/ harassment, whether it occurred in an institutional setting or in a community, designated staff will ensure that the resident is offered a follow-up meeting with a mental health practitioner within fourteen (14) days if the intake screening.

The auditor requested documented evidence of follow-up meetings with a medical or mental health practitioner are provided according to agency policy and the standard provision. No documented evidence has been provided for review. This was accomplished through corrective action.

What was heard, as part of a systematic review of evidence:

Interview with staff responsible for risk screening

The supervisor stated if a screening indicates that a resident has previously perpetrated sexual abuse, whether in an institutional setting, or in the community, the facility is implementing the practice of offering a follow-up meeting with a medical/and or mental health practitioner within 14 days.

Finding:

Based on this analysis, the facility is not substantially compliant with this provision and corrective action is completed.

The facility provided a policy dated November 6, 2025, detailing the procedures that will be implemented to achieve compliance with the standard.

	Reasoning and analysis (by provision): 115.381 (c) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners. What was observed, as part of a systematic review of evidence: Site review: The auditor did not observe medical information maintained at the facility. Medical records would be maintained offsite. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.381 (d) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting unless the resident is under the age of 18. What was heard, as part of a systematic review of evidence: Interview with medical and mental health staff: The nurse stated they are not required to obtain informed consent from residents before reporting about prior sexual victimization that did not occur in an institutional setting. They stated the facility does not hold residents the age of 18 or older. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.382	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.6 • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interviews with medical and mental health staff • Interviews with residents who reported a sexual abuse

- Interviews with security staff and non-security staff first responders
- Site review

Evidence (corrective action):

- Staff first responder training (5/19/2025)

Reasoning and analysis (by provision):

115.382 (a)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. Medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.6 (page 1):

For those sexual abuse incidents alleged to have occurred within seventy-two (72) hours, the County nurse/designee will advise to have the resident to the local hospital emergency room for examination, collection and preservation of evidence, and treatment and mental health counseling as needed.

What was heard, as part of a systematic review of evidence:

Interviews with medical and mental health staff:

The nurse confirmed resident victims of sexual abuse receive immediate, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of these services would be determined according to their professional judgement.

Interviews with residents who reported a sexual abuse:

There were no residents who reported a sexual abuse, present during the onsite phase of the audit.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.382 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, staff first responders shall take preliminary steps to protect the victim pursuant to § 115.362 and shall immediately notify the

appropriate medical and mental health practitioners.

What was heard, as part of a systematic review of evidence:

Staff interviews revealed refresher training is needed for first responder duties if they are the first person to be alerted that a resident has allegedly been the victim of sexual abuse. See corrective action for Standard 115.364 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The facility completed staff first responder training (05/19/2025). The auditor reviewed 26 staff acknowledgements and observed staff signed that they received the training.

Reasoning and analysis (by provision):

115.382 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Resident victims of sexual abuse while incarcerated 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. Medical and mental health staff maintain secondary materials documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and 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.

What was heard, as part of a systematic review of evidence:

Interviews with medical and mental health staff:

The nurse confirmed victims of sexual abuse offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis.

Interviews with residents who reported a sexual abuse:

See 115.382 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.382 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: 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. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.383	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.6 • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interviews with medical and mental health staff • Interviews with residents who reported a sexual abuse • Site review Reasoning and analysis (by provision): 115.383 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.6 (page 1): If the resident refuses medical treatment, document on form CS-0991 PREA Refusal of Medical Treatment that medical treatment was offered to the resident and if the offer for medical treatment was - Refused by the resident, or - Accepted by the resident but refused to be examined after arriving at a medical facility. - An assessment by a mental health professional - Mental health counseling as needed - Follow-up services and referrals, as applicable, for continued care following transfer to, or placement in other facilities, or release from custody. - No resident victim will be denied access to treatment resources and/or services for failing to fully disclose details to internal investigators, outside law enforcement investigators, and/or medical/mental health staff. What was observed as part of a systematic review of evidence:

Site review:

The auditor observed the detention center has a medical office for follow-up services.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.383 (b)

What was heard, as part of a systematic review of evidence:

Interviews with medical and mental health staff:

The nurse stated evaluation and treatment of residents who have been victimized would include follow-up medical and mental health services as needed. The resident would be seen by the nurse practitioner.

