PREA AUDIT: AUDITOR'S SUMMARY REPORT JUVENILE FACILITIES NATIONAL

PREA RESOURCE CENTER



Physical Address: 1575 County Service Parkway SW Marietta, Georgia 30008 Date report submitted: March 10, 2015 Auditor Information: Jerome K. Williams Address: 17921 Maxa Dr. Manor, Texas 78653 Email: jkwmss@netzero.net Telephone number 512-636-8137 Date of facility visit: February 13-14, 2015 Facility Mailing Address: Same (if different from above) 770-526-4247 Telephone Number: Military County Federal Municipal State Private for profit Municipal State State Private not for pr Correction Other: Name of PREA Compliance Manager Shantreas O'Neil, Social Service Coordinator Email Address: shantreasoneil@djj.state.ga.us Telephone	Name of Facility:	Marietta Regional Youth Detention Center (RYDC)
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ManagerEmail Address:shantreasoneil@djj.state.ga.usTelephone	Name of PREA	
Email Address: shantreasoneil@djj.state.ga.us Telephone	Compliance	Shantreas O'Neil, Social Service Coordinator
	Manager	
	Email Address:	- 55
Number: 770-		Number: 770-
528-7816		528-7816

Agency Information	
Name of Agency:	Georgia Department of Juvenile Justice
Governing	
Authority of	
Parent Agency:	

(if Applicable)		
	2400 Carriaghan Highway Dagad	Carusia 20022
Physical Address:	3408 Covington Highway, Decat	tur, Georgia 30032
Mailing Address:		
(if different from	Same	
above)		
Telephone	404-508-6500	
Number:		
Agency Chief		
Executive Officer:		
Name:	Avery D. Niles, Commissioner	
Email Address:	averyniles@djj.state.ga.us	
Telephone:	404-508-6500	
Agency Wide		
PREA		
Coordinator:		
Name:	Adam T. Barnett Sr.	Title:
		PREA
		Coordinator
Email:	adambarnett@djj.state.ga.us	
Telephone	404-683-6844	
Number:		

AUDIT FINDINGS

NARRATIVE:

The PREA Audit was conducted on February 13-14, 2015 at the Marietta RYDC facility. The audit was conducted by certified PREA Auditor for Juvenile Facilities Jerome K. Williams.

Following the entrance meeting a thorough tour of the facility was provided by the PREA Compliance Manager along with the Facility Director, two Assistant Directors, Sergeant, the PREA Coordinator, and both State-wide PREA Monitors. On the first day of the audit, a comprehensive list of resident and staff was requested and provided for interviews and adjustments were made. During the tour several youth and staff were questioned at random about their knowledge of PREA standards, procedures for reporting, services available and their responsibilities. A total of at least 11 residents were interviewed during the on site visit. All the youth interviewed acknowledged receiving PREA training and written materials (youth handbook, posters, hotline numbers, etc.) that outlined the facilities zero tolerance policy towards sexual abuse and sexual harassment and retaliation for reporting, as well as the procedures for reporting an allegation.

A total of 11 specialized staff comprised of the Facility Administrative, PREA Coordinator, First Responders, medical and mental health staff, intake staff, Administrative Operations Manager, staff who performs screening for risk of victimization and abusiveness, Social Service Worker, and members of the incident review team were interviewed. The staff interviewed was knowledgeable of

who performs screening for risk of victimization and abusiveness, Social Service Worker, and members of the incident review team were interviewed. The staff interviewed was knowledgeable of their responsibilities in reporting sexual abuse and sexual harassment, staff negligence and monitoring for retaliation. When questioned about evidence preservation, all staff responses reflected their knowledge of the agency's policy. There were no SANE or SAFE personnel in the facility but are available at the Wellstar Cobb Hospital.

