

Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim Final

Date of Interim Audit Report: 11/01/2020 N/A

If no Interim Audit Report, select N/A

Date of Final Audit Report: 11/20/20

Auditor Information

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Company Name: Diversified Consultant Services

Mailing Address: : P.O. Box 452

City, State, Zip: Blackshear, Georgia 31516

Telephone: 678-200-3446

Date of Facility Visit: October 7-9, 2020

Agency Information

Name of Agency: South Carolina Department of Corrections

Governing Authority or Parent Agency (If Applicable): State of South Carolina

Physical Address: 4444 Broad River Rd

City, State, Zip: Columbia, SC 29210

Mailing Address: Click or tap here to enter text.

City, State, Zip: Click or tap here to enter text.

The Agency Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Agency Website with PREA Information: Click or tap here to enter text.

Agency Chief Executive Officer

Name: Bryan P. Stirling

Email: Stirling.Bryan@doc.sc.gov

Telephone: (803) 896-8555

Agency-Wide PREA Coordinator

Name: Kenneth James

Email: James.Kenneth@doc.sc.gov

Telephone: (803) 896-6436

PREA Coordinator Reports to:

Salley Elliott – Chief Legal & Compliance Officer

Number of Compliance Managers who report to the PREA Coordinator:

21

Facility Information

Name of Facility: Evans Correctional Facility

Physical Address: 610 Highway #9 West

City, State, Zip: Bennettsville, SC 29512

Mailing Address (if different from above):

Click or tap here to enter text.

City, State, Zip: Click or tap here to enter text.

The Facility Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Facility Type:

Prison

Jail

Facility Website with PREA Information: <http://www.doc.sc.gov/preaweb/>

Has the facility been accredited within the past 3 years? Yes No

If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):

ACA

NCCHC

CALEA

Other (please name or describe: [Click or tap here to enter text.](#))

N/A

If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:
Security and Program Audit

Warden/Jail Administrator/Sheriff/Director

Name: Donnie Stonebreaker

Email: stonebreaker.donnie@doc.sc.gov

Telephone: (803) 894-4904

Facility PREA Compliance Manager

Name: Frederick B. Hubbard

Email: hubbard.frederick@doc.sc.gov

Telephone: (803) 896-4919

Facility Health Service Administrator N/A

Name: William Smith

Email: smith.william@doc.sc.gov

Telephone: (803) 896-4959

Facility Characteristics

Designated Facility Capacity:

1382

Current Population of Facility:	1125	
Average daily population for the past 12 months:	1210	
Has the facility been over capacity at any point in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Which population(s) does the facility hold?	<input type="checkbox"/> Females <input checked="" type="checkbox"/> Males <input type="checkbox"/> Both Females and Males	
Age range of population:	19-70	
Average length of stay or time under supervision:	1122 days	
Facility security levels/inmate custody levels:	Level 2	
Number of inmates admitted to facility during the past 12 months:	835	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>72 hours or more</i> :	830	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>30 days or more</i> :	735	
Does the facility hold youthful inmates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	Click or tap here to enter text. <input checked="" type="checkbox"/> N/A	
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):	<input type="checkbox"/> Federal Bureau of Prisons <input type="checkbox"/> U.S. Marshals Service <input type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input type="checkbox"/> State or Territorial correctional agency <input type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider <input type="checkbox"/> Other - please name or describe: Click or tap here to enter text. <input checked="" type="checkbox"/> N/A	
Number of staff currently employed by the facility who may have contact with inmates:	155	
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	31	
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:		

Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	0
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	125
Physical Plant	
<p>Number of buildings:</p> <p>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</p>	16
<p>Number of inmate housing units:</p> <p>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	0
Number of single cell housing units:	1
Number of multiple occupancy cell housing units:	5
Number of open bay/dorm housing units:	0
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):	48
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Medical and Mental Health Services and Forensic Medical Exams

Are medical services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are mental health services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Where are sexual assault forensic medical exams provided? Select all that apply.	<input type="checkbox"/> On-site <input checked="" type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.)

Investigations

Criminal Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:	45
When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.	<input type="checkbox"/> Facility investigators <input checked="" type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input checked="" type="checkbox"/> N/A

Administrative Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?	2
When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply	<input checked="" type="checkbox"/> Facility investigators <input checked="" type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input checked="" type="checkbox"/> N/A

Audit Findings

Audit Narrative (including Audit Methodology)

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-onsite audit, onsite audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

Summary of South Carolina Department of Corrections (SCDC) Annual Report 2019

In calendar year 2019, SCDC received 265 reported allegations of sexual abuse/sexual harassment. SCDC Police Services Investigated 195 (74%) allegations of sexual abuse/sexual harassment for criminal intent. Seventy allegations (26%) were investigated by institutional investigators. In total, there were 99 allegations (37%) of inmate-on-inmate abuse and 68 allegations (26%) of staff-on-inmate abuse. Of the 265 allegations, 17 allegations (6%) were substantiated, 144 allegations (54%) were unsubstantiated, 55 allegations (21%) were unfounded, and 49 allegations (19%) cases are ongoing.

SCDC Notable Milestones:

Improvements to SCDC's PREA Risk Screening Application included: The PREA Risk Screening now has added features such as a "List Menu" with dropdown categories added to include: a) "Initial Assessment List"; b) "Reassessment List"; c) a "Location Search" tool which can provide staff with information regarding a certain dorm and if a certain category of inmate is housed there; d) "One-to-One Compatibility Search" which is a very useful tool whereby staff can input two inmate SCDC numbers to determine if two inmates can safely be housed together; and e) a search tool that lets staff know where vulnerable inmates are currently housed to include dorm; room and bunk information. These features further enhance the commitment to provide safe housing, bed, and programming/educational assignments to the inmates at each institution.

Additional PREA-related Forms: SCDC has developed several new forms to ensure complete documentation of PREA cases from start to finish. These new forms will help ensure information is documented so that the mandated Survey of Sexual Violence reports are easier to complete, more useful information is submitted in reports/findings, and all institutions have a consistent format from which to report. These and other new forms will ensure PREA files are complete.

PREA Compliance Manager Comprehensive Investigative Training 2020: The PREA Coordinator's office recently provided all PREA Compliance Managers and their supports with in-depth comprehensive investigative training at SCDC's training academy with 49 attendees. This full day of training consisted of a review of the PCM's role and included speakers from Police Services, the Grievance Branch, Office of General Counsel, and PCMs from audited

institutions to share multidisciplinary information and expertise. An informal testing of the knowledge learned was provided to all attendees, which indicated the training was successful.

Physical Plant Improvements: Shower curtains that are compliant with the PREA Standards were placed in all institutions. These curtains allow privacy for the inmate showering while also enabling correctional staff to monitor the safety of the inmate. In addition, several safety measures were made to several inmate toilet areas to provide the inmate greater privacy while maintaining security. Mirrors were placed in multiple

institutions to increase sexual safety of staff and inmates by improving visibility and minimizing blind spots in the facility.

Pre-audit Preparation

Prior to the onsite portion of the audit, this Auditor had discussions with the PREA Coordinator for the South Carolina Department of Corrections to begin requesting and collecting data relative to the upcoming PREA audit.

Document Request

The auditor completed a document review of the Evans Correctional Institution Pre-Audit Questionnaire (PAQ), applicable policies, procedures, and supplemental information. Telephone calls and emails were exchanged between the PREA Coordinator to discuss logistics for the onsite portion of the audit. The following documentation was requested for the onsite visit:

- Roster of inmates by unit/room
- Roster of inmates with disabilities
- Roster of inmates who were Limited English Proficient (LEP)
- LGBTI inmates
- Inmates who reported sexual abuse
- Inmates who reported sexual victimization during risk screening
- Staff roster by shifts
- Specialized staff roster
- Inmates census the first day of the audit
- A roster of new employees hired in the past 12 months
- 2019 Staffing Plan
- List of contact information for volunteers (if applicable)
- SANE/SAFE point of contact information
- Copies of training acknowledgments for volunteers and contractors (if applicable)

Prior to the on-site visit, the PREA Coordinator reviewed the Pre-Audit Questionnaire (PAQ) and provided evidence in support of standards and substandard. Examples of documentation provided included policies, documents, forms, and memos. Pre-audit information was provided to this Auditor via email before the onsite audit began at Evans Correctional Institution. The visit was scheduled for October 7-9, 2020.

Entrance Briefing and Tour (On-site audit)-First day

The on-site visit for the Prison Rape Elimination Act (PREA) compliance audit of Evans Correctional Institution (CI) was held on October 7-9, 2020 by The Diversified Consulting Services, PREA certified Auditor Sonya Love. The population on the first day of the audit was 1081. The rated capacity is 1382. The age range of the population was 19 and 70. The average population for the last 12 months was 1210. Average length of stay 1122 days.

A meeting took place with the Warden, Associate Wardens/PREA Compliance Manager (PCM), PREA Coordinator, Major and other members of the Evans CI management team. The Auditor outlined her sampling strategy, discussed logistics for the facility tour, interview schedule and the need to review additional policies and supplemental documents. Moreover, the first day of the onsite portion of the audit at Evans Correctional Institution included a facility tour with the Warden, Associate Warden (PCM), PREA Coordinator and Major. Further, the Auditor was provided a private conference room in which to work and to conduct confidential interviews. All requested files and rosters, both staff and inmates were made available to the Auditor for review.

It should also be mentioned that a national pandemic and designated quarantine living units hampered the facility review of all living units and also delayed the publishing of this report. Best efforts were made to conduct this PREA audit in accordance with the PREA Auditor's Handbook dated September 2017.

The auditor interviewed the following categories of specialized and random staff, during the onsite phase of the audit:

Category of Staff Interviewed	# Interviews Conducted
Random Staff	14
Specialized Staff	22
Total Staff Interviewed * some staff were interviewed for both groups	3
Other Staff Interactions During the Facility Tour	
Staff Interactions during the facility tour	4
Staff who refused to be interviewed	0
Total Staff Interviewed	36
Category of Specialized Staff Interviewed	
Agency Contract Administrator	1
Agency PREA Coordinator	1
Intermediate or higher-level facility staff responsible for conducting an unannounced round	1
Agency Contract Administrator	1
Line staff who supervise youthful inmates, if any	0
Staff Interactions during the facility tour	4
Program staff who work with youthful inmates, if any	0
Medical Staff	1
Mental Health Staff	1
Contractors	1
Volunteers	3
Agency investigative staff Assistant Deputy Director of Police Services	1
Agency investigative staff - Assistant Deputy Director of Police Services	1
Staff who perform screening for risk of victimization and abusiveness	1
Staff who supervise inmates in segregated housing	1
Designated staff member charged with monitoring retaliation	1
First responders, security staff	1
First responders, non-security staff	1
Intake staff	1
Total	22

Random staff interviews included random staff from each shift operated at the facility. The facility operates (12) hour shifts for the security personnel.

Site Review

Immediately following the opening meeting, a tour of the facility was completed. The Auditor was escorted throughout the facility by the PREA Coordinator. During the tour, the Auditor reviewed PREA related documentation and materials located on bulletin boards. The Auditor observed camera surveillance, physical supervision, and electronic monitoring capabilities

throughout the facility. Other areas of focus during the tour included, but were not limited to, levels of staff supervision, and limits to cross-gender viewing.

During the facility tour the Auditor noted that PREA related signage was posted in English and in some locations in Spanish. The facility corrected this problem immediately by posting signage in both English and Spanish throughout the facility but especially in common areas such as housing units and multipurpose rooms.

Most inmates that participated in interviews affirmed the ability to shower, dress, and use the toilet without exposing themselves to employees of the opposite gender. Informal and formal conversations with employees and inmates regarding the PREA standards were conducted. Postings regarding how inmates can report PREA violations and the Agency’s zero-tolerance policy for sexual abuse and sexual harassment were prominently displayed in all living units, meeting areas, and throughout the facility.

Audit notice postings with the PREA Auditor's contact information were posted in the same areas. According to inmate interviews the notice of the upcoming audit were posted well in advance of the on-site visit. Inmate interviews confirmed the placement of the PREA notices. Observations noted during the tour:

- The Auditor tested access to outside entities to report abuse was available to inmates on agency’s telephone.

Inmate Interviews

The inmate population on the first day of the audit was (1081) inmates in the facility. were interviewed. Interviews were conducted using the Department of Justice (DOJ) protocols to access inmate's knowledge of PREA and the reporting mechanisms available to them. In accordance with the PREA Auditor Handbook, this Auditor collectively conducted (40) random and targeted interviews with inmates housed at Evans Correctional Institution. Fourteen (14) inmates represented the targeted group which included two (2) self-identified transgenders inmates. The categorical breakdown is as follows:

Category of Inmates Interviewed	# Interviews Conducted
Random inmates	26
Targeted inmates	14
Youthful inmates	0
Total inmates interviewed	40
Targeted Inmate Interviews-Breakdown	# Interviews Conducted
Youthful Inmates	0
Inmates with a Physical Disability	1
Inmates who are Blind, Deaf, or Hard of Hearing	0
Inmates who are Limited English Proficient (LEP)	3
Inmates with a Cognitive Disability	3
Inmates who Identify as Lesbian, Gay , or Bisexual	3
Inmates who Identify as Transgender or Intersex	2
Inmates in Segregated Housing for High Risk of Sexual Victimization	0

Inmates who Reported Sexual Abuse that occurred at the Facility	1
Inmates who Reported Sexual Victimization During Risk Screening	1
Total inmates interviewed	14

Blind spots and safety issues identified during the facility tour were as follows:

Waxhaw A

- Shower #4 needs shower curtain and work order needs to be completed
- Cell windows covered
- Strong cigarette odor

Waxhaw B

- Cell windows covered
- Strong cigarette odor
- Kiosk working thoroughly tested by the Auditor

Cheraw A

- Cell windows covered
- Kiosk working thoroughly tested by the Auditor
- Strong cigarette odor
- Shower curtain in shower #4 on top tier
- Shower #1 shower curtain not long enough, replace with a new curtain
- Top tier dorm lights out near #274 (showers)
- Kiosk working thoroughly tested by the Auditor
- Remove tabletop upper tier

Cheraw B

- Cheraw B 2nd handicap shower not working
- Strong cigarette odor
- Kiosk working thoroughly tested by the Auditor
- Bottom tier shower #1 needs a light and shower curtain
- Cell windows covered

Cherokee A Wing

- Cherokee toilets visible
- Shower light not working
- Shower curtains are needed in shower #3, #4, and #5
- Strong cigarette odor
- Cell windows covered
- Kiosk working thoroughly tested by the Auditor

Cherokee B Wing

- Showers curtains B1, B2 and B8 needed

- Strong cigarette odor
- Cell windows covered

Cherokee C Wing

- Showers curtains C2, C4, C5, and C7 needed
- Strong cigarette odor
- Kiosk working thoroughly tested by the Auditor

Cherokee D Wing

- Showers curtains needed D2
- Strong cigarette odor

Cafeteria

- Half-dome mirror near restrooms
- Half dome mirror on the left side by the serving line

Commissary

- Dome mirror at the beginning of the walkway on the right side near the washer
- Dome mirror at the end of the walkway near the washers

Restricted Housing Unit (RHU) A Wing

- Shower curtains needed
- Review post orders in RHU because the toilets are visible in the CI cells and there are females' officers working the control room that are viewing the cameras

While onsite at the facility, this Auditor reviewed risk assessments that have been completed with inmates when they arrive at the facility. These were randomly chosen by picking a week for arrival and checking all inmates which arrived during that timeframe.

Investigation materials were reviewed during the pre-audit phase. This information was sent to this Auditor prior to arrival at the facility.

Additionally, during the interview with the human resource office, random personnel files were reviewed by choosing those files directly from the drawer in the personnel office as well as training records were printed out from the system and reviewed.

Facility Characteristics

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate, resident or detainee population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Department of Corrections has twenty-one (21) institutions, and they are categorized into four (4) distinct security levels: high security (level 3), medium security (level 2), minimum security (level 1B) and community-based pre-release/work centers (level 1A). The architectural design of the institution, type of housing, operational procedures, and the level of security staffing determine an institution's security level. Inmates are assigned to institutions to meet their specific security, programming, medical, educational, and work requirements.

Evans Correctional Institution is in Bennettsville, South, Carolina. The facility opened in 1989. Evans is a Level 2 male facility. Level 1-B (L1-B) facilities are minimum-security facilities that house inmates with relatively short sentences or time to serve. Housing is mainly double bunk cubicles with unfenced perimeters. Operational procedures at Level 1-B facilities impart a higher level of security compared to level 1-A facilities. LEVEL 2 (L2), facilities are medium-security institutions. Housing is primarily double bunk, cell type with some institutions having double-bunk cubicles. With single-fenced perimeters and electronic surveillance, level 2 institutions provide a higher level of security than level 1 facilities.

Population capacity:	1382
Current population:	1125
Average population:	1210
Number of buildings:	15
Number of single housing units:	1
Number of double occupancy cell housing units:	5
Number of open bays:	0
Number of segregation cells:	48
Number of youthful inmates:	0

Staff

Number of staff who may have contact with inmates:	155
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Education

Literacy, GED preparation, high school courses, and Adult Education classes.

Health Care

Routine medical and dental care on site with 24-hour medical coverage; hospice program.

Vocational Training

Computer (Basic and Advanced), and barbering.

Industries

A private sector industry where electronic components are assembled.

Programs

Religious services, volunteer services, recreational services, Long-Term Offenders Program, and Character Education.

Community Services

Provides an inmate labor crew to the Department of Parks, Recreation and Tourism. Provides an "Operation Behind Bars" program for at risk youth and adults to tour the prison and hear inmates describe what led to their criminal behavior and life inside prison.

Services: Serves as one of the video conferencing sites for parole hearings in conjunction with the SC Department of Probation, Parole and Pardon Services.

Telephone Calls:

Inmates no longer have an approved calling list. Family members and friends of inmates are given the option of setting up prepaid calling accounts using credit cards, checks, money orders or Western Union. Calls that may otherwise be blocked are now completed through GTL's Advance Pay Program.

KIOSK:

The GTL Genesis in-pod Kiosk allows inmates to receive and send electronic messages to family and friends that have created an account on OffenderConnect.com.