Interviews with residents who reported a sexual abuse:

There were no residents, present during the onsite phase of the audit, who reported sexual abuse or sexual harassment.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.383 (c)

What was heard, as part of a systematic review of evidence:

Interviews with medical and mental health staff:

The nurse stated medical services are consistent with the community level of care.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.383 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

Female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests.

What was heard, as part of a systematic review of evidence:

Interviews with female residents who reported a sexual abuse:

There were no female residents who reported a sexual abuse during the past 12 months.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.383 (e)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services.

What was heard, as part of a systematic review of evidence:

Interviews with medical and mental health staff:
The nurse confirmed if pregnancy results from sexual abuse while incarcerated, victims given immediate information and access to all lawful pregnancy-related services.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.383 (f)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
Resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

What was heard, as part of a systematic review of evidence:

Interviews with medical and mental health staff:
The nurse stated victims of sexual abuse shall be offered tests for sexually transmitted infections as medically appropriate.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.383 (g)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

What was heard, as part of a systematic review of evidence:

Interviews with residents who reported a sexual abuse:
See 115.383 (b).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

	Reasoning and analysis (by provision): 115.383 (h) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility attempts to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.386	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.9 • Tennessee Department of Children’s Services Sexual Abuse Critical Incident Review form • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with superintendent • Interview with PREA coordinator • Interview with incident review team Reasoning and analysis (by provision): 115.386 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility conducts a sexual abuse incident review at the conclusion of every sexual abuse criminal or administrative investigation unless the allegation has been determined to be unfounded. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only “unfounded” incidents: 0 Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.9 (page 1): HCJDC will conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation involving a PREA-related incident, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.

Review of completed criminal or administrative investigations of sexual abuse:
There were no substantiated or unsubstantiated allegations of sexual abuse.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.386 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation.

In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents: 0

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.9 (page 1):

The review will occur within thirty (30) days of the conclusion of the investigation.

Review of completed criminal or administrative investigations of sexual abuse:
See 115.386 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.386 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.9 (page 1):

The review team will consist of management level staff/designees, as applicable, with input from line supervisors, investigators, and medical and/or mental health practitioners.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The superintendent stated the facility has a sexual abuse incident review team; the team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.386 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submits such report to the facility head and PREA compliance manager.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.9 (page 1):

The review team will:

- a. Consider whether the allegation or investigation indicates a need to change policy or practices to better prevent, detect or respond to sexual abuse;
- b. Consider whether the incident or allegation was motivated by:
 - Race
 - Ethnicity
 - Gender
 - Lesbian, gay, bisexual, transgender (LGBT) or intersex identification, status, or perceived status, or
 - Gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility.
- c. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- d. Assess the adequacy of staffing levels in the area during different shifts;
- e. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- f. Prepare a report of its findings including, but not limited to determinations made pursuant to paragraphs 2. B) of this section, and any recommendations of improvement and submit the report to the DCJCS Director, PREA coordinator, DCS Licensing as applicable.

Sexual abuse incident review form:

The auditor reviewed the Tennessee Department of Children's Services Sexual Abuse Critical Incident Review form. The form is inclusive of the standard provision requirements.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The superintendent stated they are a part of the sexual abuse incident review team. They stated the team considers whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility. The area in the facility where the incident allegedly occurred is examined to assess whether physical

	barriers in the area may enable abuse. Adequacy of staffing levels in the area is assessed for different shifts. They stated the team assesses whether monitoring technology should be deployed or augmented to supplement supervision by staff. Interview with PREA coordinator: The PREA coordinator stated if the facility conducts a sexual abuse incident review, the facility prepares a report of its findings from the review, including any determinations per standard 115.386 (d)-1 through (d)- 5 and any recommendations for improvement. They are part of the review. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Reasoning and analysis (by provision): 115.386 (e) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The facility implements the recommendations for improvement or documents its reasons for not doing so. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.9 (page 1): The HCJDC will implement the recommendations for improvement, or will document reasons for not doing so, e.g., inadequate funding or staffing issues. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.387	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 • Tennessee Department of Children’s Services Sexual Abuse Critical Incident Review form • Survey of Sexual Victimization Substantiated Incident Form (Juvenile) • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) Evidence (corrective action): • 2024 Annual report (04/22/2025)

Reasoning and analysis (by provision):

115.387 (a)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The standardized instrument includes, 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.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 (page 1):

HCJDC will collect accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions as instructed by the PREA Coordinator.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.387 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The agency aggregates the incident-based sexual abuse data at least annually.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 (page 1):

HCJDC will aggregate the incident-based sexual abuse data at least annually.