The auditor reviewed camera placements, staff placement, supervisory presence and documentation to assist in determining standard compliance. Upon completion of the audit an exit meeting was held with the Facility Director, the PREA Coordinator, the PREA Compliance Manager; the Assistant Director (Security), Assistant Director of Programs, Sergeant, the two State-wide PREA Monitors and other members of the Director's preference from his leadership team. The facility was provided with a verbal general overview of the audit process, audit highlights and was provided with a verbal synopsis of the file and documentation review, staff and youth interviews and of the facility tour. The auditor reported that he would be working closely with the PREA Coordinator and his team to accomplish PREA compliance and will advise the PREA team of their requirements to post the final report, once issued, on the facility's website once compliance with all of the standards were achieved.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Marietta RYDC is a high restriction, short-term placement, state Youth Detention Center located in Marietta, Georgia with the mission to provide a safe, secure environment for all youth in their care, to embrace individuality that encompasses teamwork among their staff; to impose and uphold the highest standard among the youth that prepare for transition into the community and to cultivate the youth by encouraging volunteers and community leaders to invest in the future leaders through their volunteer services. Marietta RYDC models a holistic approach to services and programs that positively impact the lives of the youth placed in their care. The facility has a design capacity for 70 residents and houses 44 male and 13 female offenders between the ages ranging from ages 11- 15. There were 57 youth assigned to the facility on the day of the audit. The facility has a gymnasium, a kitchen area, a dining area, several classrooms, 4 dormitories, one housing unit for the females, an administrative area, a medical clinic, an outside court for recreation, numerous offices, an intake area and two control communication centers. The showers were located outside in the hallway towards the dayroom area where the cameras could not view inside. Shower routines were conduct by male staff in the male units and female staff only in the female unit of this facility. Only two youth at a time were showered.

SUMMARY OF AUDIT FINDINGS:

The Marietta RYDC administrative, dormitories and housing areas, recreation area, kitchen and dining, and educational classrooms were clean, well maintained and operating orderly during the days of this visit. PREA posters, hotline numbers, appropriate staff to youth ratios and supervisors being visible in the housing and educational area were observed. There were 96 cameras installed throughout this facility that were being monitored in both control centers. The cameras were placed in areas where a youth might frequent and where a staff's supervision and monitoring of the residents could be augmented. The cameras do not view into the shower or in the toilet areas which are in the resident's room. It was noted that additional camera will be installed in this facility later on this year. The 11 residents interviewed appeared to be well informed of their rights to be free from sexual abuse and sexual harassment and how to report such incidents. They were able to discuss having knowledge of an outside advocate agency for emotional support and crisis counseling services related to sexual abuse if needed.

The 11 staff members interviewed was knowledgeable regarding the facility's reporting procedures, the facility's PREA policy and were able to articulate the facility's protocol for collecting evidence and the procedure to be followed in a situation where they may be the first person notified of a sexual abuse incident.

During the past 12 month reporting period Marietta RYDC reported that there were 8 administrative case alleging sexual abuse and sexual harassment. All of these investigative cases during this period had been completed and closed. The Marietta RYDC was found to be compliant with all 41 standards and the release of this document is to be considered as their **Final Report**.

SINCE THE AUDIT:

Number of standards exceeded: 3 Number of standards met: 38 Number of standards not met: 0

Number of standards non-applicable: 0

STANDARD §115.311 - Zero tolerance of Sexual Abuse and	Sexual
Harassment; PREA coordinator	

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

Auditor comments, including corrective actions needed if does not meet standard:

The Georgia Department of Juvenile Justice (DJJ) has a Zero Tolerance policy towards all forms of sexual abuse and sexual harassment. The agency has one dedicated PREA Coordinator and the Marietta RYDC facility has designated the Assistant Director of Programs as their PREA Compliance Manager. They both have indicated that they have sufficient time to fulfill their PREA responsibilities during the interview process. It is evident that Georgia DJJ has worked diligent to implement all of the PREA standards.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 III (A-C)

STANDARD \$115.312 - Contracting with other entities for the confinement of

esidents	3113/312 Contracting With Other Children of the Comment of
	☐ Exceeds Standard (substantially exceeds requirement of standard)
	oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	☐ Does Not Meet Standard (requires corrective action)
Auditor com	ments, including corrective actions needed if does not meet standard:

The Georgia DJJ requires all contracting facilities to meet the PREA standards upon renewal. Sample contracts were provided for review.

Prison Rape Elimination Act (PREA) 23.1 III (D)

STANDARD§115.313 - Supervision and Monitoring

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

Auditor comments, including corrective actions needed if does not meet standard:

The Marietta RYDC did provide documentation during the audit that demonstrated compliance with this standard and at no time has the facility deviated from their staff—to-youth ratio of 1:7 during waking hours and 1:10 during sleeping hours, which is inclusive of their staffing plan. The facility did demonstrate the documentable practice of having higher level supervisors conduct unannounced rounds on all shifts as well as a review of the video reflecting such practice.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 III (E- J)

Standard §115.315 - Limits to Cross-Gender Viewing and Searches

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

Auditor comments, including corrective actions needed if does not meet standard:

The Georgia DJJ policy prohibits cross gender viewing and searches. All staff and residents interviewed verified that this practice does not happen under any circumstances. T as well as was verified during the staff and youth interviews. The youth were able to definitively articulate that the female staff does announce their presence when entering the dorms. This practice is covered in the agency's PREA policy and was heard and observed during the facility tour.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 III (K-Q)

STANDARD §115.316 — Residents with Disabilities and Residents who are Limited English Proficient

☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
Marietta RYDC have provided written PREA material in English and Spanish i.e. handbook which they provided to the resident during intake/orientation. Georgia DJJ's Preparatory Academy and Language Line Solutions provides interpreting services for residents who may be deaf, is speech impaired, limited in English proficiency or is disabled. Documentation was provided to verify of these services.
Policy Reviewed Prison Rape Elimination Act (PREA) 23.1 III (R-U)
STANDARD§115.317 — Hiring and Promotion Decisions
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
Georgia DJJ policy addresses the elements of this standard. Documentation has been provided showing that Marietta RYDC conducts background checks on all current employees every five years. There were 36 new hires during this reporting period and all background checks have been completed including that of the 4 service contractors.
Policy Reviewed Prison Rape Elimination Act (PREA) III (V-Z) (aa-ee)
STANDARD§115.318 - Upgrades to Facilities and Technology
☐ Exceeds Standard (substantially exceeds requirement of standard)

oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
The Marietta RYDC has not made any modifications to or any renovations in this facility and has 96 cameras throughout the facility to augment the supervision and monitoring of the youth.
Prison Rape Elimination Act (PREA) 23.1 III (ff-hh)
STANDARD§115.321 — Evidence Protocol and Forensic Medical Examinations
 □ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) □ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
Georgia DJJ Office of Investigations is responsible for conducting criminal investigation and administrative investigations for the facility. The uniform evidence protocol used to maximize the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions is the National Protocol for Sexual Assault Medical Forensic Examinations, Second Edition April 2013. Wellstar Cobb Hospital is where a resident would be taken by local law enforcement for a forensic examination for sexual abuse. The facility has a qualified staff member to serve as an advocate if needed and they provided documentation verifying efforts for obtaining services of a local rape crisis center.
Policy Reviewed
Prison Rape Elimination Act (PREA) 23.1 IV (A-J)
STANDARD§115.322 – Policies to Ensure Referrals of Allegations for Investigations
 □ Exceeds Standard (substantially exceeds requirement of standard) □ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) □ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
The DJJ policy requires that all allegations of sexual abuse and sexual harassment are reported to

the Facility Administrator who immediately contacts the DJJ Office of Investigations whose

personnel conduct either an administrative or criminal investigation. There were 8 sexual abuse and sexual harassment allegations reported during this audit period.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 IV (K-L)

STANDARD§115.331 - Employee Training

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

Auditor comments, including corrective actions needed if does not meet standard:

The DJJ policy requires the facility to provide PREA-related training to all employees who may have contact with residents. The training records reviewed as well as the staff interviews revealed that the required elements of 115.331a (1-11), (b) have been met through new hire orientation, e-course and or through job training sessions. Sign in sheets which include the course title and description are kept for each training class. In the process of conducting the staff interviews it was ascertained that the staff were well versed and trained in the areas of PREA.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 V (A-B)

Standard §115.332- Volunteer and Contractor Training

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

Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ policy requires that all volunteers and contractors who have direct access to residents be trained on and understand their responsibilities regarding PREA. Marietta RYDC provided copies of training certificates with a copy of the PREA curriculum for 24 volunteers and 4 contractors to demonstrate compliance with this standard. A facility volunteer verified this information during the onsite interview.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 V (C-E)

STANDARD§115.333 - Resident Education

37
□ Exceeds Standard (substantially exceeds requirement of standard)
$\hfill\Box$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
The Marietta RYDC provides the residents with a packet of information in English and Spanish. Residents also watch the video titled "Safeguarding their Sexual Safety" during orientation. The date and time of the resident's intake and when the information is provided is documented in the master file. During the facility tour and interviews the residents they acknowledged receiving this information during the orientation process and acknowledged that they watched the PREA video described above which the facility shows every resident during the orientation process. Zero Tolerance and other PREA related posters with the Hotline numbers for reporting incidents of sexual abuse and sexual harassment were prominently displayed throughout the facility.
Policy Reviewed Prison Rape Elimination Act (PREA) 23.1 V (F-K)
STANDARD§115.334 - Specialized Training: Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
Georgia DJJ Office of Investigations provided training records for the investigation who serves the Marietta RYDC facility. Certificates of the specialized training received by those assigned investigators were provided
Policy Reviewed Prison Rape Elimination Act (PREA) 23.1 V (L)
STANDARD§115.335 - Specialized Training: Medical and Mental Health Care