National/State Advocacy Organizations

Organization Name	Contact Information
Just Detention International (JDI)	Just Detention International Cynthia Totten, CA Attorney Registration #199266 3325 Wilshire Blvd., Suite 340 Los Angeles, CA 90010
Pee Dee Coalition Against Domestic and Sexual Assault	Hotline 843-669-4600 (247) Toll Free 800-273-1820 Business 843-669-4694
South Carolina Coalition Against Domestic Violence and Sexual	2711 Middleburg Dr, Columbia, SC 29204
National Sexual Violence Resource Center (NSVRC)	2101 N Front Street Governor's Plaza North, Building #2 Harrisburg, PA 17110 717-909-0710 PHONE 717-909-0715 TTY 877-739-3895 TOLL-FREE
South Carolina Victim Witness Assistance Network	PO Box 212863 Columbia, SC 29221 Local: (803) 750-1200 Fax: (888) 965-5634

Summary of Audit Findings

There is a well-established zero-tolerance culture throughout the institution with documentation addressing all areas of PREA and the inmates interviewed confirmed this fact. The agency,

South Carolina Department of Correction (SCDC), maintains agency policies and the institution has developed more institution specific PREA supplements. A random review of employee training files established compliance with PREA training mandates and revealed that hiring and promotion practices are consistent with sexual abuse safety measures. From the pre-audit phase to the completion of the on-site visit, the agency and administrative staff were very professional.

Staff Interviews

Interviews with random and specialized staff confirmed that Evans Correctional Institution's staff understood the agency position regarding the Prison Rape Elimination Act (PREA). Random and specialized staff were all knowledgeable about their roles in the prevention, reporting, and detection of sexual abuse and sexual harassment, and their responsibilities in the event of a PREA related incident, particularly as a first responder. It should be mentioned that a considerable portion of random security staff interview for this audit indicated segregation as the initial location to house a victim of sexual abuse to protect the individual from the abuser.

Staff members (100%) interviewed during the audit were able to verbalize the steps they would take if they were the first responder to a PREA related incident. Reporting mechanisms were displayed in all common areas and throughout the facility. A review of the Evans Correctional Institution staff training curriculum was completed by the Auditor. The training records support the finding that all staff have received general PREA training.

Inmate Interviews

Interviews with inmates revealed that they fully understand PREA safeguards and the facility's zero-tolerance policy. Comprehensive inmate PREA education is provided in written form (i.e. Evans Inmate Orientation Manual), personal instruction, videos, and posters. Inmates (Random and Targeted) acknowledged that the intake admission screening process included questions regarding any history of sexual abuse or victimization, whether they would like to identify a sexual preference, physical build, and history of violent behavior. Inmates sampled during the audit, confirmed that they were made aware of how to report sexual abuse by: Telling a trusted staff, filing a grievance, using the PREA hotline, or through a third-party reporter.

Random and targeted inmates expressed trust in the staff, and they felt comfortable reporting sexual abuse and harassment to facility staff such as the Major, PREA Compliance Manager, Chaplain and Assistant PREA Compliance Manager. Twenty-two (22%) percent of inmates were very aware of the services provided by the local victim advocacy organization. Conversely, seventy-eight percent (78%) of inmate had a vague knowledge of community advocacy services available to victims of abuse, but each knew how to obtain more information about advocacy services from a Unit Team member in the facility or from information posted on their living units.

Summary of Audit Findings

The summary should include the number and list of standards exceeded, number of standards met, and number and list of standards not met.

Auditor Note: No standard should be found to be “Not Applicable” or “NA”. A compliance determination must be made for each standard.

Standards Exceeded

Number of Standards Exceeded: 0
List of Standards Exceeded: 0

Standards Met

Number of Standards Met: 44

Standards Not Met

Number of Standards Not Met: 0
List of Standards Not Met: 0

Corrective Actions:

Standard 115.13: Supervision and monitoring

Problematic, in circumstances where the staffing plan was not complied with, the facility failed to fully document and justify all deviations from the staffing plan as mandated in this standard. To correct the problem, Evans reviewed this standard, re-trained staff security managers regarding the necessity to document all deviations from the staffing plan in accordance with this standard. More, the PCM reminded security manager and specialized staff to notate in and out times with AM/PM and to sign in and out consistently. The facility lacks the resources given the pandemic, active quarantines, the of the proximity of the federal prison in Edgefield SC and location of the facility to commit to ensure adherence to the staffing plan. The Auditor was provided documented evidence that Evans now documents all deviations from the facility staffing plan. The Auditor examined a SCDC Statewide Management Information documents sent by Evans notifying the agency of staffing deviations on 8/4/20, 8/22/20, 8/25/20 10/06/20, and 11/9/2020. Likewise, Evans adopted an Unannounced round sheet that required security managers to circle AM or PM rounds.

Evans Correctional Institution’s Corrective Action Plan, training on PREA Standards 115.13, 115.35, 115.41, 115.43, 115.52, & 115.83 was held virtually by, Kenneth L. James, SCDC Agency Coordinator, specifically addressing the items listed on pages 15-17 of the interim PREA Audit Report. The below documents were provided to the attendees and an attendance roster was provided.

Documents reviewed:

SCDC Policy GA-01.12 “Inmate Grievance System
SCDC Policy GA-0611 “Prevention, Detection, and Response to Sexual Abuse/Sexual Harassment
SCDC Policy GA-06.11b “Applying the Prison Rape Elimination Act”
SCDC Policy OP-22.23 “State-wide Protective Custody”
SCDC Policy OP-21.04 “Inmate Classification Plan”
Prison Rape Elimination Act, National PREA Standards- Prisons and Jails

Subjects discussed:

Adherence to the institutional staffing plan
Unannounced Rounds
Specialized Training for Medical and Mental Health Practitioners
Initial and Reassessment for Vulnerabilities (72 hour and 30-day requirements)
Involuntary Segregation following a PREA allegation - 24-hour assessments and 30-day reviews
Emergency Grievances- Substantial risk of imminent sexual abuse
Mental Health evaluations within 60 days of learning abuse histories of potential predators

It should be noted: The PREA Coordinator has scheduled a meeting with the SCDC Deputy of Operations to discuss an increase to the budget as incentive for employment of correctional staff and to potentially offset larger more competitive salary packages being offered by other correctional facilities located in the surrounding area.

Standard 115.35: Specialized training: Medical and mental health care

The Auditor sampled evidence of the completion of general PREA training and specialized training files for thirteen (13) medical and mental health practitioners, as part of the audit process. Problematic, medical, and mental health practitioners specialized medical training documents revealed that 30% of the required training occurred prior to the onsite audit of the facility and 70% of specialized training occurred because of a corrective action. Evans provided the Auditor with documented evidence that all full and part-time medical and mental health practitioners completed specialized training as required in this standard. Evans now maintains documentation that medical and mental health professionals have received the specialized training referenced in Standard 115.35. The assessments sampled totaled forty-four (44). Problematic, the samples indicated screening dates beyond 72 hours. Zero inmates were reassessed within 30 days of arrival or transfer to the facility. Factors outlined in 115.41 (d) were not considered based on evidence gleaned from the SCDC PREA Screening Checklist, as examined by the Auditor. During the onsite portion of the audit, the PREA Compliance Manager quickly called a meeting with intake staff, and the Qualified Mental Health Practitioner (QMHP). All inmates were rescreened, and appropriate referrals made to the QMHP.

Evans Correctional Institution's Corrective Action Plan, training on PREA Standards 115.13, 115.35, 115.41, 115.43, 115.52, & 115.83 was held virtually by Kenneth L. James, SCDC Agency PREA Coordinator, specifically addressing the items listed on pages 15-17 of the interim PREA Audit Report. The below documents were provided to the attendees and an attendance roster was provided, as requested (see attachment).

Documents reviewed:

SCDC Policy GA-01.12 "Inmate Grievance System"
SCDC Policy GA-0611 "Prevention, Detection, and Response to Sexual Abuse/Sexual Harassment"
SCDC Policy GA-06.11b "Applying the Prison Rape Elimination Act"
SCDC Policy OP-22.23 "State-wide Protective Custody"
SCDC Policy OP-21.04 "Inmate Classification Plan"
Prison Rape Elimination Act, National PREA Standards- Prisons and Jails

Subjects discussed:

Adherence to the institutional staffing plan
Unannounced Rounds
Specialized Training for Medical and Mental Health Practitioners

Initial and Reassessment for Vulnerabilities (72 hour and 30-day requirements)
Involuntary Segregation following a PREA allegation- 24-hour assessments and 30-day reviews
Emergency Grievances- Substantial risk of imminent sexual abuse
Mental Health evaluations within 60 days of learning abuse histories of potential predators

Standard 115.41: Screening for risk of victimization and abusiveness

The Auditor reviewed a second sample of thirty (30) PREA screening assessments from October 8, 2020 to - November 5, 2020, to determine compliance with this standard. Evans completed each assessment on the same day and reassessments within 30 days. The Auditor also determined that when appropriate, inmates with histories of victimizations, abusiveness or acute distress within the last 30 days were referred to mental health for further assessment. It should be mentioned, 40% of inmates assessed with factors suggestive of vulnerability or abusiveness decline a mental health referral. More, PREA assessment documents show that inmates sampled gave justifications for declining a mental health referral such as: already on the mental health caseload, and not willing to discuss the matter.

In the past 12-month period, two (2) inmates were initially placed in involuntary segregation after reporting a PREA allegation. Documentation of an initial assessment and any attempts to locate alternative living accommodations in the facility were not well documented. The inmates remained in RHU for greater than 24 hours. The PREA Coordinator will re-train all security managers, the QMHP, PREA Compliance Manager and Warden regarding Standard 115.43, governing involuntary segregated housing for Inmates at high risk for sexual victimization and, documentation, of 30-day reviews for compliance with this standard. The PREA Coordinator will document the training and provide the Auditor with a roster with printed names and signatures of said staff.

Evans Correctional Institution's Corrective Action Plan, training on PREA Standards 115.13, 115.35, 115.41, 115.43, 115.52, & 115.83 was held virtually by, Kenneth L. James, SCDC Agency PREA Coordinator, specifically addressing the items listed on pages 15-17 of the interim PREA Audit Report. The below documents were provided to the attendees and an attendance roster was provided.

Documents reviewed:

SCDC Policy GA-01.12 "Inmate Grievance System"
SCDC Policy GA-0611 "Prevention, Detection, and Response to Sexual Abuse/Sexual Harassment"
SCDC Policy GA-06.11b "Applying the Prison Rape Elimination Act"
SCDC Policy OP-22.23 "State-wide Protective Custody"
SCDC Policy OP-21.04 "Inmate Classification Plan"
Prison Rape Elimination Act, National PREA Standards- Prisons and Jails

Subjects discussed:

Adherence to the institutional staffing plan
Unannounced Rounds
Specialized Training for Medical and Mental Health Practitioners
Initial and Reassessment for Vulnerabilities (72 hour and 30-day requirements)
Involuntary Segregation following a PREA allegation- 24-hour assessments and 30 day reviews
Emergency Grievances- Substantial risk of imminent sexual abuse
Mental Health evaluations within 60 days of learning abuse histories of potential predators

Standard 115.43: Protective Custody

In the past 12-month period, two (2) inmates were initially placed in involuntary segregation after reporting a PREA allegation. Documentation of an initial assessment and any attempts to locate alternative living accommodations in the facility were not well documented. The inmates remained in RHU for greater than 24 hours. The PREA Coordinator will re-train all security managers, the QMHP, PREA Compliance Manager and Warden regarding Standard 115.43, governing involuntary segregated housing for Inmates at high risk for sexual victimization and, documentation, of 30-day reviews for compliance with this standard. The PREA Coordinator will document the training and provide the Auditor with a roster with printed names and signatures of said staff.

Evans Correctional Institution's Corrective Action Plan, training on PREA Standards 115.13, 115.35, 115.41, 115.43, 115.52, & 115.83 was held virtually by, Kenneth L. James, SCDC Agency PREA Coordinator, specifically addressing the items listed on pages 15-17 of the interim PREA Audit Report. The below documents were provided to the attendees and an attendance roster was provided.

Documents reviewed:

SCDC Policy GA-01.12 "Inmate Grievance System"
SCDC Policy GA-0611 "Prevention, Detection, and Response to Sexual Abuse/Sexual Harassment"
SCDC Policy GA-06.11b "Applying the Prison Rape Elimination Act"
SCDC Policy OP-22.23 "State-wide Protective Custody"
SCDC Policy OP-21.04 "Inmate Classification Plan"
Prison Rape Elimination Act, National PREA Standards- Prisons and Jails

Subjects discussed:

Adherence to the institutional staffing plan
Unannounced Rounds
Specialized Training for Medical and Mental Health Practitioners
Initial and Reassessment for Vulnerabilities (72 hour and 30-day requirements)
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Emergency Grievances- Substantial risk of imminent sexual abuse
Mental Health evaluations within 60 days of learning abuse histories of potential predators

Standard 115.52: Exhaustion of administrative remedies

During this audit period, the Auditor determined by examination that one inmate filed a PREA related emergency grievance that he was in substantial risk of imminent sexual abuse. The emergency grievance was initiated by John Doe #2 on 10/15/19 and received by the Inmate Grievance Coordinator on 10/16/19. The Inmate Grievance Coordinator sought guidance on how best to process the complaint on 10/30/19. Problematic, after receiving an emergency grievance described above, SCDC/Evans failed to provide an initial response within 48 hours nor was a final decision issued within 5 days of the filing of the emergency grievance. SCDC will re-train Evans staff such as the PREA Compliance Manager, Assistant PREA Compliance Manager and Inmate Grievance Coordinator on Standard 115.52. The PREA Coordinator will provide the Auditor with documented evidence of re-training of staff on this standard.

Evans Correctional Institution's Corrective Action Plan, training on PREA Standards 115.13, 115.35, 115.41, 115.43, 115.52, & 115.83 was held virtually by, Kenneth L. James, SCDC Agency PREA Coordinator, specifically addressing the items listed on pages 15-17 of the interim PREA Audit Report. The below documents were provided to the attendees and an attendance roster was provided.

Documents reviewed

:

SCDC Policy GA-01.12 "Inmate Grievance System"
SCDC Policy GA-0611 "Prevention, Detection, and Response to Sexual Abuse/Sexual Harassment"
SCDC Policy GA-06.11b "Applying the Prison Rape Elimination Act"
SCDC Policy OP-22.23 "State-wide Protective Custody"
SCDC Policy OP-21.04 "Inmate Classification Plan"
Prison Rape Elimination Act, National PREA Standards- Prisons and Jails

Subjects discussed:

Adherence to the institutional staffing plan
Unannounced Rounds
Specialized Training for Medical and Mental Health Practitioners
Initial and Reassessment for Vulnerabilities (72 hour and 30-day requirements)
Involuntary Segregation following a PREA allegation - 24-hour assessments and 30-day reviews
Emergency Grievances - Substantial risk of imminent sexual abuse
Mental Health evaluations within 60 days of learning abuse histories of potential predators

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

Evans did not attempt to conduct a mental health evaluation within 60 days of learning of such abuse history and offer treatment of the sample participants and known inmate-on-inmate abusers when deemed appropriate by mental health practitioners and indicated in this standard. Since the onsite audit, the agency has hired a second mental health practitioner who has begun work in the facility. Evans hired a second mental health practitioner. A second sample of inmate evaluations indicated that Evans now complies with this standard. SCDC has created a position termed a Mental Health Service Coordinator to triage inmates sexual abuse victims and abusers to conduct a mental health evaluation.

Evans Correctional Institution's Corrective Action Plan, training on PREA Standards 115.13, 115.35, 115.41, 115.43, 115.52, & 115.83 was held virtually by, Kenneth L. James, SCDC Agency PREA Coordinator, specifically addressing the items listed on pages 15-17 of the interim PREA Audit Report. The below documents were provided to the attendees and an attendance roster was provided.

Documents reviewed:

SCDC Policy GA-01.12 "Inmate Grievance System"
SCDC Policy GA-0611 "Prevention, Detection, and Response to Sexual Abuse/Sexual Harassment"
SCDC Policy GA-06.11b "Applying the Prison Rape Elimination Act"
SCDC Policy OP-22.23 "State-wide Protective Custody"
SCDC Policy OP-21.04 "Inmate Classification Plan"
Prison Rape Elimination Act, National PREA Standards- Prisons and Jails

Subjects discussed:

Adherence to the institutional staffing plan
Unannounced Rounds
Specialized Training for Medical and Mental Health Practitioners
Initial and Reassessment for Vulnerabilities (72 hour and 30-day requirements)
Involuntary Segregation following a PREA allegation - 24-hour assessments and 30-day reviews
Emergency Grievances- Substantial risk of imminent sexual abuse

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? Yes No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? Yes No

115.11 (b)

- Has the agency employed or designated an agency - wide PREA Coordinator? Yes No
- Is the PREA Coordinator position in the upper- level of the agency hierarchy? Yes No
- 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 No

115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) Yes No 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.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment issued October 24, 2014 supports Standard 115.11 pursuant to the Prison Rape Elimination Act (PREA). Other applicable state and federal statutes include: Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended.

The agency elected to take a zero-tolerance position against sexual abuse and sexual harassment of inmates in their custody. The South Carolina Department of Corrections has instituted a zero-tolerance policy in relation to PREA within all (21) correctional Institutes under its supervision. This policy indicates that sexual abuse by staff on inmates or by one inmate to another inmate is strictly prohibited. Additional policies have been put into place to prevent, detect, and respond to sexual abuse and sexual harassment.

The South Carolina Department of Corrections (SCDC) employs and designated an agency wide PREA Coordinator. The PREA Coordinator, is responsible for the oversight of one PREA Compliance Manager (PCM) at each facility in the SCDC system. The position of PREA Coordinator position is in the upper level of the SCDC agency hierarchy. Further the position of PREA Coordinator reports directly to the Chief Legal & Compliance Officer/Director's PREA designee. The new PREA Coordinator assumed his position as PREA Coordinator in April 2019.