Review of incident-based data collection:

Through corrective action the facility developed an annual report (04/22/2025). The auditor observed the annual report includes aggregate data for 2022 through 2024.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The facility developed an annual report (04/22/2025).

Reasoning and analysis (by provision):

115.387 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:
The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization (SSV) conducted by the Department of Justice.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 (page

1):

The incident-based data collected will include, at minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

Incident form:

Survey of Sexual Victimization Substantiated Incident Form (Juvenile):

The auditor reviewed the Survey of Sexual Victimization Substantiated Incident Form (Juvenile) for verification the instrument includes the data necessary to answer all questions from the SSV.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.387 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 (page 1):

The HCJDC will maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

Investigation reports:

There were no reported allegations of sexual abuse or harassment.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.387 (e)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

Hamilton County Juvenile Detention Center does not contract with other facilities for the confinement of its residents.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.387 (f)

	What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency was not requested to provide the Department of Justice (DOJ) with data from the previous calendar year. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 (page 1): Upon request, HCJDC will provide all such data from the previous calendar year to the Department of Justice. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.388	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with agency head (superintendent) • Interview with PREA coordinator Evidence (corrective action): • Annual report (04/22/2025) • Website publication of annual report (11/06/2025) Reasoning and analysis (by provision): 115.388 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency reviews data collected and aggregated pursuant to §115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training, including: • Identifying problem areas; • Taking corrective action on an ongoing basis; and • Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 (page 1): HCJDC will review data collected and aggregated pursuant to PREA standards § 115.387 in order to assess and improve the effectiveness of its sexual abuse

prevention, detection, and response policies, practices, and training, including:

- a. Identifying problem areas;
- b. Taking corrective action on an ongoing basis; and
- c. Preparing an annual report of its findings and corrective action.

Review of documentation of corrective action plans:

No documented aggregate data and corrective action plans were provided for review. Through corrective action the facility developed an annual report with aggregated data from 2022 to 2024.

What was heard, as part of a systematic review of evidence:

Interviews with agency head (superintendent):

The superintendent stated the agency reviews data collected and aggregated pursuant to § 115.387 in order to assess, and improve the effectiveness, of its sexual abuse and prevention, detection, and response policies, and training.

Interviews with PREA coordinator:

The PREA coordinator stated the agency is in the process of reviewing data collected and aggregated pursuant to § 115.387 in order to assess, and improve the effectiveness, of its sexual abuse and prevention, detection, and response policies, and training.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The facility developed an annual report (04/22/2025). The auditor observed the annual report includes aggregate data for 2022 through 2024. The report indicates there were no allegations and therefore no corrective actions.

Reasoning and analysis (by provision):

115.388 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The annual report includes a comparison of the current year's data and corrective actions with those from prior years. The annual report provides an assessment of the agency's progress in addressing sexual abuse.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 (page 1):

The report shall include a comparison of data from the current year to data from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse.

Review of annual reports:

No annual report was provided for review. Through corrective action the facility developed an annual report.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The facility developed an annual report (04/22/2025). The auditor observed the annual report includes a comparison of data for 2024 with data from 2022 and 2023. Additionally, the auditor observed the report provides an assessment of the agency's progress in addressing sexual abuse.

Reasoning and analysis (by provision):

115.388 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

The agency makes its annual report readily available to the public at least annually through its website. The annual reports are approved by the agency head.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 (page 1):

HCJDC report will be approved by the DCS Commissioner/Designee agency Director and make readily available to the public through its website or through other means, as applicable.

Review of annual reports:

No annual report was provided for review. Through corrective action the facility developed an annual report.

The auditor reviewed the Hamilton County Juvenile Detention Center website at <https://www.hamiltontn.gov/Courts.aspx> and observed a 2021 annual report, but no current published annual report. This report was published through corrective action.