 \square Exceeds Standard (substantially exceeds requirement of standard)

☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
The Marietta RYDC does not conduct forensic medical exams. These would occur at Wellstar Cobb Hospital. Training record and the interview with the mental health and medical staff verified compliance with this standard including providing certificates of the specialized training.
Policy Reviewed Prison Rape Elimination Act (PREA) 23.1 V (M)
STANDARD§115.341 - Screening for Risk of Victimization and Abusiveness
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
Georgia DJJ's screening instrument does contain all of the requirements of this standard and contains questions which covers the residents own perception of vulnerability as well as any observations for gender non-conforming appearance. Through staff, resident interviews, a review of the agency policy and a review of the documentation provided during the pre-audit review also verified their compliance with this standard
Policy Reviewed Prison Rape Elimination Act (PREA) 23.1 V (A-L)
STANDARD§115.342 - Use of Screening Information
☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action) Auditor comments, including corrective actions needed if does not meet standard:
The Marietta RYDC facility staff was able to demonstrate how the screening instrument was used

The Marietta RYDC facility staff was able to demonstrate how the screening instrument was used to make informed housing assignments, which was also being discussed weekly during their Transition and Special Management Team meetings. Georgia DJJ policy prohibits the placement of youth in isolation due to risk of sexual victimization.

Prison Rape Elimination Act (PREA) 23.1 VI (M-P)

STANDARD§115.351 - Resident Reporting

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

Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ provides multiple internal ways and several numbers for a resident to privately report allegations of sexual abuse and sexual harassment. One of the numbers provided is a toll free number maintained by the Georgia Center for Child Advocacy which is a separate agency. Interviews with staff and residents demonstrate compliance with this standard including staff acceptance of verbal reports and staff/youth informing me of the ways that they can report allegations privately. All the components of this standard are also covered in Georgia DJJ's policy.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 VII (A-H)

STANDARD§115.352 – Exhaustion of Administrative Remedies

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

Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ does meet this standard requirement requiring a final decision be made by the agency on the merits of any portion of a grievance or administrative investigation alleging sexual abuse within 90 days of the initial filing and the granting of an extension up to 70 calendar days to complete the investigation. The Marietta RYDC provided a memo reporting that no grievances were filed in the past 12 months that alleged sexual abuse.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 VII (I-M)

STANDARD§115.353 — Resident Access to Outside Confidential Support Services

☐ Exceeds Standard (substantially exceeds requirement of standard)	
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
☐ Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard:	
The Marietta RYDC provided residents with information about outside support services. Residents interviewed could recall being given this information on outside support contact during the Intake as well during the PREA groups that were being held. The facility does provid he residents with reasonable and confidential access to their parents, legal guardians and awyers.	le
Policy Reviewed Prison Rape Elimination Act (PREA) 23.1VII (N-P)	
STANDARD§115.354 - Third-Party Reporting	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
☐ Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard:	
Georgia DJJ policy establishes the method outlined to receive third party reporting of sexual abuse and sexual harassment and this information is available on DJJ's website. In addition to his the Marietta RYDC provided a memo outlining how they receive a third party report of sexual abuse and sexual harassment.	
Policy Reviewed Prison Rape Elimination Act (PREA) 23.1 VII (Q-R)	
STANDARD§115.361 - Staff and Agency Reporting Duties	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	

☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
Georgia DJJ policy requires all staff to immediately report to the Facility Director any allegation of sexual abuse, sexual harassment and retaliation then complete a serious incident report. The Facility Director or designee will then report the allegation to the DJJ Office of Investigations. Policy prohibits the staff from revealing any information related to sexual abuse and sexual harassment to anyone other than to the extent necessary. During the staff interviews they demonstrated their knowledge of their reporting responsibilities including notification to the alleged victim's parent or legal guardian or the courts.
Prison Rape Elimination Act (PREA) 23.1 VIII (A-C)
STANDARD§115.362 – Agency Protection Duties
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
Georgia DJJ policy and interviews with staff verified compliance with this standard. The Marietta RYDC provided a memo reporting they had no residents subject to substantial risk of imminent sexual abuse within the past 12 months.
Prison Rape Elimination Act (PREA) 23.1 VIII (D-E)
STANDARD §115.363 – Reporting to Other Confinement Facilities Exceeds Standard (substantially exceeds requirement of standard)
 ✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ policy addresses the requirement for this standard. Intake/Orientation staff interviews demonstrated their understanding of this reporting requirement. The Marietta RYDC reported no cases during the past 12 months of a sexual abuse allegation that occurred in another facility. A memo was provided as documentation verifying their compliance.