Evans Correctional Institution has designated a PREA Compliance Manager (PCM). The Associate Warden was designated by the facility Warden to serve as the PCM for this facility. During an interview with the Associate Warden, indicated that he has sufficient time to complete all the PREA responsibilities. The Associate Warden is also assisted by the facility Major and an Administrative Sargent as well as other support staff to accomplish all PREA related responsibilities. SCDC met the requirements of Standard 115.11. The Auditor conducted an interview with the PREA Coordinator. During his interview, the PREA Coordinator confirmed that he has sufficient time and resources to PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all its facilities.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. NEO Employee PREA Training Curriculum, Agency Orientation, Section 1800, and Sign-in sheets

5. Inmate Orientation Manual
6. Organizational Chart
7. Interviews with the following:
 - a. PREA Coordinator
 - b. Associate Warden, Operations, PREA Compliance Manager (PCM)
 - c. Chief Legal & Compliance Officer

Corrective action: None required

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to 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 inmates.) Yes No NA

115.12 (b)

- 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 inmates.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The agency and Evans Correctional Institution meet the requirements of this standard. An interview with the Warden, Associate Warden/PCM, and the Evans Correctional Institution PAQ substantiates that the agency and facility require contractual entities which they contract for the confinement of inmates (privatized prisons and/or inmate re-entry centers) to adopt and comply with the PREA standards. The PREA Compliance Manager confirmed that the agency's contractual agreements were modified, to incorporate the language requiring contractors to adopt and comply with PREA standards. The agency has a contract for the confinement of inmates with a private agency. Language in the contract between SCDC and private contractor confirms that the contractual entity has an obligation to comply with PREA standards. At the time of this onsite audit, the SCDC did not have any inmates out of the state in other facilities. SCDC met the requirements of Standard 115.12.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. Interviews with the following:
 - a. PREA Coordinator
 - b. Associate Warden, PREA Compliance Manager (PCM)

Corrective action: None required

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)

- Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the

staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies? Yes No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift? Yes No NA
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? Yes No

115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)
 Yes No NA

115.13 (c)

- 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 No
- 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 No
- 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 No

115.13 (d)

- Has the facility/agency 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? Yes No
- Is this policy and practice implemented for night shifts as well as day shifts? Yes No
- Does the facility/agency 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 functions of the facility? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

According to the PREA Resource Center and the Frequently Asked Questions, the PREA standards do not mandate specific minimum staffing ratios for adult and non-secure juvenile settings. For prisons, jails, and juvenile facilities, the standards require that agencies consider 1) generally accepted practices; 2) judicial findings of inadequacy; 3) findings of inadequacy from federal investigative agencies; 4) findings of inadequacy from internal or external oversight bodies; 5) all components of the facility’s physical plant (including “blind spots,” or areas where staff or residents may be isolated); 6) composition of the inmate/resident population; 7) number and placement of supervisory staff; 8) number and types of programs occurring on a particular shift; 9) applicable state or local laws, regulations, or standards; 10) prevalence of substantiated and unsubstantiated incidents of sexual abuse; and 11) any other relevant factors. 28 C.F.R. §§ 115.13(a) and 115.313(a).

SCDC Evans Correctional Institution documented staffing plan address Standard 115.13. The staffing plan outlines Evans Correctional Institution’s best effort to provide for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse. The staffing plan and information guide includes the facility organization chart, demographics, staffing patterns, establishes post assignments, includes a compliance staffing plan checklist, deviation processes, and PREA Coordinated Response Protocol. The staffing plan identified 24 blind spots throughout the facility. Based on the Auditor’s review of the staffing plan, Evans strategy to address the blind spots included: heightened officer awareness and the recognition of the locations of the blind spots to minimize or eliminated the potential problem. More, Evans also place convex safety lens in blinds spots to improve visibility and sight lines. On 8/24/20, the Warden approved the facility staffing plan.

The Auditor interviewed the PREA Coordinator to confirm that in the past 12 months, Evans Correctional Institution has consulted with the agency PREA Coordinator to assessed, determined, and documented whether adjustments are needed to the facility staffing plan. More, that the Evans staffing plan included factors such as the deployment of additional video monitoring technologies, and resources the facility has available to commit to ensure adherence to the staffing plan.

The Auditor examined several months of staff rosters. Problematic, in circumstances where the staffing plan was not complied with, SCDC and Standard 115.13 (b) requires the facility to document and justify all deviations from the plan.

The Evans Final Report 2020 indicates:

Total Staff Positions	257
Total Filled	159
Staff Vacancy	98
Security	193
Security Vacancy	84

Evans calculated minimum staffing level is a concerning. The staffing plan assigns 2 security staff to each living unit. As mentioned in the staffing plan it excludes a relief factor for annual leave, sick leave, military leave and SCDC requisite training.

The Shift Duty Roster, post assignments for the week of November 17- 23rd, 2019, indicated one (1) officer was assigned to each general population living unit, with a designated unit population of 242 inmates. The same roster confirmed the overall security staff assigned to work the shift shows between 15-18 officers. The overall security tally was inclusive of staff with designations of annual leave, sick leave, military leave, unauthorized leave, or a designation of community hospital assignment.

The Shift Duty Roster, post assignments for the week of December 1-7th, 2019, indicated one (1) officer was assigned to each general population living unit with a designated unit population of 242 inmates. The same roster confirmed security staff assigned to work the shift ranged between 14-18 officers. The overall security tally was inclusive of staff with designations of annual leave, sick leave, military leave, unauthorized leave, or a designation of community hospital assignment.

The Shift Duty Roster, post assignments for the week of March 8-14th, 2020, indicates one (1) officer was assigned to each general population living unit with a designated unit population of 242 inmates. The same roster confirmed security staff assigned to work the shift ranged between 12-18 officers. The overall security tally was inclusive of staff with designations of annual leave, sick leave, military leave, unauthorized leave, or a designation of community hospital assignment.

The Shift Duty Roster, post assignments for the week of August 23-29th, 2020, indicates one (1) officer was assigned to each general population living unit with a designated unit population of 242 inmates. The same roster confirmed security staff assigned to work the shift ranged between 13-18 officers. The overall security tally was inclusive of staff with designations of annual leave, sick leave, military leave, unauthorized leave, or a designation of community hospital assignment.

Staff vacancy rates are due in part to the location of the facility (rural), big city employment competition, and the pandemic. Problematic, in circumstances where the staffing plan was not complied with, the facility failed to document and justify all deviations from the staffing plan as mandated by SCDC. To correct the problem Evans, reviewed the deviations from the staffing plan, re-trained staff security managers and provided the Auditor with documented evidence of re-training.

SCDC has a process in place to recruit staff to the agency. The Auditor determined by examination the agency is continuously seeking qualified individuals statewide who have a passion for providing the highest

quality service in a secure environment. South Carolina Department of Corrections is the second largest state agency with over 5,000 employees with 21 institutions across the state. Employees are driven by the SCDC mission that is geared towards providing community wide Safety, Service and Stewardship. As a part of the corrective action for this standard, SCDC continues to seek eligible applicants to fill vacancies throughout statewide and make its best effort to comply with this standard.

The agency 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 on all shifts including night shift. More, the same policy prohibits staff from alerting other staff members when supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the facility. The Auditor examined unannounced rounds for the week of November 17- 23rd, 2019, December 1-7th, 2019, March 8-14th, 2020 and August 23-29th, 2020.

The Auditor found that the facility staffing plan considered the eleven factors cited in this standard but deviations from the staffing plan were not documented as required in this standard. After corrective action, Evans met the requirements for Standard 115.13.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. Interviews with the following:
PREA Coordinator
Associate Warden, PREA Compliance Manager (PCM)
2. SCDC, Personnel System, Duty Roster System, Shift Duty Roster, Evans Correctional Institution, dates November 17- 23rd, 2019.
4. SCDC, Personnel System, Duty Roster System, Shift Duty Roster, Evans Correctional Institution, dates December 1-7th, 2019.
5. SCDC, Personnel System, Duty Roster System, Shift Duty Roster, Evans Correctional Institution, dates March 8-14th, 2020.
6. SCDC, Personnel System, Duty Roster System, Shift Duty Roster, Evans Correctional Institution, dates August 23-29th, 2020.
7. Unannounced rounds for Evans Correctional Institution, dates December 1-7th, 2019.
8. Unannounced rounds for Evans Correctional Institution, dates November 17- 23rd, 2019
9. Unannounced rounds for Evans Correctional Institution, dates March 8-14th, 2020
10. Unannounced rounds for Evans Correctional Institution, dates August 23-29th, 2020

Corrective Action:

Standard 115.14: Youthful inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Evans Correctional Institution does not house inmates under the age of 18. The PREA Coordinator and PREA Compliance Manager both confirmed that the facility does not house youthful inmates. Evans Correctional Institution met the requirements of Standard 115.14.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire

2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. Interview with the following
 - a. PREA Coordinator
 - b. Associate Warden, PREA Compliance Manager (PCM)

Corrective action: None required

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.15 (a)

- 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 No

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)
 Yes No NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.) Yes No NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) Yes No NA

115.15 (d)

- Does the facility have policies that enables inmates 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 No

- Does the facility have procedures that enables inmates 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 No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? Yes No

115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? Yes No
- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, 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? Yes No

115.15 (f)

- 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 No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs
 Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of

Corrections, Policy, OP-22.19, Searches of Inmates; South Carolina Department of Corrections, Policy, GA-06.09, Care and Custody of Transgender Inmates and Inmates Diagnosed with Gender Dysphoria; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address Standard 115.15.

Staff (specialized and random) interviewed (100%) confirmed that the facility refrains from conducting any cross-gender strip or cross-gender visual body cavity search, except in exigent circumstances or when such viewing is incidental to routine cell checks. Random and specialized staff (100%) interviewed during the audit affirmed if applicable Evans would document all cross-gender strip searches and cross-gender visual body cavity searches.

Random staff (100%) interviewed denied conducting a cross-gender strip search or cross gender visual body cavity search in the past 12 months. Furthermore, staff (specialized and random) were able to provide the Auditor with at least one example of an exigent circumstance which could precipitate the need for a cross-gender strip or body cavity search such as a mass fentanyl overdose or disturbance.

Moreover, the PREA Compliance Manager and Major, also confirmed that the facility refrains from conducting any cross-gender strip or cross-gender visual body cavity search, except in exigent circumstances or by medical practitioners. In exigent circumstances the facility would document all cross-gender strip searches and cross-gender visual body cavity searches.

Interviews conducted with two (2) self-identified transgender inmates indicated zero incidents of cross-gender strip or cross-gender visual body cavity searches in the past 12-months. Further, each transgender inmate confirmed that Evans staff conducted security searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with the security needs of the facility. Furthermore, the same transgender inmates also denied being searched or physically examined for the sole purpose of determining the inmate's genital status.

Staff (random and targeted) (100%) interviewed at the facility were aware of the facility/Agency prohibition to search a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Staff were aware that an inmate's genital status could be determined in a myriad of manners, 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. During the onsite portion of this audit there were zero intersex inmates assigned to the facility.

Evans inmates (100%) (random and targeted) denied being subject to a cross-gender strip search or cross-gender visual body cavity search by the facility. Evans has policies and procedures that should enable inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia. The Auditor inspected each housing unit and confirmed that inmates have individual shower stalls with the goal being to provide a measure of privacy for all inmates.

During the past 12 months, the PAQ indicated there were zero cross-gender strip or cross-gender visual body cavity searches of an inmate by staff at Evans Correctional Institution. The PREA Compliance Manager confirmed documentation contained in the PAQ under this standard and indicated zero exigent circumstances that required opposite gender searches as described in Standard 115.15.

The facility, Evans Correctional Institution has conducted training as required in Standard 115.15 (f). SCDC utilizes the training curriculum provided by the PREA Resource Center termed Guidance in Cross-Gender and Transgender Pat-Searches. This training was designed to be used in a 3.5-hour session. Through completing all parts of the training, Evans corrections staff developed skills for performing cross-gender pat searches and searches of transgender and intersex inmates per PREA Standards §115.15(f). Specifically, correctional staff training using the Guidance in Cross-Gender and Transgender Pat-Searches curriculum included:

- 1). Learning the relevant PREA Standards for cross-gender pat searches and for searches of transgender and intersex inmates and residents.
- 2). Understanding and apply the definition of exigent circumstances.
- 3.) Learning and understanding key terms relevant to conducting appropriate searches and considerations for searches of transgender or intersex inmates and residents.
- 4.) Practicing the steps of cross-gender pat searches and searches of transgender or intersex inmates and residents; and
- 5.) Observing, analyzing, and providing feedback to correctional peers on practical application of searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

Training documentation from the training academy were reviewed on site and over the internet in the form of electronic training files and review of applicable training curriculums. It should be noted that search training is not offered during the NEO for new employees. Search training is completed by security staff at the training academy. Interviews with random and specialized staff (100%) confirmed that staff were trained regarding how to appropriately search inmates at the facility in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Interviews with inmates self-identified as transgender also confirmed that Evans staff conduct searches of transgender inmates the least intrusive manner possible, consistent with security needs at the facility.

The facility has policies in place that should enable inmates 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. In some instances, shower stalls were solid doors, or the doors physically obscure the visual inspection of showers to prevent sexual abuse. During the facility tour the Auditor noted the following as it pertains to this standard:

The Facility Tour:

Waxhaw A

- Shower #4 needs shower curtain and work order needs to be completed
- Cell windows covered
- Strong cigarette odor

Waxhaw B

- Cell windows covered
- Strong cigarette odor
- Kiosk working thoroughly tested by the Auditor

Cheraw A

- Cell windows covered
- Kiosk working thoroughly tested by the Auditor
- Strong cigarette odor
- Shower curtain in shower #4 on top tier
- Shower #1 shower curtain not long enough, replace with a new curtain
- Top tier dorm lights out near #274 (showers)
- Kiosk working thoroughly tested by the Auditor
- Remove tabletop upper tier

Cheraw B

- Cheraw B 2nd handicap shower not working
- Strong cigarette odor
- Kiosk working thoroughly tested by the Auditor
- Bottom tier shower #1 needs a light and shower curtain
- Cell windows covered

Cherokee A Wing

- Cherokee toilets visible
- Shower light not working
- Shower curtains are needed in shower #3, #4, and #5
- Strong cigarette odor
- Cell windows covered
- Kiosk working thoroughly tested by the Auditor

Cherokee B Wing

- Showers curtains B1, B2 and B8 needed
- Strong cigarette odor
- Cell windows covered

Cherokee C Wing

- Showers curtains C2, C4, C5, and C7 needed
- Strong cigarette odor
- Kiosk working thoroughly tested by the Auditor

Cherokee D Wing

- Showers curtains needed D2
- Strong cigarette odor
- Cell windows covered

Cafeteria

- Half-dome mirror near restrooms
- Half dome mirror on the left side by the serving line

Commissary

- Dome mirror at the beginning of the walkway on the right side near the washer
- Dome mirror at the end of the walkway near the washers

Restricted Housing Unit (RHU) A Wing

- Shower curtains needed
- Review post orders in RHU because the toilets are visible in the CI cells and there are females' officers working the control room that are viewing the cameras

The PREA Compliance Manager indicated during his interview that the facility requires staff of the opposite gender to announce their presence when entering an inmate housing unit. Likewise, during interviews with random and specialized staff, each employee individually affirmed that opposite gender staff are required to announce their presence when entering an inmate housing unit.

Inmates (random and targeted) were interviewed during the onsite portion of this audit, to determine if staff of the opposite gender are announcing their presence when entering a male housing unit met with mixed opinions. Of the inmates interviewed 88% agreed with Evans staff and validated opposite gender staff are announcing their presence when entering an inmate housing unit. The remaining 12% of inmates interviewed said that they were either not listening, asleep, not on the unit or that some staff simply omitted making the announcement as required by the facility and Agency. After corrective action, Evans Correctional Institution met the requirements for Standard 115.15.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, OP-22.19, Searches of Inmates
4. South Carolina Department of Corrections, Policy, GA-06.09, Care and Custody of Transgender Inmates and Inmates Diagnosed with Gender Dysphoria
5. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
6. Interviews with the following:

- a. Associate Warden, PREA Compliance Manager (PCM)
 - b. Major
 - c. Inmates (targeted)
 - d. Staff interviews (random)
 - e. PREA Coordinator
 - f. Assistant PREA Compliance Manager
- 7. Training files
 - 8. Training curriculum

Corrective action: As a result, the 2020 staffing plan, security staff are more aware of blind spots. Heightened awareness enhances sexual safety in the facility. Evans also added convex security lenses located throughout the facility and improve sightlines, visibility, and safety. Likewise, security staff are making rounds checking for placement of impediments that cover windows obscuring visual inspection, except in exigent circumstances. Completed

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

- Does the agency take appropriate steps to ensure that inmates 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: inmates who are deaf or hard of hearing? Yes No
- Does the agency take appropriate steps to ensure that inmates 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: inmates who are blind or have low vision? Yes No
- Does the agency take appropriate steps to ensure that inmates 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: inmates who have intellectual disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates 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: inmates who have psychiatric disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates 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: inmates who have speech disabilities? Yes No

- Does the agency take appropriate steps to ensure that inmates 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 No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? Yes No
- 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 No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? Yes No

115.16 (b)

- 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 inmates who are limited English proficient? Yes No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No

115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, OP-21.04, Inmate Classification Plan; and Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address the requirements in Standard 115.16.

Specifically, SCDC, Policy OP-21.12, section 1.1.3 states that inmate orientation and orientation materials will be provided in formats which are accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. (4-4281-1).

Evans Correctional Institution takes appropriate steps to ensure that inmates with physical, intellectual disabilities or limited reading skills all have an opportunity to participate in and benefit from the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Measures to assist LEP inmates include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. The facility has also taken steps to provide a PREA informational platform for blind, legally blind or inmates with low visual acuity by either reading the information to the inmate or providing access to Braille in English and Spanish.

Evans has at its disposal multilingual staff who speak different languages to include Spanish. Further, the agency has a contract with Language-Line Solutions to provide interpretive services for non-English speaking inmates. During staff interviews all staff (random and specialized) were aware that the facility has a contractual agreement with an interpretive service. However, the same staff were unaware of how to obtain access to the interpretive service. Evans immediately corrected this problem by posting contact information in the control rooms for easy access and providing the same information to all security managers and shift supervisors.

SCDC, Policy OP-21.12, states, in addition to the education outlined above, each SCDC facility will ensure that key information, including information about the right to be free from sexual abuse and sexual harassment, and how to make a report, is continuously and readily available or visible to inmates through posters and other written formats.

During the facility tour the Auditor noted that English and Spanish versions of PREA related information was visible on all living units. Informational material related to victim advocacy was consistently displayed on each living unit in Spanish and English. The Auditor interviewed

three (3) LEP (Spanish) inmates during the audit. With some assistance each inmate confirmed that he received PREA education in a language they understood.