Finding:

Based on this analysis, the facility is not substantially compliant with this provision and corrective action is completed.

The facility developed an annual report (04/22/2025). The auditor observed the annual report is approved by the superintendent.

The annual report was published on the agency's website November 6, 2025.

Reasoning and analysis (by provision):

115.388 (d)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated:

When the agency redacts material from an annual report for publication the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. The agency indicates the

	nature of material redacted. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 (page 1): HCJDC may redact specific material from the reports when publication would present a clear and specific threat to the facility and security of a facility, but must indicate the nature of the material redacted. Review of annual reports: No annual report was provided for review. Through corrective action the facility developed an annual report. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed. The facility developed an annual report (04/22/2025). The auditor observed that the report does not include personal identifying information.
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115.389	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 • Hamilton County Juvenile Detention Center Website: https://www.hamiltontn.gov/Courts.aspx • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interview with PREA coordinator Evidence (corrective action): • Annual report (04/22/2025) • Website publication of annual report (11/06/2025) Reasoning and analysis (by provision): 115.389 (a) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency ensures that incident-based and aggregate data are securely retained. What was heard, as part of a systematic review of evidence: Interview with PREA coordinator: The PREA coordinator confirmed the agency reviews data collected and aggregated

in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training. The agency would ensure that data collected is securely maintained. The agency takes corrective action on an ongoing basis based on this data.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.389 (b)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public, at least annually, through its website.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 (page 2):

HCJDC will make all aggregated sexual abuse data from the facility under its direct control readily available to the public at least annually through its website or through other means, as applicable.

Website review:

The auditor reviewed the Hamilton County Juvenile Detention Center website at <https://www.hamiltontn.gov/Courts.aspx> and observed a 2021 annual report, but no current published annual report. This report was published through corrective action.

Finding:

Based on this analysis, the facility is not substantially compliant with this provision and corrective action is completed.

The annual report was published on the agency's website November 6, 2025.

Reasoning and analysis (by provision):

115.389 (c)

What was read, as part of a systematic review of evidence:

Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.

Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 (page 2):

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

	Review of annual reports: No annual report was provided for review. Through corrective action the facility developed an annual report. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed. The facility developed an annual report (04/22/2025). The auditor observed that the report does not include personal identifying information. Reasoning and analysis (by provision): 115.389 (d) What was read, as part of a systematic review of evidence: Hamilton County Juvenile Detention Center Pre-Audit Questionnaire indicated: The agency maintains sexual abuse data sexual abuse data collected pursuant to §115.387 for at least 10 years after the date of initial collection, unless Federal, State, or local law requires otherwise. Hamilton County Juvenile Detention Center PREA Policy and Procedure 16.12 (page 2): HCJDC will maintain sexual abuse data collected pursuant to PREA Standards §115.387 for at least ten (10) years after the date of its initial collection unless Federal, State, or local law requires otherwise. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Interviews • Research • Policy Review • Document Review • Observations during onsite review of facility Reasoning and analysis: During the three-year period starting on August 20, 2013, and the current audit

	cycle, Hamilton County Juvenile Detention Center was previously audited in 2016, 2019, 2022. The auditor was given access to, and the ability to observe, all areas of Hamilton County Juvenile Detention Center. The auditor was permitted to conduct private interviews with residents at the facility. The auditor sent an audit notice to the facility six weeks prior to the on-site audit. The facility confirmed the audit notice was posted by emailing pictures of the posted audit notices. The audit notice contained contact information for the auditor. The residents were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. No confidential information or correspondence was received. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Hamilton County Juvenile Detention Center Pre-Audit Questionnaire (Juvenile Facilities) • Policy Review • Documentation Review Reasoning and analysis (by provision): 115.403 (f): What was observed as part of a systematic review of evidence: The auditor observed the 2019 and 2022 Hamilton County Juvenile Detention Center PREA Audit Reports are published on the agency's website at https://www.hamilton-tn.gov/Courts.aspx. Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Appendix: Provision Findings		
115.311 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.311 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.311 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	na
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	na
115.312 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.312 (b)	Contracting with other entities for the confinement of residents	