Prison Rape Elimination Act (PREA) 23.1 VIII (F)

STANDARD§115.364 - Staff First Responder Duties

□ Exceeds Standard	(substantially	exceeds	requirement	of	standa	rd)

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

Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ has established policies regarding the first responder duties. All of the staff interviewed were able to articulate their responsibilities as a first responder and had a good understanding of these duties and responsibilities. The Marietta RYDC had 8 reported allegations of sexual abuse and sexual harassment during the past 12 months and the first responders acted in accordance with agency policy.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 VIII (G-I)

STANDARD§115.365 – Coordinated Response

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

Auditor comments, including corrective actions needed if does not meet standard:

The Marietta RYDC staff interviewed knew of the process for reporting a sexual abuse and sexual harassment allegations, the responsibilities of the facility administrator, medical and mental health personnel, the investigator and their responsibility as a first responder. The facility did provide a written plan for this coordinated response for the first responder as required by this standard. A recommendation was made for enhancing their written coordinated response plan and for training the staff regarding their specific responsibilities. The facility administration accepted and implemented this recommendation.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 VIII (J-N)

STANDARD§115.366 - Preservation of Ability to Protect Residents from Contact with Abusers

☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action) Auditor comments, including corrective actions needed if does not meet standard:
Georgia DJJ and the Marietta RYDC do not enter into collective bargaining agreements.
Policy Reviewed Prison Rape Elimination Act (PREA) 23.1 VIII (O)
STANDARD§115.367 - Agency Protection Against Retaliation
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action) Auditor comments, including corrective actions needed if does not meet standard:
Georgia DJJ has a retaliation policy that protects all residents and staff members who report sexual abuse and sexual harassment and or who cooperate with an investigation. The Marietta RYDC has designated staff members who will be responsible for monitoring youth and staff against retaliation. The Marietta RYDC reported no allegations of sexual abuse or cases where protective measures were needed against retaliation.
Policy Reviewed Prison Rape Elimination Act (PREA) 23.1 VIII (P)
STANDARD§115.368 – Post-Allegation Protective Custody
☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ policy prohibits the use of segregation housing to protect the residents who have alleged sexual abuse. The Marietta RYDC provided a memo indicating that no youth is isolated who alleges sexual abuse and sexual harassment.

Prison Rape Elimination Act (PREA) 23.1 VIII (Q)

STANDARD§115.371 – Criminal and Administrative Agency Investigations

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

Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ policy covers all components of this standard and the Office of Investigations conducts all administrative and criminal investigation for sexual abuse and sexual harassment. Marietta RYDC did provide documentation of a case for sexual harassment that was investigated and closed in accordance with agency policy. Agency investigators training records, certificates and interview with the Chief Investigator of the Office of Investigation verified compliance with this standard.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 IX (A-D)

STANDARD§115.372 – Evidentiary Standard for Administrative Investigations

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

Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ policy was reviewed and the interview with the Chief Investigator of the Office Investigations verified compliance with this standard

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 IX (E)

STANDARD§115.373 - Reporting to Residents

☐ Exceeds Standard (substantially exceeds requirement of standard)

	andard (substantial compliance; complies in all material ways andard for the relevant review period)
☐ Does No	t Meet Standard (requires corrective action)
Auditor comments, inc	cluding corrective actions needed if does not meet standard:
during the past 12 months	ty has reported 8 sexual abuse and or sexual harassment allegations s. The facility did provide documentation demonstrating that 8 yen to the youths after the investigation.
Policy Reviewed Prison Rape Elimination	Act (PREA) 23.1 IX (F-G)
STANDARD §115.3	376 - Disciplinary sanctions for staff
	Standard (substantially exceeds requirement of standard)
	andard (substantial compliance; complies in all material ways indard for the relevant review period)
☐ Does No	Meet Standard (requires corrective action)
Auditor comments, inc	cluding corrective actions needed if does not meet standard:
past 12 months due to vio	eported that no staff disciplinary actions have being taken during the lation of the agency's policy of sexual abuse and sexual harassment. ins all of the components of this standard.
Policy Reviewed Prison Rape Elimination A	Act (PREA) 23.1 X (A-D)
STANDARD§115.37 volunteers	7 – Corrective action for contractors and
☐ Exceeds	Standard (substantially exceeds requirement of standard)
⊠ Meets Sta	andard (substantial compliance; complies in all material ways ndard for the relevant review period)
☐ Does Not	Meet Standard (requires corrective action)
Auditor comments, inc	luding corrective actions needed if does not meet standard:

The Marietta RYDC has reported that no cases of volunteer or contractor disciplinary actions have being taken during the past 12 months due to violation of the agency's policy of sexual abuse and sexual harassment. No reports were made to law enforcement or relevant licensing body for a contractor engaging in sexual abuse with a resident. Georgia DJJ policy contains all components of this standard.

Prison Rape Elimination Act (PREA) 23.1 X (E-F)

STANDARD§115.378 – Disciplinary s	sanctions 1	for	residents
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☐ Exceeds Standard (substantially exceeds requirement of standard)

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

 \square Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard:

The Marietta RYDC has reported taking no disciplinary sanction against a resident for resident on resident sexual abuse and sexual harassment in the past 12 months at this facility.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 X (G-I)

STANDARD§115.381 - Medical and Mental Health Screenings; History of Sexual Abuse

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

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ has policy that addresses this standard. The Marietta RYDC has reported that there were 5 residents that had disclosed prior sexual victimizations or previous perpetrated sexual abuse in the past 12 months. They provided documentation that verified that these residents were offered a follow up meeting with medical and mental health personnel within 14 days of their intake.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 XI (A-B)

STANDARD§115.382 – Access to Emergency Medical and Mental Health Services

Exceeds	Standard	(substantiall	v exceeds	s requirement	of	stand	ard)

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

☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
The Marietta RYDC facility reported no cases of sexual abuse requiring medical attention at this facility during the past 12 months and the Marietta RYDC provided a memo demonstrating that access to emergency medical and mental health services would be provided to their residents at Marietta RYDC and at Northside Psychological Services.
Prison Rape Elimination Act (PREA) 23.1 XI (C)
STANDARD§115.383 — Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers
☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:
Georgia DJJ policy addresses the components of this standard. Marietta RYDC provided a memo demonstrating that no resident required ongoing medical and mental health services for sexual abuse in the past 12 months.
Policy Reviewed Prison Rape Elimination Act (PREA) 23.1 XI (D-F)
STANDARD§115.386 - Sexual Abuse Incident Reviews
☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ policy addresses the requirements of the standard. The Marietta RYDC has reported 8 allegations of sexual abuse and sexual harassment during this reporting period. They have had 8 administrative cases requiring a Sexual Abuse Review and have provided documentation of these case reviews. It was recommended that they enhance their Sexual Abuse Review Team minutes by preparing them in a format that is distinguishable from their Transition and Special Management Plan Team meeting minutes. The facility administration accepted and implemented this recommendation.

Prison Rape Elimination Act (PREA) 23.1 XII (A) (1-2)

STANDARD§115.387 – Data	a Collection
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- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ collects uniform data on all allegations of sexual abuse using a standardized instrument. This allows the agency to submit the annual DOJ Survey of Sexual Victimization. This was confirmed through an interview with the agency PREA Coordinator.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 XII (B) (1-2)

STANDARD§115.388 - Data Review for Corrective Action

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

Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ policy mandates the review of aggregate sexual abuse and sexual harassment data to assess and improve the effectiveness of the agency's policies, practices and training. This agency has submitted the annual DOJ Survey of Sexual Victimization and it is posted on their website.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 XII (B) (3-4)

STANDARD§115.389 - Data Storage, Publication, and Destruction

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

Auditor comments, including corrective actions needed if does not meet standard:

Georgia DJJ policy ensures that all sexual abuse data is retained securely. The policy was reviewed and verified through an interview with the PREA Coordinator. All sexual abuse data is retained securely and will be maintained for at least 10 years after the date of the initial collection. The Marietta RYDC provided a memo to verify their compliance with this standard.

Policy Reviewed

Prison Rape Elimination Act (PREA) 23.1 XII (C) (5-6)

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

Auditor Signature:

Jekome K. Williams

Department of Justice Certified PREA Auditor

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