Several other documents were submitted to and reviewed by the Auditor such as PREA brochures, bulletin board postings, written in English and Spanish. Based on specialized staff interviews, inmates with intellectual or cognitive disabilities are referred to the mental health practitioner to evaluate the best method to provide PREA education. Evans is a Level 2 facility. At the time of the audit, Evans employed one (1) mental health practitioner and two (2) mental health officers for the entire inmate population. On day one of the onsite audit the population totaled 1081 inmates. During his interview, the Deputy Warden/PREA Compliance Manager indicated that an additional mental health practitioner was hired for the facility. Likewise, the Auditor also spoke to the SCDC PREA Coordinator after the additional mental health practitioner began working at the facility. The PREA Coordinator confirmed that Evans is a Level 2 facility and based upon the facility designation the facility now has its full complement of mental health staff.

Staff interviewed were aware of the policy that, only in exigent circumstances, are inmate interpreters or assistants to be used when dealing with PREA issues. The review of documentation, as well as staff and inmate interviews, both support a finding that Evans Correctional Institution now meets the requirements for Standard 115.16.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, OP-21.04, Inmate Classification Plan
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. PREA Poster English
6. PREA Poster Spanish
7. Inmate Orientation Manual
8. Language-line interpretative services contact information with instructions
9. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. Staff (Random and Specialized)
 - c. Inmates (Random and Targeted)
10. Braille (English), School for the Deaf and Blind, Braille order receipt form
11. Braille (Spanish), School for the Deaf and Blind, Braille order receipt form
12. Male PREA Brochure
13. PREA Playing Cards
15. SCDC Form 18-78 Certification of PREA Orientation

Corrective Action:

Evans provided documentation of emails to security staff alerting them how to access the language-line for translation services for inmates.

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates 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 No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates 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 No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates 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 No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates 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 No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No

115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? Yes No
- Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates? Yes No

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check? Yes No
- Before hiring new employees who may have contact with inmates, 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 No

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? Yes No

115.17 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? Yes No

115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? Yes No
- Does the agency ask all applicants and employees who may have contact with inmates 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 employees? Yes No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? Yes No

115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? Yes No

115.17 (h)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, ADM 9.12, Applicant Criminal History, ADM11.28, Applicant Selection Process OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, ADM11.28, Applicant Selection Process; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address Standard 115.17.

South Carolina Department of Corrections, 9.12, Applicant Criminal History, requires potential employees to report all arrests, court-ordered restraining orders (regarding a family member or a co-habitant) and/or convictions/dispositions on their original application. Successful applicants are checked through the National Criminal Information Center (NCIC) before an official offer of employment is extended. The policy indicates that any applicant with a felony conviction(s), drug related conviction(s) within ten (10) years will NOT be hired by the Agency for ANY position. Language from Standard 115.17 (a-b) is also included in Policy 9.12, Criminal History. Further, the policy states that any applicant that 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 (found liable) to have engaged in or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion or if the victim did not consent or was unable to consent or refused will NOT be hired by the Agency for ANY position.

All other arrests/convictions will be forwarded to the Division Director of Human Resources /Designee, and if necessary, the Division Director of Security for approval. Approval/disapproval for hire will be indicated on the original application and entered the Applicant Referral System (ARS). According to the Headquarters Assistant Director, Recruiting & Employment, should an applicant fail to report an arrest, court ordered restraining order, and/or conviction on their application, and it is found through NCIC check or otherwise, the selecting official may be contacted to give further consideration as to whether s/he wishes an offer of employment to be extended. Intentional deception will automatically disqualify an applicant. Any applicant that has served time in any state, federal, county, or city penal system within five (5) years will NOT be hired by the Agency. (4-ACRS-7F-04, 4-ACRS-7F-04, 4ACRS-7B-07, 4-ACRS-7D-06, 4-4055, 4-4061, 4-4102); (PREA Standard 115.17).

South Carolina Department of Corrections provided the Auditor with documentation to confirm that the Agency has processes, policies, and procedures in place that specifically address previous concerns noted for Standard 115.17. Moreover, prior to hiring any new employees,

contractors, or volunteers, the SCDC Recruiting and Employment Services Branch completes criminal background checks to ensure that potential employees, contractors, or volunteers who may have contact with inmates are cleared for hire. Documentation to validate initial background checks were included in personnel files reviewed by the Auditor.

During an interview with the Assistant Director, Recruiting & Employment, he detailed the criminal background verification process. The same system for verifying criminal histories was also confirmed by the PREA Coordinator for the Auditor. The Agency also has a system in place to capture criminal background updates for all current employees on a continuous basis. Furthermore, the Recruiting and Employment Services Branch in conjunction with the State Law Enforcement Division (SLED), monitoring system screens all employees and contractors using fingerprints provided by the employee or contractor during the pre-employment process. The fingerprints are sent to the State Law Enforcement Division [SLED] and the Federal Bureau of Investigation [FBI] for processing. If an employee or contractor is engaging in a criminal misconduct the SLED database alerts the Agency that there has been an arrest or violation within (24) hours of the incident. Types of misconduct notifications include arrest warrants, indictments, or restraining order(s). The disposition of the arrest warrant, indictment, or restraining order(s) must also be reported within twenty-four (24) hours of the receipt of the disposition by the employee. According to the policy, under no circumstances should an employee report to work without prior notification and providing the required information relating to and found in ADM-11.17, Employee Conduct, 6.2, Section 4.1.

ADM-11.17, Employee Conduct, 6.2., failure to report such information may result in corrective action up to and including termination from employment with the South Carolina Department of Corrections. During an official investigation, employees are to cooperate fully by providing all pertinent information that they may have. Full cooperation requires truthfully responding to all questions and providing a signed statement or affidavit, if necessary. (See SCDC Policy ADM-11.04, "Employee Corrective Action," for additional information.) All such cases will be investigated and when required, referred to the appropriate law enforcement agency and/or solicitor's office. (4-ACRS7E-04, 4-4056)

South Carolina Department of Corrections also requires all potential applicants and employees including promotions and new hires, who may have contact with inmates directly to disclose any previous misconducts.

The Agency by policy imposes upon employees a continuing affirmative duty to disclose all such misconduct immediately to a supervisor. Failure to report an arrest warrant, and the disposition of an arrest, indictment or restraining order within twenty-four (24) hours as defined in ADM-11.17, Employee Conduct, 6.2, before physically reporting to work will result in corrective action up to and including termination, regardless of the severity. According to the PREA Compliance Manager any material omission or failure to disclose a misconduct by an employee is grounds for termination from employment.

The Assistant Director, Recruiting & Employment provided the Auditor with a list of twenty-seven (27) security staff and five (5) non-security staff who were promoted within the last 12-month period. The Auditor sampled eleven (11) employees or contractors that were promoted

within the last 12-month period. South Carolina Department of Corrections completed 100% of all background checks prior to the employee's promotion date as required in this standard.

Review of the SCDC employment application was provided to the Auditor for her review. Specific verbiage contained in 115.17 (a) was not included in the employment application. The required questions found in substandard 115.17 (a) are as follows.

1. Has the individual 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).
2. Has the individual been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
3. Has the individual been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

The Auditor found the following questions contained in the employment application captured the spirit and intent of Standard 115.17, and in total met applicable substandard found in Standard 115.17.

- | | |
|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Question 22 | I agree that as a condition of employment, I will report to the Director of Human Resources all arrests, within twenty-four (24) hours of the occurrence. |
| Question 27 | I understand and further authorize a complete background check as a condition of employment. |
| Question 34 | Have you ever been accused of or been found liable of sexual abuse/sexual misconduct/sexual harassment or resigned during a pending investigation of a sexual abuse/sexual misconduct /sexual harassment allegation with any previous employer? (28 CFR 115) |
| Question 42 | Have you even been an inmate in a SCDC Institution, Federal Institution, or Penal Institution of another jurisdiction, if yes, charge, dates, where and type of sentence? |
| Question 49 | I understand that I must update my application to reflect all arrests or charges that may be brought against me after filing this application. |

Documentation on file supports a finding that the facility follows this standard. Evans Correctional Institution met the requirements for Standard 115.17.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire

2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, ADM-11.28, Applicant Selection Process
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. Section 24-3-950, South Carolina Code of Laws, 1976, as amended; Section VII (707.02),
South Carolina Office of Human Resources Regulations; Title VII of the 1964 Civil Rights Act; Article 7, Sections 8-13-700 through 8-13-795, Rules of Conduct; S.C. Code Ann. §8-11-170; Section 8-13-1110 of the South Carolina Code of Laws
6. SCDC Policy ADM-11.04, Employee Corrective Action
7. ADM-11.28, Applicant Selection Process
8. SCDC Form 19-29A
9. SCDC Form 19-29B
10. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. Assistant Director, Recruiting & Employment
 - c. Facility Human Resource Manager

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)

- 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 inmates 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.)
 Yes No NA

115.18 (b)

- 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 inmates 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.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, ADM-12.01, Procurement of Supplies and Services; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address Standard 115.18.

Evans Correctional Institution employs video surveillance. At EVANS cameras are strategically located in the facility. Evans utilizes video surveillance to augment physical security presence to ensure the safety and security of both inmates and staff. The facility Preaudit Questionnaire (PAQ) specifies zero expansions, modifications, or updates occurred to the existing facility structure.

During an interview with both the Warden and PREA Compliance Manager (PCM) each confirmed that Evans would consider how video technology could enhance the agency's ability to protect inmates from sexual abuse and sexual harassment. Moreover, the Warden and the PCM also confirmed that there have been no significant upgrades to the video monitoring system since 2012 but additional upgrades are anticipated in 2020. Evans Correctional Institution met the requirements for Standard 115.18.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, ADM-12.01, Procurement of Supplies and Services
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. Auditor's observations during the facility tour
6. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. Warden

Corrective action: None required

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.21 (a)

- 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.)
 Yes No NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No 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.) Yes No NA

115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? Yes No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? Yes No
- 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 No
- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? Yes No

- 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? (N/A if the agency *always* makes a victim advocate from a rape crisis center available to victims.) Yes No NA
- Has the agency documented its efforts to secure services from rape crisis centers? Yes No

115.21 (e)

- 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 No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) Yes No NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- 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? (N/A if agency *always* makes a victim advocate from a rape crisis center available to victims.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment, Section 6: Investigations of Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy/Procedure, GA05.01, Investigations; South Carolina Department of Corrections, Policy, POL-23.38, Evidence Protocol; and the Prison Rape Elimination Act of 2003 address Standard 115.21.

The protocol, is appropriate, and 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. Evans is a male-adult facility. It does not house youth.

South Carolina Department of Corrections is responsible for investigating allegations of sexual abuse. The agency follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions based on the Auditors interview with the Assistant Director of Police Services.

SCDC Police Services consists of Police Services Agents who are South Carolina Criminal Justice Academy (SCCJA) certified Class I law enforcement officers. Police Services is responsible for assigning agents as needed to investigate criminal acts (suspected and/or alleged) which are believed to have been committed by SCDC inmates, employees, or others when the crime relates to the Agency. Police Services is also responsible for assigning Agents as needed to conduct administrative investigations of serious violations of agency policies, procedures, rules, or regulations. More, by examination of sexual abuse incident reports from Police Services the Auditor determined that McLeod Health Cheraw accepts inmate victims of sexual abuse. McLeod Health Cheraw – is part of the McLeod Health family of not-for-profit hospitals in South Carolina.

The Auditor confirmed with the PREA Coordinator and the PREA Compliance Manager that the role and responsibility of an agency medical and mental health practitioner in the event of a sexual assault is to: triage the inmate victim of sexual assault for serious life-threatening injuries, emergency physical and emotional stabilization, and provide after care and follow-up services. South Carolina Department of Corrections offers all victims of sexual abuse access to forensic medical examinations at McLeod Health - Cheraw, without financial cost, where evidentiarily or medically appropriate. Inmate victims of sexual abuse treated at McLeod Health – Cheraw, would be treated by a qualified medical practitioner according to a hospital representative. The Auditor also spoke by phone to a representative from the South Carolina Victim Witness Assistance Network (SCVAN), the Statewide Forensic Nurse Examiner (FNE) Program Coordinator of the Statewide FNE Program. SCVAN has begun talks with McLeod Health-Cheraw, to provide SANE training to nurses at the hospital. According to SCVAN the closest hospital with SANE examiners is located 45 minutes away in Florence, SC.

South Carolina Department of Corrections has a statewide partnership agreement with ten (10) sexual assault centers across the state. The sexual assault centers provide hundreds of hours of support to victims of sexual assault, including individual face-to-face contacts, group sessions, written correspondence, and phone calls through toll-free hotline support. The Pee Dee Coalition Against Domestic and Sexual Assault Center serves – a 6-county service area that includes Florence, Darlington, Chesterfield, Marlboro, Dillon, Marion, and Williamsburg counties. Evans Correctional Institution is in the service area for the Pee Dee Coalition Against Domestic and Sexual Assault Center. The Auditor verified that the Pee Dee offers highly specialized and comprehensive services to assist all victims of domestic violence and sexual assault.

The Pee Dee Coalition Against Domestic and Sexual Assault Center provides a 24-hour crisis hotline: (843) 669-4600, emergency services, counseling, support services, children services, victim advocacy, community educational services and shelter placement. Specifically, support services offered by the Pee Dee Coalition include goal planning, job skills training, parenting skills training, resources, and referrals, 24-hour hospital medical accompaniment, and onsite mental health services. Counseling services are also offered to perpetrators of incest, violence, and batterers. Inmates can call the Pee Dee Coalition Against Domestic and Sexual Assault Center by dialing *63 on the inmate phone. The call is confidential, inmates are not required to enter their inmate Personal Identification Number (PIN) to make the call. Evans Correctional facility met the requirements for Standard 115.21

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment, Section 6: Investigations of Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy/Procedure, GA-05.01, Investigations
4. South Carolina Department of Corrections, Policy, POL-23.38, Evidence Protocol
5. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
6. Interview with the Assistant Director of Police Services
7. Interview with random and targeted inmates
8. Interview with Random and specialized staff
9. Interview with the PREA Coordinator
10. Contract: Pee Dee Coalition Against Domestic Violence and Sexual Assault
11. Interview with South Carolina Victim Witness Assistance Network (SCVAN), the Statewide Forensic Nurse Examiner (FNE) Program Coordinator

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? Yes No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? Yes No

115.22 (b)

- Does the agency have a policy and practice 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 No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? Yes No
- Does the agency document all such referrals? Yes No

115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).) Yes No NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address the requirements of Standard 115.22.

South Carolina Department of Corrections has a policy in place governing the conduct of both criminal and administrative investigations. More, SCDC policy (OP-21-12: Prevention, Detection and Response to Sexual Abuse/Sexual Harassment) ensures that allegations of sexual abuse or sexual harassment are referred for investigation and completed on all administrative and criminal investigations. The PREA Compliance Manager indicated during his interview that criminal investigations are investigated by an independent state organization, State Law Enforcement Division (SLED). The primary mission of the State Law Enforcement Division (SLED) is to provide quality manpower and technical assistance to law enforcement agencies and to conduct investigations on behalf of the state as directed by the Governor and Attorney General. All related documentation is captured in the Police Case Management System. Evans administrative investigations are maintained in files at the facility and secured by the PREA Compliance Manager.

When allegations are made at the facility, information is collected by Evans, then forwarded to the facility PREA Compliance Manager for action. Administrative investigations are documented in investigative files at the facility and maintained by the PREA Compliance Manager. Evidence collected and circumstances surrounding an incident determines if an allegation should be forward to Police Services to initiate a criminal investigation. Criminal investigations are documented in the Police Case Management System. Incidents not determined to be criminal in nature are referred to the facility for the completion of an administrative investigation. Evans Correctional Institution met the requirements for Standard 115.22.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. Interviews with the following:
 - a. PREA Coordinator
 - b. Associate Warden, PREA Compliance Manager (PCM)

Corrective action: None required

TRAINING AND EDUCATION

Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? Yes No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment Yes No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? Yes No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? Yes No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? Yes No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? Yes No
- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? Yes No

115.31 (c)

- Have all current employees who may have contact with inmates received such training? Yes No

- 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 No
- 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 No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address the requirements of Standard 115.31.

South Carolina Department of Corrections provides training for all employees working in correctional settings. Prison Rape Elimination Act (PREA) related training is provided to employees minimally on a yearly basis. The SCDC training curriculum includes PREA education which is provided at the onset of employment based on the role and responsibilities of each employee. The Auditor found that SCDC provides ongoing training and policy change notifications based on need and circumstances such as substantiated findings from an investigation. Furthermore, new hires who work in secure settings, are required to attend NEO (New Employee Orientation) training. NEO is an 8 hour course that includes information regarding PREA. Newly hired employees attend an initial orientation training course at their facility followed by the attendance in a basic training class at the SCDC Training Academy located in Columbia, South Carolina.

Evans Correctional Institution trains all employees who may have contact with inmates on how to fulfill their responsibilities under the Agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures. Furthermore, staff interviewed (100%) confirmed (random and specialized) that training also includes topics such as; inmates' right to be free from sexual abuse and sexual harassment, the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment, common reactions of sexual abuse and sexual harassment victims, how to

communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates, and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. The Auditor sampled training files for confirmation of training as indicated in this standard. The Auditor found all staff completed the requisite PREA training at least every two-years. Evans has a system to provide continuous training for staff using email, shift briefings and posted notices according to the PREA Compliance Manager. As the Auditor entered the facility, she noticed posted reminders of PREA related information located in the control room and gate entrance.