	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents OR the response to 115.312(a)-1 is "NO".)	na
115.313 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has implemented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Generally accepted juvenile detention and correctional/secure residential practices?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any judicial findings of inadequacy?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from Federal investigative agencies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate	yes

	staffing levels and determining the need for video monitoring: Any findings of inadequacy from internal or external oversight bodies?	
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: All components of the facility's physical plant (including "blind-spots" or areas where staff or residents may be isolated)?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the resident population?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The number and placement of supervisory staff?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Institution programs occurring on a particular shift?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any applicable State or local laws, regulations, or standards?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes
115.313 (b)	Supervision and monitoring	
	Does the agency comply with the staffing plan except during limited and discrete exigent circumstances?	yes
	In circumstances where the staffing plan is not complied with, does the facility fully document all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.313 (c)	Supervision and monitoring	
	Does the facility maintain staff ratios of a minimum of 1:8 during resident waking hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes

	Does the facility maintain staff ratios of a minimum of 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility fully document any limited and discrete exigent circumstances during which the facility did not maintain staff ratios? (N/A only until October 1, 2017.)	yes
	Does the facility ensure only security staff are included when calculating these ratios? (N/A only until October 1, 2017.)	yes
	Is the facility obligated by law, regulation, or judicial consent decree to maintain the staffing ratios set forth in this paragraph?	yes
115.313 (d)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.313 (e)	Supervision and monitoring	
	Has the facility implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? (N/A for non-secure facilities)	yes
	Is this policy and practice implemented for night shifts as well as day shifts? (N/A for non-secure facilities)	yes
	Does the facility have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational	yes

	functions of the facility? (N/A for non-secure facilities)	
115.315 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.315 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches in non-exigent circumstances?	yes
115.315 (c)	Limits to cross-gender viewing and searches	
	Does the facility document and justify all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches?	yes
115.315 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering a resident housing unit?	yes
	In facilities (such as group homes) that do not contain discrete housing units, does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing? (N/A for facilities with discrete housing units)	yes
115.315 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If a resident's genital status is unknown, does the facility	yes

	determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	
115.315 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.316 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including:	yes

	Residents who have speech disabilities?	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other? (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
115.316 (b)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.316 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's	yes

	safety, the performance of first-response duties under §115.364, or the investigation of the resident's allegations?	
115.317 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone 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 (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: 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?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of 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 (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: 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?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.317 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents?	yes
115.317	Hiring and promotion decisions	

(c)		
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consult any child abuse registry maintained by the State or locality in which the employee would work?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.317 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
	Does the agency consult applicable child abuse registries before enlisting the services of any contractor who may have contact with residents?	yes
115.317 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes
115.317 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current	yes

	employees?	
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.317 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.317 (h)	Hiring and promotion decisions	
	Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.318 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.318 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.321 (a)	Evidence protocol and forensic medical examinations	

	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
115.321 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
115.321 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all residents who experience sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.321 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes

	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.321 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.321 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency is responsible for investigating allegations of sexual abuse.)	no
115.321 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (Check N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.321(d) above.)	na
115.322 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.322 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.322 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.321(a))	yes
115.331 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in juvenile facilities?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of juvenile victims of sexual abuse and sexual harassment?	yes

	Does the agency train all employees who may have contact with residents on: 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?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
	Does the agency train all employees who may have contact with residents on: Relevant laws regarding the applicable age of consent?	yes
115.331 (b)	Employee training	
	Is such training tailored to the unique needs and attributes of residents of juvenile facilities?	yes
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.331 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes

115.331 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.332 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.332 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.332 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.333 (a)	Resident education	
	During intake, do residents receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	Is this information presented in an age-appropriate fashion?	yes
115.333 (b)	Resident education	
	Within 10 days of intake, does the agency provide age-appropriate	yes

	comprehensive education to residents either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.333 (c)	Resident education	
	Have all residents received such education?	yes
	Do residents receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility?	yes
115.333 (d)	Resident education	
	Does the agency provide resident education in formats accessible to all residents including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Have limited reading skills?	yes
115.333 (e)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.333 (f)	Resident education	

	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.334 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
115.334 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing juvenile sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
	Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
	Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
115.334 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na

115.335 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.335 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.335 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

115.335 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.331? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.332? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.341 (a)	Obtaining information from residents	
	Within 72 hours of the resident's arrival at the facility, does the agency obtain and use information about each resident's personal history and behavior to reduce risk of sexual abuse by or upon a resident?	yes
	Does the agency also obtain this information periodically throughout a resident's confinement?	yes
115.341 (b)	Obtaining information from residents	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.341 (c)	Obtaining information from residents	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Prior sexual victimization or abusiveness?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: 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?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Current charges and offense history?	yes
	During these PREA screening assessments, at a minimum, does	yes

	the agency attempt to ascertain information about: Age?	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Level of emotional and cognitive development?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical size and stature?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Mental illness or mental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Intellectual or developmental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: The resident's own perception of vulnerability?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents?	yes
115.341 (d)	Obtaining information from residents	
	Is this information ascertained: Through conversations with the resident during the intake process and medical mental health screenings?	yes
	Is this information ascertained: During classification assessments?	yes
	Is this information ascertained: By reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files?	yes
115.341 (e)	Obtaining information from residents	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked	yes

	pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	
115.342 (a)	Placement of residents	
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Housing Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Bed assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Work Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Education Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Program Assignments?	yes
115.342 (b)	Placement of residents	
	Are residents isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged?	yes
	During any period of isolation, does the agency always refrain from denying residents daily large-muscle exercise?	yes
	During any period of isolation, does the agency always refrain from denying residents any legally required educational programming or special education services?	yes
	Do residents in isolation receive daily visits from a medical or mental health care clinician?	yes
	Do residents also have access to other programs and work opportunities to the extent possible?	yes

115.342 (c)	Placement of residents	
	Does the agency always refrain from placing: Lesbian, gay, and bisexual residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Transgender residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator or likelihood of being sexually abusive?	yes
115.342 (d)	Placement of residents	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.342 (e)	Placement of residents	
	Are placement and programming assignments for each transgender or intersex resident reassessed at least twice each year to review any threats to safety experienced by the resident?	yes
115.342 (f)	Placement of residents	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when	yes

	making facility and housing placement decisions and programming assignments?	
115.342 (g)	Placement of residents	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
115.342 (h)	Placement of residents	
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The basis for the facility's concern for the resident's safety? (N/A for h and i if facility doesn't use isolation?)	yes
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? (N/A for h and i if facility doesn't use isolation?)	yes
115.342 (i)	Placement of residents	
	In the case of each resident who is isolated as a last resort when less restrictive measures are inadequate to keep them and other residents safe, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.351 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: 2. Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.351 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private	yes

	entity or office that is not part of the agency?	
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
	Are residents detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security to report sexual abuse or harassment?	yes
115.351 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.351 (d)	Resident reporting	
	Does the facility provide residents with access to tools necessary to make a written report?	yes
115.351 (e)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.352 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.352 (b)	Exhaustion of administrative remedies	

	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	na
	Does the agency always refrain from requiring an resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na
115.352 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
115.352 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	If the agency determines that the 90 day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension of time to respond is 70 days per 115.352(d)(3)) , does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na
115.352 (e)	Exhaustion of administrative remedies	

	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	na
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	na
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	na
	Is a parent or legal guardian of a juvenile allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile? (N/A if agency is exempt from this standard.)	na
	If a parent or legal guardian of a juvenile files a grievance (or an appeal) on behalf of a juvenile regarding allegations of sexual abuse, is it the case that those grievances are not conditioned upon the juvenile agreeing to have the request filed on his or her behalf? (N/A if agency is exempt from this standard.)	na
115.352 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	na