Additionally, contractors and volunteers are provided PREA training and education relative to their duties and responsibilities. All staff are mandated to receive training annually and the curriculum includes an extensive review of PREA requirements. Training curriculum, training sign-in sheets, and other related training documentation were reviewed by the Auditor. Interviewed staff (random and specialized) verified the requirement to acknowledge, in writing, not only that they received the PREA training, but that they understood it. Evans Correctional Institution met the requirements for Standard 115.31.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. PREA Orientation Training Curriculum
4. Staff sign-in training acknowledgement
5. PREA New Employee Onboarding Curriculum
6. Cross-Gender Transgender Pat Searches Training
6. Interviews with the following:
 - a. Associate Warden, PREA Coordinator Manager (PCM)
 - b. Staff (random and specialized)

Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures? Yes No

115.32 (b)

- Have all volunteers and contractors who have contact with inmates 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 inmates)? Yes No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address the mandates of this Standard 115.32

The facility has been closed to volunteerism since early in 2020, due to the pandemic. The PAQ, 115.32 (a)-2, indicates the number of volunteers and individual contractors, who have contact with inmates as one hundred thirty-two. Job specific contractors, employed through contractual agreement to repair or provide a limited service to equipment, on the premises are under supervised escort by security staff. The Auditor interviewed the PREA Coordinator who confirmed that Evans does not employ full-time or part time contractors. Medical, mental health and foodservice staff are employees of the state.

A sample of training records for (3) volunteers confirmed participation in general PREA education (Standard 115.32). More, three (3) volunteers were interviewed by phone, and each confirmed that they received and understood PREA training provided by SCDC and the facility. The Auditor also examined the volunteer agreement for each volunteer sampled during the audit. The agreement includes acknowledgement of policies and procedures such as: Prison Rape Elimination Act and reporting duties, contraband control, employee-inmate relations, staff sexual misconduct, and searches of employees. More, SCDC Volunteer Orientation Agenda and Topics include SCDC Mission, Inmate Profile, Types of Volunteer Service, Volunteer Conduct and Sexual Abuse, Harassment, and Misconduct, the agency's Zero Tolerance Policy regarding sexual abuse and sexual harassment and how to report inappropriate conduct. Evans Correctional Institution met the requirements for Standard 115.32.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. SCDC Volunteer Orientation Agenda and Topics

4. Interviews with the following:
- a. Associate Warden, PREA Compliance Manager (PCM)
 - b. Volunteers (3)
 - c. PREA Coordinator

Standard 115.33: Inmate education

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? Yes No

115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? Yes No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? Yes No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? Yes No

115.33 (c)

- Have all inmates received the comprehensive education referenced in 115.33(b)? Yes No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility? Yes No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? Yes No

- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? Yes No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions? Yes No

115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address the requirements of Standard 115.33.

During intake, all inmates assigned to Evans Correctional Institution receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. More, inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment. SCDC has created a brochure called "Let's Talk About Safety". The brochure discusses the agency's Zero Tolerance Policy, sexual safety tips, PREA reporting information, sexual assault and inmate rights regarding sexual abuse and sexual harassment. Inclusive in the brochure was the address to the South Carolina Law Enforcement Division (SLED) at: P.O Box 21398 Columbia, SC 29221. The Auditor found a section in the brochure termed "How Can I Help You," equally beneficial to victims of abuse. This section of the brochure

provides inmates with options to alert staff or others of sexual abuse or sexual harassment taking place in a SCDC correctional setting by:

- 1). File a grievance,
- 2). File a report to investigations using a facility kiosk,
- 3). Request to visit medical and ask for help there,
- 4). Ask a lawyer, a friend, or family member to request help for you and,
- 5). Dial *22 from any inmate phone located the each living units.

A sample of forty (40) random and targeted inmates confirmed during separate interviews receiving PREA related education within 72 hours of their arrival. In addition, inmates (random and targeted) 100% confirm that within 30 days of their respective intake date they received a comprehensive education an explanation of the agency's Zero Tolerance Policy of sexual abuse and sexual harassment, prevention, detection, and response policies and procedures. After receiving orientation and inmate education, each inmate is issued a PREA educational brochure, "Let's Talk About Safety" and signs an acknowledgement of receipt of PREA education training form addressing the mandates of Standard 115.33.

The Auditor noted during her tour of the facility that other PREA related information explaining sexual abuse, victim advocacy and how to report abuse were posted on the all living units throughout the facility in English but sporadically posted in other languages like Spanish based on the population demographics. Evans and Spanish. Moreover, advocacy information was posted on bulletin boards, on all living units near telephones and in unit entrances to provide accessibility and continuous availability to all inmates. Inmates were well versed about the Prison Rape Elimination Act (PREA). Inmates were also able to access staff regarding PREA complaints by using their personal tablets.

Evans also provided PREA related information printed on leisure material such as a deck of playing cards. Random and targeted inmates (100%) sampled could recall information printed on the back of the PREA playing cards. The Auditor found the utilization of leisure material an excellent mechanism to deliver vital and informative information on PREA. Evans Correctional Institution met the requirements for Standard 115.33.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. "Let's Talk About Safety" brochure
5. PREA Playing Cards
6. Auditor tour and observation
7. Interviews with the following:
 - a. PREA Coordinator
 - b. Associate Warden, PREA Compliance Manager (PCM)
 - c. Staff (Intake)
 - d. Inmates (Random and Targeted)
 - e. Assistant PREA Compliance Manager

Standard 115.34: Specialized training: Investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.34 (a)

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive 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 115.21(a).) Yes No NA

115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No 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 115.21(a).) Yes No 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 115.21(a).) Yes No 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 115.21(a).) Yes No NA

115.34 (c)

- 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 115.21(a).) Yes No NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address the requirements of Standard 115.34.

South Carolina Department of Corrections policy requires SCDC Police Services Investigators to complete a multiple-tier training regimen of Specialized Training for Investigators. Mandated training for Police Services Investigators included specialized training for investigators as mandated in Standard 115.34. The training and the curriculum can be found on the National Institute of Corrections (NIC) website. The Auditor found that the NIC curriculum of training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, how to properly conduct interviews, and the criteria and evidence required to substantiate a case for administrative action and prosecution referral. Evans provided the Auditor with evidence that facility PREA Investigators completed the required training as prescribed in 115.34 and 115.31, in the form of certificates.

Moreover, a review of SCDC and Evans confirmed policies are in place that require PREA investigators to receive specialized investigative techniques training for interviewing sexual abuse victims. During an interview with an administrative PREA investigator and the Assistant Director of Police Services each confirmed investigative training included the proper use of Miranda and Garrity warnings, sexual abuse evidence collection of crime scenes in correctional settings and the evidence and criteria needed to substantiate an incident for criminal or administrative proceeding. Evans PREA reports (sexual abuse/sexual harassment) tallied:

Note: Investigators are Law Enforcement Officers (POST)

2020 Evans Investigation January 2020-October 2020			
Number of Allegations	Number of Investigations	Administrative	Criminal
23	23	22	1
Inmate-Inmate Sexual Harassments	Inmate-Inmate Sexual Assaults	Staff-Inmate Sexual Harassments	Staff-Inmate Sexual Assaults
22	1	0	0
Inmate-Inmate Referred to Local AD	Staff-Inmate Referred to Local AD	Staff Terminated	Investigations Open
0	0	0	7

Evans Correctional Institution met the requirements for Standard 115.34.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. Training certificates from the National Institute of Corrections (NIC)
5. Interviews with the following:
 - a. PREA Coordinator
 - b. Deputy Warden, PREA Compliance Manager (PCM)/administrative PREA investigator
 - c. Assistant Director of Police Services
 - d. Staff (Specialized)
 - e. National Institute of Corrections (NIC) website and training curriculum

Corrective action: None required

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35 (a)

- 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 No NA
- 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 No NA
- 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 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 No NA
- 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 No NA

115.35 (b)

- 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 No NA

115.35 (c)

- 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 No NA

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.) Yes No NA
- Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address the requirements of Standard 115.35.

The agency mandates that all full-and part-time, contract 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, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

The Auditor sampled evidence of the completion of general PREA training and specialized training files for thirteen (13) medical and mental health practitioners, as part of the audit process. Problematic, specialized training documents revealed that 30% of the required training occurred just prior to the onsite audit of the facility and 70% of specialized training occurred because of a corrective action.

Furthermore, interviews with medical and mental health practitioners all confirmed an awareness of their role and responsibility to detect, assess signs of sexual abuse and sexual harassment, preserve physical evidence of sexual abuse and how to respond and report PREA related incidents.

According to the PREA Compliance Manager and facility Health Service Administrator, Evans medical practitioners do not conduct forensic examinations. Victims of sexual abuse would be taken to a local hospital. The forensic examine would be completed by a qualified forensic examiner, SANE/SAFE staff, or a qualified medical practitioner. After corrective action, Evans Correctional Institution met the requirements for Standard 115.35.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. Staff Training Agenda 2019 Annual Refresher Training
5. Training Logs/Records for Medical and Mental Health Professionals
6. Interviews with the following:
 - a. Staff (Specialized)
 - b. PREA Compliance Manager
 - c. Health Services Administrator
 - d. Qualified Mental Health Practitioner

Corrective action:

The Auditor sampled evidence of the completion of general PREA training and specialized training files for thirteen (13) medical and mental health practitioners, as part of the audit process. Problematic, medical, and mental health practitioners specialized medical training documents revealed that 30% of the required training occurred prior to the onsite audit of the facility and 70% of specialized training occurred because of a corrective action. Evans provided the Auditor with documented evidence that all full and part-time medical and mental health practitioners completed specialized training as required in this standard. Evans now maintains documentation that medical and mental health professionals have received the specialized training referenced in Standard 115.35.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
 Yes No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
 Yes No

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?
 Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?
 Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? Yes No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? Yes No

115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior acts of sexual abuse? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior convictions for violent offenses? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, history of prior institutional violence or sexual abuse? Yes No

115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? Yes No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a referral? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a request? Yes No
- Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? Yes No
- Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? Yes No

115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? Yes No

115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both addressed the requirements of Standard 115.41.

SCDC has developed an objective screening instrument to conduct PREA screenings termed the SCDC PREA Screening Checklist. SCDC mandates that all inmates are assessed within 72 hours of arrival as part of the PREA intake screening for their risk of being sexually abused or sexually abusive toward other inmates. The PREA screening instrument is used to determine proper housing, bed assignment, work assignment, education, and other program assignments, with the goal of keeping inmates at high risk of being sexually abused or harassed separate from those inmates who are at high risk of being sexually abusive.

PREA intake screening considers, at a minimum, the following criteria to assess inmates for risk of sexual victimization:

- Whether the inmate has a mental, physical, or developmental disability,
- The age of the inmate,
- Physical build,
- History of previous incarcerations,
- Violent versus nonviolent criminal history,
- Prior history of sexual offenses against children or adults,
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming,
- Any history of prior sexual victimization,
- Perception of vulnerability, and Whether the inmate is detained solely for civil immigration purposes.

The assessments sampled totaled forty-four (44). Problematic, the samples indicated screening dates beyond 72 hours. Zero inmates were reassessed within 30 days of arrival or transfer to the facility. Factors

outlined in 115.41 (d) were not considered based on evidence gleaned from the SCDC PREA Screening Checklist, as examined by the Auditor. During the onsite portion of the audit, the PREA Compliance Manager quickly called a meeting with intake staff, and the Qualified Mental Health Practitioner (QMHP). All inmates were rescreened, and appropriate referrals made to the QMHP.

The Auditor reviewed a second sample of thirty (30) PREA screening assessments from October 8, 2020 to - November 5, 2020, to determine compliance with this standard. Evans completed each assessment on the same day and reassessments within 30 days. The Auditor also determined that when appropriate, inmates with histories of victimizations, abusiveness or acute distress within the last 30 days were referred to mental health for further assessment. It should be mentioned, 40% of inmates assessed with factors suggestive of vulnerability or abusiveness decline a mental health referral. More, PREA assessment documents show that inmates sampled gave justifications for declining a mental health referral such as: already on the mental health caseload, and not willing to discuss the matter. The Auditor found evidence of two (2) inmates requesting a referral to mental health despite currently being followed by a mental health practitioner. Targeted and random inmates (100%) interviewed denied being disciplined for refusing to answer, or for not disclosing complete information in response to any questions in this standard.

During individual interviews with an intake screener and specialized mental health practitioner or QMHP, each were able to provide examples of instances when a reassessment would be warranted such as: 1) request or referral for review of vulnerability or sexual abusiveness, 2) Due to an incident of sexual abuse, 3) receipt of additional information that could impact an inmate's risk of sexual victimization or abusiveness. The PREA Compliance Manager and intake screener both confirmed that housing and program assignments are made on a case-by-case basis and inmates are not placed in housing units based solely on their sexual identification or status.

The PREA Compliance Manager, QMHP and facility Health Administrator both specified during individual interviews that the facility has implemented appropriate controls to monitor the dissemination of sensitive information within the facility. SCDC/Evans uses password protection and limits staff access to the inmate management system based on the role or responsibility of the staff person. Staff are issued individual logins to prevent sensitive information from being exploited to the detriment of a vulnerable inmate by staff or other inmates. Evans Correctional Institution now meets the requirements for Standard 115.41.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. Intake Screening Form
5. Interviews with the following:
 - a. Intake screener
 - b. Staff (Random and Specialized)
 - c. Inmates (random and targeted)
 - d. PREA Compliance Manager

Corrective Action:

The assessments sampled totaled forty-four (44). Problematic, the samples indicated screening dates beyond 72 hours. Zero inmates were reassessed within 30 days of arrival or transfer to the facility. Factors outlined in 115.41 (d) were not considered based on evidence gleaned from the SCDC PREA Screening Checklist, as examined by the Auditor. During the onsite portion of the audit, the PREA Compliance

Manager quickly called a meeting with intake staff, and the Qualified Mental Health Practitioner (QMHP). All inmates were rescreened, and appropriate referrals made to the QMHP.

The Auditor reviewed a second sample of thirty (30) PREA screening assessments from October 8, 2020 to - November 5, 2020, to determine compliance with this standard. Evans completed each assessment on the same day and reassessments within 30 days. The Auditor also determined that when appropriate, inmates with histories of victimizations, abusiveness or acute distress within the last 30 days were referred to mental health for further assessment. It should be mentioned, 40% of inmates assessed with factors suggestive of vulnerability or abusiveness decline a mental health referral. More, PREA assessment documents show that inmates sampled gave justifications for declining a mental health referral such as: already on the mental health caseload, and not willing to discuss the matter.

Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? Yes No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? Yes No

115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the **agency** consider, on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to

a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? Yes No

- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? Yes No

115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? Yes No

115.42 (e)

- Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? Yes No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? Yes No

115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) Yes No NA
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) Yes No NA
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both addressed the requirements of Standard 115.42.

The agency uses information from the risk screening required by § 115.41. SCDC requires Evans to use information from the risk screening instrument to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk for being sexually victimized from those at high risk of being sexually abusive. Policy, OP-21.12, requires Evans to make individualized determinations about how to ensure the sexual safety of each inmate. Staff interviewed confirmed that they understood their responsibility to adhere to agency policy and Standard 115.42.

According to the intake screener and the PREA Compliance Manager, housing and program assignments at Evans Correctional Institution are made on a case-by-case basis and inmates are not placed in housing units based solely on their sexual identification or status. As mentioned in § 115.41, the Auditor sample size totaled forty-four (44). Problematic, the samples indicated screening dates beyond 72 hours. Zero inmates were reassessed within 30 days of arrival or transfer to the facility. Factors outlined in § 115.41 (d) were not considered based on evidence gleaned from the SCDC PREA Screening Checklist, as examined by the Auditor. Risk screening for victimization or abusiveness had little impact on housing, bed, work, education, and program assignment decisions. During the onsite portion of the audit, the PREA Compliance Manager quickly called a meeting with intake staff, and the Qualified Mental Health Practitioner (QMHP). All inmates were rescreened, and appropriate referrals made to the QMHP.

The Auditor reviewed a second sample of thirty (30) PREA screening assessments from October 8, 2020 to - November 5, 2020, to determine compliance with this standard. Evans completed each assessment on the same day and reassessments within 30 days. The Auditor also determined that when appropriate, inmates with histories of victimizations, abusiveness or acute distress within the last 30 days were referred to mental health for further assessment. It should be mentioned, 40% of inmates assessed with factors suggestive of vulnerability or abusiveness decline a mental health referral. More, PREA assessment documents show that inmates sampled gave justifications for declining a mental health referral such as: already on the mental health caseload, and not willing to discuss the matter.

The Auditor interviewed random and targeted inmates during the onsite audit. Targeted inmates sampled, to include two (2) self-identified transgender inmates, interviewed during the audit denied being placed in a dedicated living unit because of their gender identity, whether the inmate is or was perceived to be gay, bisexual, transgender, intersex, or gender nonconforming. The QMHP provided the Auditor with evidence to

confirm that a transgender or intersex inmate would be reassessed twice a year to review any threats to safety experienced by the inmate. Serious consideration would be given by staff of these inmates with respect to their own safety. Additionally, transgender, or intersex inmates would be given the opportunity to shower separately from other inmates. The PREA Compliance Manager confirmed that Evans was not operating under a consent decree, legal settlement, or legal judgment that required the facility to establish a dedicated facility, unit, or wing for gay, bisexual, transgender, or intersex inmates. Evans Correctional Institution now meets the requirements for Standard 115.42.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. Interviews with the following:
 - a. Staff (Random and Specialized)
 - b. Inmates (Random and Targeted)
 - c. PREA Coordinator
 - d. Associate Warden, PREA Compliance Manager (PCM)

Corrective action:

The assessments sampled totaled forty-four (44). Problematic, the samples indicated screening dates beyond 72 hours. Zero inmates were reassessed within 30 days of arrival or transfer to the facility. Factors outlined in 115.41 (d) were not considered based on evidence gleaned from the SCDC PREA Screening Checklist, as examined by the Auditor. During the onsite portion of the audit, the PREA Compliance Manager quickly called a meeting with intake staff, and the Qualified Mental Health Practitioner (QMHP). All inmates were rescreened, and appropriate referrals made to the QMHP.

The Auditor reviewed a second sample of thirty (30) PREA screening assessments from October 8, 2020 to - November 5, 2020, to determine compliance with this standard. Evans completed each assessment on the same day and reassessments within 30 days. The Auditor also determined that when appropriate, inmates with histories of victimizations, abusiveness or acute distress within the last 30 days were referred to mental health for further assessment. It should be mentioned, 40% of inmates assessed with factors suggestive of vulnerability or abusiveness decline a mental health referral. More, PREA assessment documents show that inmates sampled gave justifications for declining a mental health referral such as: already on the mental health caseload, and not willing to discuss the matter.

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? Yes No
- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? Yes No

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? Yes No
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA

115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? Yes No
- Does such an assignment not ordinarily exceed a period of 30 days? Yes No

115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document the basis for the facility's concern for the inmate's safety? Yes No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document the reason why no alternative means of separation can be arranged? Yes No

115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, OP-22.23, Statewide Protective Custody; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address the requirements of this Standard 115.43.

According to the Warden and PREA Compliance Manager, the facility refrains from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers.

During the facility tour of the restricted housing unit (RHU) or protective custody, two inmates were being housed in voluntary segregation because of a PREA related incident of sexual abuse. Both allegations of sexual abuse are under investigation by SCDC Police Services. Both inmates were interviewed by the Auditor during the onsite portion of the audit. Each inmate indicated that he was assessed by the QMHP with regularity and they were awaiting a transfer to another facility. Statewide transfers have been affected by the Corona pandemic as some facilities remain under active quarantine. Neither inmate felt safe in general population and each refused to re-enter general population while awaiting transfer due to concerns regarding their sexual safety. Problematic, after involuntary placement in RHU neither was assessed as mandated in this standard. The Auditor reviewed case summaries for both inmates.

The Auditor also interviewed the QMHP regarding the placement of John Doe #1 and John Doe #2 in the restricted housing unit. The QMHP and PREA Compliance Manager confirmed that each inmate in RHU voiced serious concerns for their safety if they remained housed in general population. A memorandum from the Warden indicates that, John Doe #1 was placed in RHU due to a PREA investigation by SCDC Police Services. John Doe #2 was placed in a less restricted version of restricted custody at the facility, Waxhaw-B, which is considered a protective housing dorm, termed a Special Concerns Offender Reintegration (SCOR) program.

SCOR is designed to help motivate inmates in making a successful reintegration, stepping down from Restrictive Housing and returning to general population, while simultaneously providing opportunities for successful reentry into their communities upon release from incarceration. The SCOR Program is a four (4) step program for offenders, with the goal of placing the offender in a general population setting. The program is a progressive response that enables the offender to live without fear in populations outside of a

more restrictive protective housing unit, RHU. SCOR employs evaluation tools to observe and measure standards that ensure fidelity in offender management services and programming. More, evidence-based practices are applied to include effective communication, research-based programming, sanctions and incentives, and appropriate security enhancements to motivate inmates to re-enter population.

Other inmates interviewed (random and targeted) denied being placed in involuntary housing due to being identified as a high risk for sexual victimization. The PREA Compliance Manager and Warden indicated in separate interviews that involuntary segregated housing is seldom a consideration unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. According to the PAQ and confirmed by the PREA Compliance Manager, during the past 12-month period zero inmates were placed in involuntary segregation to avoid sexual victimization. This information is an error.

Interviews with staff, an examination of the segregation operations during the facility tour and an examination of policy/documentation, and re-training documentation confirmed, Evans Correctional Institution now meets the requirements for Standard 115.43.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, OP-22.23, Statewide Protective Custody
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. Interviews with the following:
 - a. Segregated Housing Officers
 - b. Staff (Random and Specialized)
 - c. Inmates (Random and Targeted)
 - d. Segregation Supervisor
 - e. Associate Warden, PREA Compliance Manager (PCM)
 - f. Warden

Corrective action:

In the past 12-month period, two (2) inmates were initially placed in involuntary segregation after reporting a PREA allegation. Documentation of an initial assessment and any attempts to locate alternative living accommodations in the facility were not well documented. The inmates remained in RHU for greater than 24 hours. The PREA Coordinator will re-train all security managers, the QMHP, PREA Compliance Manager and Warden regarding Standard 115.43, governing involuntary segregated housing for Inmates at high risk for sexual victimization and, documentation, of 30-day reviews for compliance with this standard. The PREA Coordinator will document the training and provide the Auditor with a roster with printed names and signatures of said staff.

REPORTING

Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for inmates to privately report retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for inmates to privately report staff neglect or violation of responsibilities that may have contributed to such incidents? Yes No

115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? Yes No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? Yes No
- Does that private entity or office allow the inmate to remain anonymous upon request? Yes No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility *never* houses inmates detained solely for civil immigration purposes) Yes No NA

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? Yes No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment? Yes No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, GA-01.12, Inmate Grievance System; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address the requirements of the Standard 115.51.

SCDC and Evans provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment. SCDC has created a brochure called "Let's Talk About Safety". The brochure discusses the Agency's Zero Tolerance Policy, sexual safety tips, PREA reporting information, sexual assault and inmate rights regarding sexual abuse and sexual harassment. Inclusive in the brochure was the address to the South Carolina Law Enforcement Division (SLED) at: P.O Box 21398 Columbia, SC 29221. The Auditor found a section in the brochure termed "How Can I Help You," equally beneficial to victims of abuse. This section of the brochure provides inmates with options to alert staff or others of sexual abuse or sexual harassment taking place in a SCDC correctional setting:

- 1). File a grievance,
- 2). File a report to investigations using a facility kiosk,
- 3). Request to visit medical and ask for help there,
- 4). Ask a lawyer, a friend, or family member to request help for you and,
- 5). Inmates incarcerated in an SCDC facility may report any act of sexual abuse by calling *22, and/or by written or verbal reports to any Agency staff member, contract employee, volunteer, or the Division of Investigations, or SLED (address).

The inmate can also file a written report in the form of a grievance without giving his/her name or the name of the abuser(s). This information could also include an assault that occurred at any Correctional Facility, Detention Center, County Facility or while under community supervision, prior to or during his/her commitment to the SCDC.

Evans staff can also call the reporting line (*22) set up by the SCDC to leave a message regarding any violation in the facility. Inmates interviewed (random and targeted) (100%) indicated feel comfortable with staff to relate an incident of sexual abuse or sexual harassment but each was versed in multiple ways to privately report sexual abuse and sexual harassment. A review of supporting documentation and staff/inmate interviews indicated that there are multiple ways (verbally, in writing, anonymously, privately and from a third party) for inmates to report sexual abuse/sexual harassment. The facility has procedures in place for staff to document all allegations. There are posters and other documents on display throughout the facility which also explain reporting methods.

Inmates at Evans Correctional Institution are not detained solely for civil immigration purposes. Interviews with staff and inmates, observations of posters addressing reporting methods, and an examination of policy/documentation confirmed that Evans Correctional Institution met the requirements for Standard 115.51.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, GA-01.12, Inmate Grievance System
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. PREA zero tolerance Policy poster (English)
6. PREA zero tolerance Policy poster (Spanish)
7. Inmate Orientation Manual (English)
8. 7. Inmate Orientation Manual (Spanish)
9. Auditor's observations during the facility tour
10. Interviews with the following:
 - a. PREA Coordinator
 - b. Associate Warden, PREA Compliance Manager (PCM)
 - c. Staff (Random and Specialized)
 - d. Inmates (Random and Targeted)

Corrective action: None required

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate 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 No

115.52 (b)

- Does the agency permit inmates 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.) Yes No NA
- Does the agency always refrain from requiring an inmate 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.) Yes No NA

115.52 (c)

- Does the agency ensure that: An inmate 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.) Yes No 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.) Yes No NA

115.52 (d)

- 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 inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) Yes No NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate 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.)
 Yes No NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)
 Yes No NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, 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.) Yes No NA
- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)
 Yes No NA

115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance alleging an inmate 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.)
 Yes No 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.) Yes No 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.) Yes No NA
- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No 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.) Yes No 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.) Yes No NA

115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, GA-01.12, Inmate Grievance System, OP21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address the requirements of Standard 115.52. South Carolina Department of Corrections is not exempt from this standard. The Agency permits inmates to submit PREA related grievance regarding an allegation of sexual abuse without any type of time limits. GA-01.12, "Inmate Grievance System," was modified to include language to better align with Standard 115.52 on May 12, 2014.

Inmate Grievance System Section 15.2 PRISON RAPE ELIMINATION ACT (PREA)

specifically addressed PREA related grievances. South Carolina Department of Corrections permits inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits. SCDC refrains from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse and sexual harassment.

The Agency ensures that an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. Policy, GA-01.12, Inmate Grievance System requires facilities to 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 with a maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time for response is insufficient to make an appropriate decision, According to the PREA Compliance Manager the SCDC will notify the inmate in writing of any such extension and provide a date by which a decision will be made. Furthermore, Policy, GA01.12, Inmate Grievance System indicates that at any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

Third parties

Policy, GA-01.12, Inmate Grievance System allows third parties to file a grievance on the behalf of an inmate. The PREA Coordinator indicated during his interview that third parties include individuals such as fellow inmates, staff members, family members, attorneys, and outside advocates, are all permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse. Random and specialized staff (100%) sampled during the onsite audit all agreed that a third party could file a grievance on behalf of an inmate. The same sample of random and specialized staff provided the Auditor with at least one example of who would represent a third party such as another inmate, clergy, lawyer or girlfriend.

Emergency PREA Related Grievances

South Carolina Department of Corrections has established documented procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. According to the PREA Coordinator, after receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, SCDC immediately would 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.

Policy, GA-01.12, Inmate Grievance System, Section 15.2.4. If the inmate files an emergency grievance showing substantial risk of imminent sexual abuse, the Agency shall immediately forward the grievance to the Warden for response within 48 hours of receipt of the grievance and an Agency final decision shall be provided within five (5) calendar days. Section 15.2.6. The Inmate Grievance Coordinator (IGC) will not investigate allegations of a violation of PREA. A copy of any grievance alleging PREA violations will be provided to the PREA Compliance Manager within 24 hours of receipt for investigation and providing recommended responses to grievances. The PREA Compliance Manager will maintain a copy of the grievance and maintain a log of PREA allegation grievances.

During this audit period, the Auditor determined by examination that one inmate filed a PREA related emergency grievance that he was in substantial risk of imminent sexual abuse. The emergency grievance was initiated by John Doe #2 on 10/15/2019 and received by the Inmate Grievance Coordinator on

10/16/2019. The Inmate Grievance Coordinator sought guidance on how best to process the complaint on 10/30/2019. Problematic, after receiving the emergency grievance described above, SCDC/Evans failed to provide an initial response within 48 hours nor was a final decision issued within 5 days of the filing of the emergency grievance.

SCDC maintains that it may discipline an inmate for filing a grievance related to the alleged sexual abuse if there is evidence that the inmate filed the grievance in bad faith. Random and targeted inmates sampled during the audit denied being disciplined for filing a grievance in bad faith. Evans Correctional Institution now meets the requirements for Standard 115.52.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and
3. Response to Sexual Abuse and Sexual Harassment
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South
5. Carolina Code of Laws, 1076) as amended
6. Interviews with the following:
 - a. Staff (Random and Specialized)
 - b. Inmates (Random and Targeted)
 - c. Associate Warden, PREA Compliance Manager (PCM)
 - d. PREA Coordinator
 - e. Inmate Grievance Coordinator

Corrective action:

During this audit period, the Auditor determined by examination that one inmate filed a PREA related emergency grievance that he was in substantial risk of imminent sexual abuse. The emergency grievance was initiated by John Doe #2 on 10/15/19 and received by the Inmate Grievance Coordinator on 10/16/19. The Inmate Grievance Coordinator sought guidance on how best to process the complaint on 10/30/19. Problematic, after receiving an emergency grievance described above, SCDC/Evans failed to provide an initial response within 48 hours nor was a final decision issued within 5 days of the filing of the emergency grievance. SCDC will re-train Evans staff such as the PREA Compliance Manager, Assistant PREA Compliance Manager and Inmate Grievance Coordinator on Standard 115.52. The PREA Coordinator will provide the Auditor with documented evidence of re-training of staff on this standard.

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? Yes No
- 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? (N/A if the facility *never* has persons detained solely for civil immigration purposes.) Yes No NA

- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? Yes No

115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? Yes No

115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? Yes No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address the requirements of Standard 115.53.

South Carolina Department of Corrections has a statewide partnership agreement with multiple sexual assault centers across the state. The ten sexual assault centers provide hundreds of hours of support to victim of sexual assault, including individual face-to-face contacts, group sessions, written correspondence, and phone calls through toll-free hotlines support.

The Pee Dee Coalition Against Domestic and Sexual Assault was organized in 1986 in South Carolina and serves as the rape crisis and family violence center for specific counties in South Carolina. Pee Dee serves – a 6-county service area that includes Florence, Darlington, Chesterfield, Marlboro, Dillon, Marion, and

Williamsburg counties. Evans Correctional Institution is in the service area for the Pee Dee Coalition Against Domestic and Sexual Assault Center.

The Auditor verified that the Pee Dee offers highly specialized and comprehensive services to assist all victims of domestic violence and sexual assault. The Pee Dee Coalition Against Domestic and Sexual Assault Center provides a 24-hour crisis hotline: (843) 669-4600, emergency services, counseling, support services, children services, victim advocacy, community educational services and shelter placement. Specifically, support services offered by Pee Dee include goal planning, job skills training, parenting skills training, resources and referrals, medical accompaniment, and onsite mental health services. Counseling services are also offered to perpetrators of incest, violence, and batterers. Inmates can call the Pee Dee Coalition Against Domestic and Sexual Assault Center by dialing *63 on the inmate phone. The call is confidential, inmates are not required to enter their inmate Personal Identification Number (PIN) to make the call. All services provided by the center are completely free, completely confidential and the client's safety is a priority according to the website and victim advocate. The Auditor tested phone access to Pee Dee from several living units during the onsite portion of the audit. The Auditor determined that inmates have appropriate access to confidential support services in the community.

During their respective interviews, the Auditor confirmed with the PREA Coordinator and the PREA Compliance Manager that the South Carolina Department of Corrections offers all victims of sexual abuse access to forensic medical examinations, at an outside facility, without financial cost, where evidentiarily or medically appropriate. SCDC maintains a contractual agreement termed, "Statewide Partnerships with Sexual Assault Centers", with sexual advocacy organizations throughout the state of South Carolina. Through the statewide agreement qualified staff provide emotional support and other victim services to victims of sexual abuse. Inmates in need of emotional support or victim advocacy would dial *63 from the living unit and he/she is connected to a call center in proximity to the prison. Evans Correctional Institution as a good communicative relationship.

Very few inmates (random and targeted) sampled could provide the Auditor with details of the types of services provided in the community by Pee Dee available to inmates of sexual abuse. However, the inmates were able to tell the Auditor multiple ways they could obtain additional information regarding the advocacy services provided by the Pee Dee, if necessary. Furthermore, the inmates (random and targeted) sampled were not aware if the conversation with Pee Dee Center would be confidential. Most inmates sampled believed the telephone call to the Pee Dee Coalition Against Domestic and Sexual Assault Center was a monitored line. As a method to continuously provide inmates with information and to better inform inmates regarding victim advocacy services and programs offered by the Pee Dee Coalition Against Domestic and Sexual Assault Center. Calls to Pee Dee are confidential. Inmates are not required to enter PII to make a *63 call on the inmate phones. Evans met requirements for Standard 115.53.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. MOU between SCDC and Statewide Partnership for Victim Services (10)
5. Inmate Handbook (English)
6. Inmate Handbook (Spanish)
7. Interviews with the following:
 - a. Staff (Random and Specialized)
 - b. Inmates (Random and Targeted)
 - c. Associate Warden, PREA Compliance Manager (PCM)

- d. PREA Coordinator
- e. Pee Dee Coalition Against Domestic and Sexual Assault Center

Corrective action: None required

Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? Yes No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both addressed the requirements of Standard 115.54.

SCDC has created a brochure called "Let's Talk About Safety". The brochure discusses the Agency's Zero Tolerance Policy, sexual safety tips, PREA reporting information, sexual assault and inmate rights regarding sexual abuse and sexual harassment. Inclusive in the brochure was the address to the South Carolina Law Enforcement Division (SLED) at: P.O. Box 21398 Columbia, SC 29221. SCDC also has an anonymous PREA tip link of the Agency's website. Third parties can complete a report and if necessary, remain anonymous. The tip line allows third-party reporters to indicate the date of the incident, location of the incident, type of incident (sexual harassment vs. sexual abuse) and describe in details of the incident the third-party is reporting. Evans met the requirements of Standard 115.54.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. MOU between SCDC and Statewide Partnership for Victim Services (10)
5. SCDC PREA Tip line
6. SCDC main website
7. Inmate Handbook
8. Interviews with the following:
 - a. Staff (Random and Specialized)
 - b. Inmates (Random and Targeted)
 - c. Associate Warden, PREA Compliance Manager (PCM)
 - d. PREA Coordinator

Corrective action: None required

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? Yes No

115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain 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 No

115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?
 Yes No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? Yes No

115.61 (d)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? Yes No

115.61 (e)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, HS-18.07, Inmate Health Information, Prevention, OP-21.12, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address the requirements of Standard 115.61.

SCDC policy requires all staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the Agency. Interviews with sample participants (random and specialized staff) confirmed their understanding of each staff members role and responsibility in the event of a sexual abuse or sexual harassment incident.

Likewise, SCDC requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment.

Further, SCDC requires all staff to immediately report any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation.

SCDC Policy, HS-18.07, Inmate Health Information, indicates that the agency is committed to upholding the confidentiality and privacy of an inmate's medical history. Therefore, an inmate's medical history/record will be accessible to authorized SCDC personnel and others only for duly authorized purposes in accordance with applicable agency policies/procedures, American Correctional Association Standards, and state and federal statutes.

Interviews with (random and specialized staff) (100%) confirmed their understanding that apart from reporting to designated supervisors or officials, Evans staff always refrains from revealing any information related to a sexual abuse report to anyone other than decisionmakers involved in the investigation but only to the extent necessary, as specified in agency policy, to make a treatment plan, as part of the investigative process, and other security and management decisions.

According to specialized medical and mental health practitioners interviewed during the onsite portion of the audit, SCDC is committed to upholding the confidentiality and privacy of an inmate's medical history. Therefore, an inmate's medical history/record will be accessible to authorized SCDC personnel and others for duly authorized purposes only in accordance with applicable agency policies/procedures, American Correctional Association Standards, and state and federal statutes.

Medical and mental health practitioners (100%) sampled during the audit also confirmed that they are required to inform inmates of their professional duty to report sexual abuse, and the limitations of confidentiality, at the initiation of services. This information is consistent with a distributed 2019 memorandum from the Director of Nursing for the South Carolina Department of Corrections. The memorandum gives medical and mental health professionals clear written guidance that at the onset of every risk assessment staff shall inform inmates that:

- Questions contained in the risk screening instrument are private and confidential however,
- Medical and mental health professionals are required to report any allegation of sexual abuse/harassment that took place in a South Carolina Department of Corrections facility.
- Unless precluded by law medical and mental health professionals are required to report sexual abuse and to inform inmate of the limits of confidentiality at the initiation of services.
- An inmate is not required to answer any questions on the risk assessment instrument and there will be no punishment for refusing.

Likewise, the Auditor verified that medical and mental health practitioners who participated in the audit sample, informed inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. The inmate population assigned to Evans are over the age of 18 years old. Furthermore, if the alleged victim is considered a vulnerable adult under a State or local vulnerable persons statute the agency would report the allegation to the designated State or local service agency under applicable mandatory reporting laws. The Auditor interviewed the mental health practitioner. He confirmed his understanding of his mandate to inform inmates his duty as a mental health practitioner to report, and the limitations of confidentiality, at the initiation of services. The mental health practitioner provided the

Auditor with ten (10) examples of inmate notifications relative to Standard 115.61(c) provided by the mental health practitioner.

Random and specialized staff interviewed during the onsite portion of the audit all agreed that they have a duty to accept reports of all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports and alert the PREA Compliance Manager. The PREA Compliance Manager will in turn alert the Warden, the appropriate investigator (administrative or criminal) and the PREA Coordinator of the allegations. Evans met the requirements of Standard 115.61

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. Interviews with the following:
 - a. Staff (Random and Specialized)
 - b. Associate Warden, PREA Compliance Manager (PCM)
 - c. PREA Coordinator
 - d. Warden
 - e. Specialized staff
 - f. Random staff

Corrective action: None required

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, OP-22.23, Statewide Protective Custody; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address the requirements of Standard 115.62.

Staff (random and specialized) members interviewed were very aware of their duties and responsibilities when they become aware or suspect that an inmate is being sexually abused or sexually harassed. All staff (random and specialized) (100%) indicated they would act immediately to protect the inmate, including separating the victim/predator, securing the scene to protect possible evidence, preventing the destruction of potential evidence and contacting the Shift Supervision, PREA Coordinator, Warden, Associate Warden/PREA Compliance Manager, Major, Manager, investigator, mental health staff and medical staff. During the Auditor's interview with the PREA Compliance Manager he confirmed information contained in the PAQ that in the past 12 months, there were one incident in which Evans staff determined that an inmate was subject to a substantial risk of imminent sexual abuse. Evans Correctional Institution met the requirements for Standard 115.62.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, OP-22.23, Statewide Protective Custody
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. Interviews with the following:
 - a. Staff (Random and Specialized)
 - b. Inmates (Random and Targeted)
 - c. Associate Warden, PREA Compliance Manager (PCM)
 - d. PREA Coordinator
 - e. Warden

Corrective action: None required

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)

- Upon receiving an allegation that an inmate 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 No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? Yes No

115.63 (c)

- Does the agency document that it has provided such notification? Yes No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address the requirements of Standard 115.63.

Policy requires that any inmate allegation of sexual abuse occurring while confined at another facility be reported to the Warden of the facility where the alleged abuse occurred, within 72 hours of receipt of the allegation. The Auditor interviewed the Warden and the PREA Compliance Manager to discuss established procedures that require the Warden to immediately notify the Chief Executive Officer of the other confinement facility, in writing, of the nature of the sexual abuse allegation. When the inmate reports sexual abuse/sexual harassment from state, non-bureau privatized facilities, jails, juvenile facilities, or inmate reentry centers, the Warden contacts the appropriate office of the facility and/or notifies the SCDC investigative unit, if appropriate. The notification is to occur as soon as possible, but always within 72 hours of receiving the allegation. Policy also requires that an investigation be initiated. In the past 12 months, Evans Correctional Institution received zero allegation from an inmate that he was abused while confined at another facility. Evans Correctional Institution met the requirements for Standard 115.63.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended

4. Interviews with the following:
- a. Associate Warden, PREA Compliance Manager (PCM)
 - b. PREA Coordinator
 - c. Warden

Corrective action: None required

Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?
 Yes No
- Upon learning of an allegation that an inmate 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 No
- Upon learning of an allegation that an inmate 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 No
- Upon learning of an allegation that an inmate 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 No

115.64 (b)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended address the requirements of Standard 115.64.

Each staff member interviewed during the Evans audit were all well versed in the First Responder Protocol for Evans Correctional Institution. Each staff member described in detail a role and responsibility to execute in the event there was an allegation of sexual abuse at the facility. All staff could discuss first responder training they received from SCDC regarding PREA. These trainings occur the first day of hire at the New Employee Orientation (NEO), the required training academy course, mandatory annual training at the facility and at shift briefings.

Staff (random and specialized) indicated they would separate the inmates, protect the victim, secure the crime scene, prevent the destruction of usable physical evidence, and contact the Team Responder, Security First Responder, Shift Supervisor, Warden, Deputy Warden/PREA Compliance Manager, Major, Police Services, and medical and mental health staff. If applicable the facility would confer with the Sexual Assault Nurse/SANE Examiner at McLeod Health – Cheraw or McLeod Health – Florence, and Pee Dee Coalition Against Domestic and Sexual Assault Center. The Evans Coordinated Response also could include involvement of the District Attorney, SLED and culminate after the investigation with an institutional SART and Sexual Abuse Incident Review meeting. Evans Correctional Institution met the requirements for Standard 115.64.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-2 Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. PREA Coordinated Response Protocol for Evans Correctional Institution
5. Interviews with the following:
 - a. Warden
 - b. Associate Warden, PREA Compliance Manager (PCM)
 - c. PREA Coordinator
 - d. Staff (Random and Specialized staff)
 - e. Major (intermediate or upper-level manager)
 - f. Victim Witness Assistance Network

Corrective action: None required

Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.65 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address the requirements of Standard 115.65.

Staff (random and specialized) indicated they would separate the inmates, protect the victim, secure the crime scene, prevent the destruction of usable physical evidence, and contact the

Evans Correctional Institution response team consist of security and non-security first responders. The response team includes positions such as the Shift Supervisor, Warden, Deputy Warden/PREA Compliance Manager, Major, Police Services, and medical and mental health staff. For further assistance, when applicable, the facility would confer with a qualified medical examiner at McLeod Health – Cheraw hospital or a Sexual Assault Nurse/SANE Examiner at the McLeod Health-Florence hospital, and the Pee Dee Coalition Against Domestic and Sexual Assault Center for victim advocacy and medical accompaniment. Furthermore, the PREA Coordinated Response Protocol for Evans Correctional Institution could also include the involvement of the District Attorney and conclude from a facility perspective with an Sexual Abuse Incident Review meeting as outlined in PREA standards. Evans Correctional Institution met the requirements for Standard 115.65.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. PREA Incident Checklist
5. PREA Coordinated Response Protocol for Evans Correctional
6. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)

- b. PREA Coordinator
- c. Staff (Random and Specialized)
- e. Victim Witness Assistance Network

Corrective action: None required

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.66 (a)

- 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 inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? Yes No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

There are no current agreements that limit the agency's ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. There have not been any collective bargaining agreements since August 20, 2012. Evans Correctional Institution met the requirements for Standard 115.66.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. Interviews with the following:

- a. Associate Warden, PREA Compliance Manager (PCM)
- b. PREA Coordinator

Corrective action: None required

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? Yes No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? Yes No

115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services, for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? Yes No

115.67 (c)

- 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 inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- 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 inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- 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: Act promptly to remedy any such retaliation? Yes No
- 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 inmate disciplinary reports? Yes No
- 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 inmate housing changes? Yes No

- 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 inmate program changes? Yes No
- 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 No
- 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 No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?
 Yes No

115.67 (e)

- 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 No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of

2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address Standard 115.67.

Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act prohibits any type of retaliation against any staff person or inmate who reports sexual abuse or sexual harassment or cooperates in related investigations. The PREA Compliance Manager is charged with monitoring retaliation. During the interview, he indicated that he follows up on all 30, 60 and 90-day reviews to ensure policy is being enforced and conducts periodic status checks on the frequency of incident reports, housing reassignments, and negative performance reviews/staff job reassignments, as required in 115.67c. In the event of possible retaliation, the PREA Compliance Manager indicated he would monitor the situation indefinitely. There have been no incidents of retaliation in the past 12 months. Compliance with this standard was determined by a review of policy/documentation and staff interviews. Evans Correctional Institution met the requirements for Standard 115.67.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. Assistant PREA Compliance Manager

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, OP-22.23, Statewide Protective Custody; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address the requirement of Standard 115.68.

The facility's use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse is based on the requirements of Standard 115.43. Interviews and documentation reviewed at Evans indicates that inmates at high risk for sexual victimization are prohibited from being placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers.

Interviews with staff that supervise inmates in segregation indicated that if an assessment cannot be immediately completed, Evans Correctional Institution would hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. The placement of a victim requires staff to assess and consider all appropriate alternatives for safeguarding alleged inmate victims of sexual abuse/sexual harassment.

Moreover, the PREA Compliance Manager confirmed with the Auditor that staff must first consider other alternatives based on the circumstances of the allegation before considering the placement of an inmate in protective custody, alternatives such as placing the inmate in another housing unit or transferring the inmate to another facility. Interviews with staff and the tour of the facility confirmed that there are usually viable alternatives to placing victims of sexual abuse/sexual harassment in protective custody.

The PREA Compliance Manager and Major each confirmed that to the extent possible, access to programs, privileges, education, and work opportunities would not be limited to inmates placed in protective custody for reasons of sexual abuse or sexual harassment. Restrictions of programs, privileges, education, or work would be documented by the facility. There were zero inmates placed in post-allegation protective custody status within the last twelve months. Compliance with this standard was determined by a review of policy and supporting documentation, as well as a tour of the facility and staff interviews. Evans Correctional Institution met the requirements for Standard 115.68.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, OP-22.23, Statewide Protective Custody
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manger (PCM)
 - b. Major
 - c. Segregation Supervisor
 - d. PREA Coordinator
 - e. Staff (Random and Specialized)

Corrective action: None required

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.71 (a)

- 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/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA

115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? Yes No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? Yes No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?
 Yes No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? Yes No

115.71 (d)

- 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 No

115.71 (e)

- 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 inmate or staff? Yes No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? Yes No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? Yes No
- 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 No

115.71 (g)

- 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 No

115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? Yes No

115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? Yes No

115.71 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? Yes No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

- 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 115.21(a).) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both addressed the requirement in Standard 115.71.

According to the Assistant Deputy Director of Police Services, SCDC conducts its own investigations into allegations of sexual abuse and sexual harassment, and it does so promptly, thoroughly, and objectively. The Agency conducts such investigations for all allegations, including third party and anonymous reports. The Auditor interviewed the Assistant Deputy Director of Police Services at Evans Correctional Institution. The Assistant Deputy Director detailed the SCDC investigative process from the initiation of an investigation to the closure of an investigation or referral to prosecution in the District Attorney's office.

Currently, SCDC Police Services statewide has forty (40) investigators, who are Class 1 Police Officers. These investigators are assigned to a region in the state. Using a regional approach, the state is divided into four (4) regions. Each region has five (5) investigators assigned with one (1) supervising manager for each respective region. Each region is task with the responsibility of performing a variety of types of investigations to include PREA investigations.

When sexual abuse is alleged, SCDC utilizes investigators who have received specialized training in sexual abuse investigations as required by Standard 115.34. The Auditor sample and verified certificates of completion of specialized investigators training complied with Standard 115.34. Interviews with the PREA Compliance Manager/Administrative PREA Investigator and the Assistant Deputy Director of Police Services confirmed in separate interviews that investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data, interview alleged victims, suspected perpetrators, and witnesses, review prior reports and complaints of sexual abuse involving the suspected perpetrator, assess the credibility of an alleged victim, suspect, or witness on an individual basis and not based on that individual's status as inmate or staff, investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding. The Auditor found that criminal investigations were 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. More, all substantiated allegations of conduct that appears to be criminal are referred for prosecution.

The PREA Compliance Manager indicated during his interview that administrative and criminal investigations include an effort to determine whether staff actions or failures to act contributed to the sexual abuse/sexual harassment. Administrative and criminal investigations are documented in written reports. PREA investigative reports include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

The Auditor reviewed a sample of PREA investigations from Evans. Each report included a narrative from all parties, the original complaint from the victim and witness statements along with a description of evident related to the incident.

SCDC implemented a policy change to address dissent in the record retention language. The changes include language such as:

5.1 The Agency's PREA Coordinator will be responsible for compiling records and reporting statistical data to the US Department of Justice (DOJ) as required by PREA of 2003, and to all state oversight agencies.

5.2 Case Records: All institutions operated by or contracted with SCDC will collect data regarding all allegations of sexual abuse and sexual harassment daily. All information regarding allegations, investigations, dispositions, and subsequent actions will be electronically filed and a hard copy retained by the institution.

5.3 All case records associated with claims of sexual abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings and recommendations for post-release treatment and/or counseling are retained in accordance with OP-21.09, "Inmate Records" and HS-18.07, "Inmate Health Information". (4-4281-8).

10.4 The agency, through the PREA Coordinator, will retain all investigative written reports regarding sexual abuse/sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five year

The new language mentioned above requires the PREA Coordinator to maintain data collected in accordance standards outlined in the Prison Rape Elimination Act (PREA). Furthermore, SCDC has task the PREA Coordinator with the responsibility to ensure that data collection pursuant to the PREA Standards is securely retained for at least 10 years after the date of the initial collection. [PREA Standard(s) §115.89].

Compliance with this standard was determined by a review of policy/documentation, investigative files, and staff interviews. Evans Correctional Institution met the requirements for Standard 115.71.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. PREA Coordinator
 - c. Staff (Random and Specialized)

Corrective action:

Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.72 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address the requirement of Standard 115.72. The evidence standard is a preponderance of the evidence in determining whether allegations of sexual abuse/sexual harassment is substantiated. When interviewed, the PREA Coordinator was aware of the evidence standard. The evidence standard was utilized in the cases reviewed by the Auditor. Evans Correctional Institution met the requirements for Standard 115.72.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. Interviews with the following:
 - a. PREA Coordinator

Corrective action: None required

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.73 (a)

- Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? Yes No

115.73 (b)

- If the agency did not conduct the investigation into an inmate'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 inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) Yes No NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer posted within the inmate's unit? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer employed at the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (d)

- Following an inmate's allegation that he or she has been sexually abused by another inmate, 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 No
- Following an inmate's allegation that he or she has been sexually abused by another inmate, 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 No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? Yes No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address the requirements of Standard 115.73.

According to the PREA Compliance Manager following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, Evans informs the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The Auditor verified compliance with this standard by reviewing closed investigative reports for the facility. The PREA Compliance Manager detailed for the Auditor a litany of investigative administrative responsibilities such as:

1). Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless SCDC has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer posted within the inmate's unit,

2). Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless SCDC has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer employed at the facility,

3). Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, SCDC would inform the inmate whenever: SCDC learns that the staff member has been indicted on a charge related to sexual abuse in at Evans,

4). Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless SCDC has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: SCDC learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

5). Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: SCDC learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility.

6). Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: SCDC learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

Compliance with this standard was determined by a review of policy/documentation, investigative files, and staff interviews. Documentation is maintained in the investigative file. Compliance with this standard was determined by a review of policy, an examination of the written notices, and staff interviews. Evans Correctional Institution met the requirements for Standard 115.73.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
4. PREA Investigation Tracking Log
5. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. PREA Coordinator

Corrective action: None required

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? Yes No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? Yes No

115.76 (c)

- 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 No

115.76 (d)

- 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 No
- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, ADM-11.39, Staff Sexual Misconduct with Inmates; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address the requirements of Standard 115.76.

Employees are subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies. There have been no reported cases of inmates engaging in sexual activity with staff in the past 12 months and no staff members were disciplined or terminated for violation of agency policy. All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff that would have been terminated if not for their resignation, may be reported to criminal investigators and to any law enforcement or relevant professional/certifying/licensing agencies by the SCDC, unless the activity was clearly not criminal. Compliance with this standard was determined by a review of policy/documentation and staff interviews. Evans Correctional Institution met the requirements for Standard 115.76.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, ADM-11.39, Staff Sexual Misconduct with Inmates
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. PREA Coordinator
 - c. Assistant PREA Compliance Manager

Corrective action: None required

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? Yes No

115.77 (b)

- 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 inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, ADM-11.39, Staff Sexual Misconduct with Inmates; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address the requirements of Standard 115.77.

Volunteerism has been suspended due to the pandemic since the beginning of 2020. Contractor access to the facility has been limited to essential work only. The Warden confirmed that any contractor or volunteer who engages in sexual abuse/sexual harassment would be prohibited from contact with inmates and would be reported to the appropriate investigator, law enforcement, or relevant professional/licensing/certifying bodies, unless the activity was clearly not criminal in nature. In non-criminal cases, the South Carolina Department of Corrections would take appropriate remedial measures and consider whether to prohibit further contact with inmates. During the past 12 months, there were zero incidents where a contractor or volunteer was accused or found guilty of sexual abuse or sexual harassment. The Auditor confirmed information contained in the PAQ regarding this standard with the PREA Compliance Manager and Chaplain. Compliance with this standard was determined by a review of policy and volunteer/contractor training files and volunteer/contractor and staff interviews. Evans Correctional Institution met the requirements for Standard 115.77.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, ADM-11.39, Staff Sexual Misconduct with Inmates
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. Investigative reports
6. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. PREA Coordinator
 - c. Chaplain
 - d. Warden

Corrective action: None required

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? Yes No

115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? Yes No

115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? Yes No

115.78 (d)

- 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 require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? Yes No

115.78 (e)

- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? Yes No

115.78 (f)

- 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 No

115.78 (g)

- If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, HS-19.06, "Mental Health Services – Disciplinary Detention for Inmates Classified as Mentally Ill"; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79, Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address Standard 115.78.

South Carolina Department of Corrections has a formal disciplinary process in place following a guilty finding of inmate-on-inmate sexual abuse or criminal finding of guilt for inmate-on-inmate sexual abuse when inmates violate Agency rules which includes incidents of sexual harassment.

Sexual abuse is specifically defined as persons regardless of gender, consent, coercion, force of threat involving non-consensual touching by force or threat of force, as the greatest severity level prohibited act. The inmate penal code identifies inmates engaging in sexual acts and making sexual proposals or threats to another as a high severity level prohibited act. More, SCDC prohibits consensual sex between inmates but it does not constitute sexual abuse. Non-consensual sex or sexual harassment of any nature is prohibited and will result in a disciplinary action.

Interviews with the PREA Coordinator support compliance with this standard. The PREA Coordinator and the PREA Compliance Manager indicated that an inmate's mental disabilities or mental illness would be considered when determining the type of sanction, if any, should be imposed.

Specialized staff (mental health) interviewed confirmed that if mental disabilities or mental illness is a factor, the facility considers the offer of therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse. Compliance with this standard was determined by a review of policy/documentation, an examination of the inmate penal code, and staff interviews. Evans Correctional Institution met the requirements for Standard 115.78.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, HS-19.06, "Mental Health Services – Disciplinary Detention for Inmates Classified as Mentally Ill"
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. Facility tour of segregation housing
5. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. PREA Coordinator
 - c. Specialized staff interviews
 - d. Random and targeted inmates
 - e. Inmates: Segregation interviews (2)

Corrective action: None required

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)
 Yes No NA

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes No NA

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? Yes No

115.81 (d)

- 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 No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? Yes No

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, HS-18.13, Health Screening and Exams; South Carolina Department of Corrections, Policy, OP-21.04, Inmate Classification Plan; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address the requirements of Standard 115.81.

Interviews with health and psychology services staff confirmed that Evans Correctional Institution has a system for collecting medical and mental health information on inmates. The system allows medical and mental health staff to provide an initial assessment and continued re-assessment and follow up services to the inmates.

Intake Screening. All newly admitted and interfacility transferred inmates are required to be screened by health services staff upon admission to the facility prior to placement in general population. A mental health referral and evaluation by mental health staff within 24 hours of referral is also required for the following circumstances such as:

- A. Inmates incarcerated for the first time;
- B. Inmates discharged from a psychiatric facility within the last 30 days;
- C. Inmates who, within 30 days of incarceration, have displayed or indicated a suicidal ideation but lacked a plan to carry out the suicide;
- D. Inmates with mental health concerns as identified by the court, or as reported by a concerned party;
- E. Inmates with a history (within the past three (3) years) of suicide attempts or plans, either self-reported or reported by a concerned party.

Inmates with a history of suicide attempts or ideation beyond three (3) years or inmates currently participating in outpatient mental health programs or services must be seen by mental health staff within 72 hours of admission.

Inmates indicating having experienced prior sexual victimization or prior perpetration of sexual abuse, whether it occurred in an institutional setting or in the community, shall be offered a follow up meeting with a medical or mental health practitioner within 14 days of the initial screening.

Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal,

State, or local law. Mental health practitioners are required to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. All mandatory reporting laws for allegations of sexual abuse must be followed.

Health care professionals who were interviewed during the audit confirmed that treatment services are offered without financial cost to the inmate. When indicated, specialized medical and mental health professionals confirmed a duty to offer a follow-up meeting with a mental health professional within 14 days of the intake screening with inmates having experienced prior sexual victimization or prior perpetration of sexual abuse.

Specialized staff interviews with medical and mental health professionals confirmed that inmates signed and dated informed consents before reporting prior sexual victimization which did not occur in an institutional setting is disclosed to need-to-know staff. Evans Correctional Institution does not house inmates under the age of 18. Electronic medical records are password protected. All medical, mental health and PREA related information is handled confidentially and interviews with the intake screening staff support this fact. Evans Correctional Institution met the requirements for Standard 115.81.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and
3. Response to Sexual Abuse and Sexual Harassment
4. South Carolina Department of Corrections, Policy, HS-18.13, Health Screening and Exams
5. South Carolina Department of Corrections, Policy, OP-21.04, Inmate Classification Plan
6. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
7. PREA Medical and Mental Health Services Log Sample
8. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. Specialized (medical/mental health) staff interviews

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.82 (a)

- Do inmate 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 No

115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? Yes No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

115.82 (c)

- Are inmate 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 No

115.82 (d)

- Are treatment services 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? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, HS-18.15, Levels of Care; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address Standard 115.82.

Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment mandates that Evans take preliminary steps to protect the victim pursuant to § 115.62. Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of emergency medical treatment and crisis intervention services are determined by medical and mental health practitioners according to their professional judgment, as confirmed by the QMHP and the facility Health Administrator, during the onsite portion of this audit. Random staff were aware of their role as first responders and shift supervisors, to immediately notify the appropriate medical and mental health practitioners of a sexual assault. Agency policy prohibits inmate co-pays for medical treatment of sexual abuse. All treatment is offered at no financial cost to the inmate. Inmate victims of sexual abuse, while incarcerated, are offered information about timely access to information on sexually transmitted infection prophylaxis, in accordance with professionally accepted standards of care.

Medical practitioners are on duty daily, seven days a week and are available for consultation or call-back on off duty hours. The mental health practitioner was available five days per week and was also available for call-back on off duty hours. Problematic, during the onsite audit, Evans employed one mental health

practitioner for the entire inmate population. Since the onsite audit, the agency has hired a second mental health practitioner.

Victim advocacy services are offered through trained advocates. South Carolina Department of Corrections has a statewide partnership agreement with multiple sexual assault centers across the state. The ten sexual assault centers provide hundreds of hours of support to victims of sexual assault, including individual face-to-face contacts, group sessions, written correspondence, and phone calls through toll-free hotline support.

The Pee Dee Coalition Against Domestic and Sexual Assault Center, serves – a 6-county service area that includes Florence, Darlington, Chesterfield, Marlboro, Dillon, Marion, and Williamsburg counties. Evans Correctional Institution is in the service area for the Pee Dee Coalition Against Domestic and Sexual Assault Center. The Auditor verified that the Pee Dee Coalition offers highly specialized and comprehensive services to assist all victims of domestic violence and sexual assault.

The Pee Dee Coalition Against Domestic and Sexual Assault Center, provides a 24-hour crisis hotline: (843) 669-4600, emergency services, counseling, support services, children services, victim advocacy, community educational services and shelter placement. Specifically, support services offered by Pee Dee Coalition include goal planning, job skills training, parenting skills training, resources, and referrals, 24-hour hospital medical accompaniment, and onsite mental health services. Counseling services are also offered to perpetrators of incest, violence, and batterers. Inmates can call the Pee Dee Coalition Against Domestic and Sexual Assault Center by dialing *63 on the inmate phone. The call is confidential, inmates are not required to enter their inmate Personal Identification Number (PIN) to make the call.

Moreover, South Carolina Department of Corrections offers all victims of sexual abuse access to forensic medical examinations at McLeod Health - Cheraw, without financial cost, where evidentiarily or medically appropriate. Inmate victims of sexual abuse treated at McLeod Health – Cheraw, would be treated by a qualified medical practitioner according to a hospital representative. The Auditor also spoke by phone to a representative from the South Carolina Victim Witness Assistance Network (SCVAN), the Statewide Forensic Nurse Examiner (FNE) Program Coordinator of the Statewide FNE Program. SCVAN has begun talks with McLeod Health-Cheraw, to provide SANE training to nurses at the hospital. According to SCVAN the closest hospital with SANE examiners is located 45 minutes away in Florence, SC.

In the past 12-month period, there was one allegation of sexual abuse that fell within the specimen collection time parameters. The evidence collected and the forensic examination was completed by a qualified medical practitioner from McLeod Health – Cheraw. The incident remains under investigation. DNA was obtained and sent to the crime lab for processing. The inmate was never charged for his forensic examination. Compliance with this standard was determined by a review of policy/documentation and interviews with a Victim Witness Assistance Coordinator and facility medical staff. Evans Correctional Institution met the requirements for Standard 115.82.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, HS-18.15, Levels of Care
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. Specialized staff (medical and mental health)
 - c. Assistant PREA Compliance Manager

- d. South Carolina Victim Witness Assistance Network (SCVAN), the Statewide Forensic Nurse Examiner (FNE) Program Coordinator of the Statewide FNE Program
- e. PREA Coordinator

6. Investigative reports

7. Internet search: South Carolina Victim Witness Assistance Network (SCVAN)

8. Internet search: Pee Dee Coalition Against Domestic and Sexual Assault Center

9. Internet search: McLeod Health – Cheraw

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? Yes No

115.83 (b)

- 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 No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? Yes No

115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. *Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*) Yes No NA

115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(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. *Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*) Yes No NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? Yes No

115.83 (g)

- Are treatment services 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? Yes No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, HS-18.15, Levels of Care; South Carolina Department of Corrections, Policy, PS-10.11, Sex Offender Treatment Program; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address Standard 115.83.

Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment, mandates that facilities offer medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse. Services are consistent with a community level of care, without financial cost to the inmate. The facility houses male inmates.

Specialized staff interviewed during the audit confirmed that inmate victims, while incarcerated, would be offered testing for sexually transmitted infections as deemed medically appropriate. The agency mandates that mental health evaluations are conducted on all known inmate-on-inmate abusers within at least 14 days of learning of such abuse history, but usually immediately, when staff members become aware of this information. Problematic, Evans did not attempt to conduct a mental health evaluation within 60 days of

learning of such abuse history and offer treatment of the sample participants and known inmate-on-inmate abusers when deemed appropriate by mental health practitioners and indicated in this standard. Problematic, during the onsite audit, Evans employed one mental health practitioner for the entire inmate population of 1081 inmates. Since the onsite audit, the agency has hired a second mental health practitioner. A review of documentation and interviews with medical/mental health staff support the finding that this facility follows this standard. Evans Correctional Institution now meets the requirements for Standard 115.83.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, HS-18.15, Levels of Care
4. South Carolina Department of Corrections, Policy, PS-10.11, Sex Offender Treatment Program
5. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
6. Interviews with the following:
 - a. Specialized staff (medical/mental health)

Corrective action:

Evans did not attempt to conduct a mental health evaluation within 60 days of learning of such abuse history and offer treatment of the sample participants and known inmate-on-inmate abusers when deemed appropriate by mental health practitioners and indicated in this standard. Since the onsite audit, the agency has hired a second mental health practitioner who has begun work in the facility. A second sample of inmate evaluations indicated that Evans now complies with this standard.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)

- 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 No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? Yes No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? Yes No

115.86 (d)

- 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 No
- 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 No
- 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 No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? Yes No

115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, GA-04.01, Strategic Planning; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as

amended collectively address Standard 115.86.

Administrative investigations were closed on all allegations of sexual harassment. The Police Services and SLED conduct criminal investigations. SCDC has several one (1) criminal investigation pending the receipt of findings from the crime lab. Administrative Investigations are completed by a facility investigator. The PREA Coordinator, Assistant Deputy Director of Police Services and the PREA South Carolina Department of Corrections Compliance Manager were all interviewed during the audit process. The Auditor found each reasonable informed concerning their area of responsibilities and duties.

The Evans Correctional Institution conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation unless the allegation was proven to be unfounded. Based on interviews with members of the facility incident review team, the review is conducted within 30 days of the conclusion of the investigation and consideration is given as to whether the incident was motivated by race, ethnicity, gender identity, status, perceived status, or gang affiliation.

The team also decides as to whether additional monitoring technology should be added to enhance staff supervision. The incident review team is comprised of upper-level management officials, including the Associate Warden/PCM, Major, investigator, PREA Coordinator, and medical and mental health representatives. All required sexual abuse incident reviews were completed at the conclusion of each substantiated and unsubstantiated allegation and each incident were thoroughly documented. The PREA Compliance Manager indicated that the incident review team would seek additional information from other staff, as needed, to ensure a thorough review has been completed. Evans Correctional Institution met the requirements for Standard 115.86.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, GA-04.01, Strategic Planning
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. PREA Coordinator
 - c. Assistant PREA Compliance Manager

Corrective action: None required

Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.87 (a)

- 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 No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually?
 Yes No

115.87 (c)

- 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 No

115.87 (d)

- 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 No

115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) Yes No NA

115.87 (f)

- 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.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment; South Carolina Department of Corrections, Policy, GA-04.01, Strategic Planning; and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended collectively address the requirements of Standard 115.87.

SCDC collects accurate, uniform data for every allegation of sexual abuse/sexual harassment

by using a standardized instrument. As confirmed by a review of 2019 SCDC Annual Report, the facility collects accurate, uniform data for every allegation of sexual abuse/sexual harassment by using a standardized instrument. SCDC tracks information concerning sexual abuse using data from the facilities. SCDC uses a computerized data management program.

The data collected includes the information necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The agency aggregates and reviews all data annually. Upon request, the agency would provide all such data from the previous calendar year to the Department of Justice. Facility compliance with this standard was also determined by a review of policy, a review of the tracking documentation and staff interviews. The PREA Coordinator works in conjunction with each PREA Compliance Managers to maintain and collect data required to meet this standard. The PREA Coordinator confirmed the process by interview. Evans Correctional Institution met the requirements for Standard 115.87.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. South Carolina Department of Corrections, Policy, GA-04.01, Strategic Planning
4. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
5. Interviews with the following:
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. PREA Coordinator

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 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 No
- Does the agency review data collected and aggregated pursuant to § 115.87 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 No
- Does the agency review data collected and aggregated pursuant to § 115.87 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 No

115.88 (b)

- 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 No

115.88 (c)

- 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 No

115.88 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address Standard 115.88.

South Carolina Department of Corrections reviews and assesses all sexual abuse/sexual harassment data at least annually to improve the effectiveness of its sexual abuse prevention, detection, and response policies. The identification of trends, issues or problematic areas are a priority and, if discovered and a corrective action is initiated. The PREA Compliance Manager forwards data to the SCDC/PREA Coordinator. An annual report is prepared by the PREA Coordinator and placed on the SCDC website after review and approval from upper management to the SCDC Director. Compliance with this standard was determined by a review of policy/documentation and staff interviews. Evans Correctional Institution met the requirements for Standard 115.88.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment

3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended

4. Interviews with the following:

- a. Associate Warden, PREA Compliance Manager (PCM)
- b. PREA Coordinator

Corrective action: None required

Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
 Yes No

115.89 (b)

- 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 No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? Yes No

115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment and the Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended both address Standard 115.89.

SCDC adopted a policy change to address conflictual State record retention language to comply with PREA Standard 115.71 and 115.89. The new language requires the Agency to maintain data collected in accordance the National PREA Standards and with SCDC Policy OP-21.10, Agency Records Management. SCDC has task the PREA Coordinator with the responsibility to ensure that data collected pursuant to the PREA Standards are securely retained for at least 10 years after the date of the initial collection. [PREA Standard(s) §115.89].

SCDC Retention Schedules indicates that Agency records shall be retained in accordance with applicable records retention schedules as follows:

The PREA Coordinator reviews data compiled by each SCDC facility and issues a report to the Commissioner of the South Carolina Department of Corrections on an annual basis. The data is securely retained and published on the SCDC website after the removal of all personal identifying information. The reports cover all data noted in this standard. After corrective action

Evans Correctional Institution met the requirements for Standard 115.89.

Policy, Materials, Interviews and Other Evidence Reviewed

1. Pre-Audit Questionnaire
2. South Carolina Department of Corrections, Policy, OP-21.12, Prevention, Detection and Response to Sexual Abuse and Sexual Harassment
3. Prison Rape Elimination Act of 2003 (PREA, P.L. 108-79; Section 44-23-1150, South Carolina Code of Laws, 1076) as amended
 - a. Associate Warden, PREA Compliance Manager (PCM)
 - b. PREA Coordinator
4. Internet search: South Carolina Department of Correction, PREA Reports

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.401 (a)

- 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 No

115.401 (b)

- Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.) Yes 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 No NA
- 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.) Yes No NA

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility? Yes No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Yes No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? Yes No

115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Because Standard 115.401 subsection (a) is “purely informational” a “no” response and the facts related to this substandard did not influence the Auditor’s decision to find this substandard in compliance.

This is the first PREA audit of this facility. Since 2018 the Agency has made its best efforts to ensure that at least one-third of each facility type operated by the Agency, or by a private organization on behalf of the Agency, either has been audited or is scheduled to be audited. In 2019, SCDC institutions were audited for compliance with the Prison Rape Elimination Act (PREA) and three final reports were issued to the Agency. Several final PREA reports are forthcoming. Currently, the Agency has contracted with multiple PREA Auditors to facilitate compliance with Standard §115.401. According to the PREA Coordinator, by contracting multiple PREA Auditors SCDC is ensuring that they meet the requirement of this standard by having a third of their institutions audited per cycle.

In 2020 SCDC scheduled seven (7) correctional facilities to be audited as prescribed by Standard §115.401(b). Moreover, from the South Carolina Department of Corrections’ website the Auditor found the 2019 SCDC Annual PREA Report supports information provided by the PREA Coordinator during his interview which discussed Standard §115.401.

The Auditor was allowed access to all areas of the facility and had access to all required supporting documentation. The Auditor was able to conduct private interviews with both inmates and staff. The Auditor was provided supporting documentation before and during the audit. Notifications of the audit posted throughout the Evans Correctional Institution allowed inmates to send confidential letters to the Auditor prior to the audit. There were no confidential letters mailed to the Auditor because of the audit postings in the housing units. After corrective action taken Evans Correctional Institution met the requirements for Standard 115.401.

Note: It should be mentioned that the schedule outlined by the PREA Coordinator initially began as scheduled. The onset of the Corona 19 virus halted all PREA audits in SCDC out of an abundance of precaution for staff, inmates, active quarantines, and auditors alike. Audits were rescheduled for the latter part of 2020 according to the PREA Coordinator.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

- 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 that there has never been a Final Audit Report issued.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The Evans Correctional Institution has made its best effort to implemented policies, practices and procedures outlined in PREA standards. The Auditor reviewed applicable standards and through the review of supporting documentation, interviews with staff, inmates, and the observation of physical evidence, concluded that this facility fully meets and substantially complies in all material ways with the PREA standards for the relevant review period. SCDC policies are directly tied to the PREA standards and staff expectations. The public has access to reporting mechanisms and SCDC PREA trends data via the SCDC website. The Evans Correctional Institution currently complies with all applicable PREA standards and no further corrective actions are required. Evans Correctional Institution met the requirements for Standard 115.403.

Corrective action: None required

AUDITOR CERTIFICATION

I certify that:

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

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Sonya Love

11/20/2020

Auditor Signature

Date

¹ See additional instructions here: <https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110>.

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.