	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
115.352 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	na
115.353 (a)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible?	yes
115.353 (b)	Resident access to outside confidential support services and legal representation	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and	yes

	the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	
115.353 (c)	Resident access to outside confidential support services and legal representation	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.353 (d)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with reasonable and confidential access to their attorneys or other legal representation?	yes
	Does the facility provide residents with reasonable access to parents or legal guardians?	yes
115.354 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.361 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency 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?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or	yes

	information they receive regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	
115.361 (b)	Staff and agency reporting duties	
	Does the agency require all staff to comply with any applicable mandatory child abuse reporting laws?	yes
115.361 (c)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials and designated State or local services agencies, are staff prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.361 (d)	Staff and agency reporting duties	
	Are medical and mental health practitioners required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section as well as to the designated State or local services agency where required by mandatory reporting laws?	yes
	Are medical and mental health practitioners required to inform residents of their duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.361 (e)	Staff and agency reporting duties	
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the appropriate office?	yes
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the alleged victim's parents or legal guardians unless the facility has official documentation showing the parents or legal guardians should not be notified?	yes
	If the alleged victim is under the guardianship of the child welfare system, does the facility head or his or her designee promptly report the allegation to the alleged victim's caseworker instead of	yes

	the parents or legal guardians? (N/A if the alleged victim is not under the guardianship of the child welfare system.)	
	If a juvenile court retains jurisdiction over the alleged victim, does the facility head or designee also report the allegation to the juvenile's attorney or other legal representative of record within 14 days of receiving the allegation?	yes
115.361 (f)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.362 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.363 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
	Does the head of the facility that received the allegation also notify the appropriate investigative agency?	yes
115.363 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.363 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.363 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in	yes

	accordance with these standards?	
115.364 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.364 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.365 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.366 (a)	Preservation of ability to protect residents from contact with abusers	

	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.367 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.367 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services?	yes
115.367 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report	yes

	of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.367 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.367 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.368 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect a resident who is alleged to have suffered sexual abuse subject to the requirements of § 115.342?	yes

115.371 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	na
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	na
115.371 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations involving juvenile victims as required by 115.334?	yes
115.371 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.371 (d)	Criminal and administrative agency investigations	
	Does the agency always refrain from terminating an investigation solely because the source of the allegation recants the allegation?	yes
115.371 (e)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.371	Criminal and administrative agency investigations	

(f)		
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.371 (g)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.371 (h)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.371 (i)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.371 (j)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.371(g) and (h) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention?	yes
115.371 (k)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency	yes

	does not provide a basis for terminating an investigation?	
115.371 (m)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
115.372 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.373 (a)	Reporting to residents	
	Following an investigation into a resident's allegation of sexual abuse suffered in the facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.373 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.373 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency	yes

	has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.373 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.373 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.376 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

115.376 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.376 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) 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?	yes
115.376 (d)	Disciplinary sanctions for staff	
	Are 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, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are 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, reported to: Relevant licensing bodies?	yes
115.377 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.377 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes

115.378 (a)	Interventions and disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, may residents be subject to disciplinary sanctions only pursuant to a formal disciplinary process?	yes
115.378 (b)	Interventions and disciplinary sanctions for residents	
	Are disciplinary sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied daily large-muscle exercise?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied access to any legally required educational programming or special education services?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident receives daily visits from a medical or mental health care clinician?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the resident also have access to other programs and work opportunities to the extent possible?	yes
115.378 (c)	Interventions and disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.378 (d)	Interventions and disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to offer the offending resident participation in such interventions?	yes

	If the agency requires participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, does it always refrain from requiring such participation as a condition to accessing general programming or education?	yes
115.378 (e)	Interventions and disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.378 (f)	Interventions and disciplinary sanctions for residents	
	For the purpose of disciplinary action, does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.378 (g)	Interventions and disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.381 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes
115.381 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening?	yes
115.381 (c)	Medical and mental health screenings; history of sexual abuse	

	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.381 (d)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18?	yes
115.382 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.382 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do staff first responders take preliminary steps to protect the victim pursuant to § 115.362?	yes
	Do staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.382 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse 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?	yes
115.382 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial	yes

	cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	
115.383 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.383 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.383 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.383 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	yes
115.383 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.383(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	yes
115.383 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.383 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or	yes

	cooperates with any investigation arising out of the incident?	
115.383 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.386 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.386 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.386 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.386 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes

	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.386(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.386 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.387 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.387 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.387 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.387 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.387 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for	na

	the confinement of its residents.)	
115.387 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
115.388 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.388 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.388 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.388 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when	yes

	publication would present a clear and specific threat to the safety and security of a facility?	
115.389 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.387 are securely retained?	yes
115.389 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.389 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.389 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes

	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes