PREA AUDIT REPORT ☐ INTERIM ☒ FINAL

JUVENILE FACILITIES

Date of report: 2/8/2017

Auditor Information			
Auditor name: Martin Harrelson, Jennifer Hamilton			
Address: P. O. Box 191, Signal Mountain, Tn. 37377			
Email: harrelsonm@bellsouth.net			
Telephone number: 423-315-3546			
Date of facility visit: Feb.8,2017			
Facility Information			
Facility name: Sevier County Juvenile Facility			
Facility physical address: 157 W. Main Street Sevierville, TN 37862			
Facility mailing address: *(if different from above)* Click here to enter text.			
Facility telephone number: Click here to enter text.			
The facility is:	☐ Federal	☐ State	☒ County
	☐ Military	☐ Municipal	☐ Private for profit
	☐ Private not for profit		
Facility type:	☐ Correctional	☒ Detention	☐ Other
Name of facility's Chief Executive Officer: Steven D. Layman			
Number of staff assigned to the facility in the last 12 months: 16			
Designed facility capacity: 26			
Current population of facility: 7			
Facility security levels/inmate custody levels: Low, Medium, High			
Age range of the population: 12-18			
Name of PREA Compliance Manager: Joe Brown		**Title:** Lieutenant	
Email address: joebrown@seviercountytn.org		**Telephone number:** 865-774-3800	
Agency Information			
Name of agency: Sevier County Juvenile Facility			
Governing authority or parent agency: *(if applicable)* Sevier County Government			
Physical address: 157 W. Main Street, Sevierville, TN 37862			
Mailing address: *(if different from above)* Click here to enter text.			
Telephone number: 865-774=3800			
Agency Chief Executive Officer			
Name: Steven D. Layman		**Title:** Director	
Email address: slayman@seviercountytn.org		**Telephone number:** 865-774-3800	
Agency-Wide PREA Coordinator			
Name:		**Title:**	
Email address:		**Telephone number**	

AUDIT FINDINGS

NARRATIVE

The Prison Rape Elimination Act (PREA) on-site audit of the Sevier County Juvenile Detention Center was conducted on February 8, 2017 by Jennifer Hamilton and Martin Harrelson, as U.S. Department of Justice Certified PREA Auditors for juvenile facilities. Pre-audit preparation included a thorough review of all documentation and materials submitted by the facility along with the data included in the completed *Pre-Audit Questionnaire*. The documentation reviewed included agency policies, procedures, forms, education materials, training curriculum, organizational charts, posters, brochures and other PREA related materials that were provided to demonstrate compliance with the PREA standards.
During the on-site audit, the auditors were provided a private, accessible office in the facility from which to work and conduct confidential interviews. Formal personal interviews were conducted with facility staff, juveniles, staff, administration, volunteers, contractors, medical staff, mental health providers, district attorney who investigate child sexual abuse cases. The auditors interviewed all seven juveniles who were placed at the detention center during the audit. Staff members both front line and supervisory staff were interviewed representing all shifts (Included in the interview process were specialty staff including medical (contract staff), counseling, first responders, investigators, intake and screening, human resources and training individuals.) Also interviewed were the agency Director and PREA Compliance Manager. Juveniles were interviewed using the recommended DOJ protocols that question their knowledge of a variety of PREA protections generally and specifically their knowledge of reporting mechanisms available to residents to report abuse or harassment. Staff was questioned using the DOJ protocols that question their PREA training and overall knowledge of the agency's zero tolerance policy, reporting mechanisms available to residents and staff, the response protocols when a resident alleges abuse, and first responder duties. The auditors reviewed personnel files to determine compliance with training mandates and background check procedures. Case files for youth in the facility were reviewed to evaluate screening and intake procedures, resident education and other general programmatic areas. The Sevier County Detention Center reports no allegations of sexual abuse or sexual harassment in the past 12 months so the auditors were not able to review any investigations, related documentation or interview any victims.

After a brief introduction to administrative staff at the Sevier County Detention Center, the auditors toured the facility. The facility is a 26 bed facility. The facility has three units, one girls unit, one boys unit for misdemeanors and one boys unit for youth with felony charges. The detention center also has two segregation cells, used when the youth are initially brought in to the facility. The detention center has a school and has one contract teacher supplied by the local school district. All juveniles at the facility attend school daily, Monday through Friday. There is also a doctor that contracts with the facility and visits one to two days per week.
The facility has a control room and is monitored by security cameras. The facility has a visitation area where the juveniles are given no-contact visitation except for exigent circumstances. The youth are allowed visitation with their case manager, probation officer, and attorney. In addition, there were no disabled or limited-English proficient juveniles reported or observed by the auditors.

The Documentation and information provided to the auditors by the PAQ was immaculate. The PAQ documentation provided us with all the information needed to conduct the audit. PREA Policy was developed and implemented. The Detention Center had posters all around the facility with the 1-800 Number to call if the juvenile felt they had been sexually abused or sexually assaulted. There were also postings all around the facility regarding the audit. The posters and notices were in all the housing units, in the hallways, in the visitation area, Intake and in the school.

We interviewed the doctor for the facility, Community Crisis Intervention, a volunteer Chaplin and a contractor from the school system. As stated above we interviewed staff from both shifts, both front line and supervisory. All staff as well as the above mentioned interviews, could answer everything we asked them regarding PREA by using the PREA questionnaires. The PREA Compliance Manager was more than helpful, having everything organized, the training, the training records etc. We interviewed the intake staff and obtained a copy of the screening instrument which is completed within 72 hours of the juvenile's entry to the center.
The PREA Compliance Manager was also interviewed as well as the Director of the facility. They both understand the PREA standards. Upon completion of the onsite audit, on February 8, 2017, a brief meeting was held with the administrative staff to discuss preliminary audit findings.

DESCRIPTION OF FACILITY CHARACTERISTICS

Sevier County Juvenile Facility is a 26 bed secure detention center located in Sevierville, Tennessee. The facility has three housing units: Female unit with 4 rooms, Male unit (housing misdemeanor offenders) with 8 rooms, Male Felony unit with 4 rooms, and 2 rooms in Intake. Eight rooms have double occupancy capacity however SCJF rarely houses 2 residents in one room. The facility has dayrooms, a visitation area, recreation area, classroom, and intake area. Cameras are through the facility. All blind spots have been eliminated. The facility also has audio monitoring throughout the building.

SUMMARY OF AUDIT FINDINGS

Click here to enter text.

Number of standards exceeded: 8

Number of standards met: 33

Number of standards not met: 0

Number of standards not applicable: 1

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

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review: Sevier County has a policy (35.01) that the facility shall sustain a secure and safe environment free from sexual abuse and / or harassment. This will be done through the education of mandated PREA Standards. The facility has in place a procedure for reporting any sexual abuse and or harassment in a manner that will create an environment free from fear of retaliation. Sevier County will maintain a "Zero Tolerance" mandate of all substantiated cases of sexual abuse and or harassment.

Interviews, Document Review, and Site Tour:
The auditors interviewed Specialized Staff, Random Staff, and all youth housed at the time of the audit.
Sevier County provided an organizational structure as follows: Superintendent, Lieutenant, 4 Sergeants and Direct Care Staff. Lieutenant is designated as PREA Compliance Manager, and indicated he has the appropriate time and authority to perform his duties.
The Policy outlines proper protocol used to prevent, detect, and respond to sexual abuse and sexual harassment.
Prohibited behaviors are clearly defined as well as sanctions for policy violations.

Standard 115.312 Contracting with other entities for the confinement of residents

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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Sevier County is the contracted facility to house residents for Juvenile Justice. They do not contract with other agencies to house Sevier County youth.

Standard 115.313 Supervision and monitoring

☒ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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Policy Review: Sevier County has a policy implementing a staffing plan providing adequate levels of staffing. All blind spots have been eliminated through direct supervision or video monitoring. In Superintendent's interview, it was confirmed that staffing ratios of 1:8 waking and 1:16 sleeping are being met. The staffing plan is annually reviewed, as well as on an ongoing basis. In the event of a staffing issue, the administrative staff rectifies the situation. Placement of staff, resident population, programming and possible incidents of abuse are taken into consideration when staffing is reviewed.
In the event of a deviation of staffing arises, the event is fully documented.
The facility has a policy (35.02) that outlines unannounced rounds. The facility performs unannounced rounds by upper level staff on at least a weekly basis, on all shifts, in all areas of the facility, and these rounds are fully documented.

Standard 115.315 Limits to cross-gender viewing and searches

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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Policy Review: Sevier County has a policy (24.07) limiting cross gender strip searches or body cavity searches except in exigent circumstances. All staff interviewed indicated that policy dictates another alternative must be found. An MOU exists stating no such search has been conducted.
The agency has a policy that cross gender pat down searches shall not be conducted except in exigent circumstances. A MOU indicates that no such searches have been conducted. A same sex patrol officer would be utilized in this situation.
The agency has implemented a policy (35.05) enabling residents to shower, perform bodily functions, and change clothing without staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in a situation of routine cell checks. The agency has a policy requiring staff of the opposite gender to announce their presence when entering an area housing the opposite gender. This was witnessed several times during the on-site tour and the procedure appeared to be institutionalized.
Policy 35.05 states" any cross gender viewing by SCJF officers will be limited to incidental situations only."
Staff is trained to conduct cross gender searches, but none had occurred within the last year.

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

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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SCJF has a policy that provides disabled residents the same opportunity to participate in the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment. Age appropriate materials are used to ensure an understanding of the agency's efforts. Staff has been

trained to recognize disabled youth and ensure, within their ability, that the youth understands their right to be safe.
The agency utilizes a local certified interpreter for all limited English speaking youth. The interpreter is called when necessary to make sure that the youth understands the PREA protocols. Non English speaking video, posters are utilized. The agency also has a power point in Spanish outlining PREA standards. The student handbook is also written in Spanish.

The agency has a policy that states" At no time will the staff of the Sevier County Juvenile Facility utilize a resident interpreter, unless in an exigent circumstance."

Standard 115.317 Hiring and promotion decisions

☒ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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Policy Review: SCJF has a policy preventing the hiring or promotion of anyone who has 1)engaged in sexual abuse in a jail, prison, lockup, community confinement, or juvenile facility; 2)has been convicted of engaging in sexual activity, or 3) has been civilly adjudicated to have engaged in the activity of sexual abuse or sexual harassment.
Any incident of sexual harassment will be considered regarding hiring, promotion or contract service providers.
All new hires are screened with fingerprint checks, background checks, TRAP, FOIL, NCIC and abuse registries.
All contractors undergo a background check, abuse registry check.
The agency has a policy to conduct background checks at least every 5 years. Every employee at the agency has had a fingerprint check and background check within the last 18 months. This was verified through personnel files.
All prospective employees are required to disclose any sexual misconduct. Further, current employees are required to report on an ongoing basis any sexual misconduct or harassment. This also applies to contractors.
The agency seeks legal counsel regarding reporting sexual misconduct to other agencies.

Standard 115.318 Upgrades to facilities and technologies

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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No substantial modification or expansion.

SCJF has a video and audio monitoring system. The agency has eliminated all blind spots within the facility. Cameras are in visitation, Intake, classroom, housing units, hallways, and recreation area.

Standard 115.321 Evidence protocol and forensic medical examinations

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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SCJF has a uniform evidence protocol for obtaining usable evidence to be used in administrative proceedings and prosecution.
The protocol used is developmentally appropriate for youth.
The agency offers any resident who has experienced sexual abuse access to a forensic medical examination. Safe Harbor Child Advocacy Center is utilized to facilitate such examinations, which employ SAFE/SANE staff.
Safe Harbor is available to offer a victim advocate in indicated. Safe Harbor will support the alleged victim through the process including forensic medical examination, investigative interviews, emotional support, and referrals.
The agency utilizes a local law enforcement investigator who is familiar with the PREA requirements in 115.321. This was confirmed in the interview with investigative staff.

Standard 115.322 Policies to ensure referrals of allegations for investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

The agency ensures that an investigation, administrative or criminal, is completed for all allegations of sexual abuse and sexual harassment.
There have been no reports of sexual abuse or sexual harassment in the last 12 months.

Standard 115.331 Employee training

☒ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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SCJF provides training to all employees on:

1) Its zero tolerance policy for sexual abuse and sexual harassment
2) How to fulfill their responsibilities regarding prevention, detection, reporting and response
3) Residents right to be free from sexual abuse and sexual harassment
4) The right to be free from retaliation for reporting abuse
5) Dynamics of sexual abuse and sexual harassment
6) Common reactions of juvenile victims of sexual abuse
7) How to detect and respond to signs of threatened and actual sexual abuse
8) How to avoid inappropriate relationships with residents
9) How to communicate effectively and professionally with residents, including LBGTI residents
10) How to comply with mandatory reporting laws
11) Laws of consent

SCJF trains all staff, male and female the same way.
SCJF trains all staff initially, and conducts ongoing training as indicated.
All training is documented.
During staff interviews, it became apparent that the PREA expectations are common knowledge and appear to be institutionalized.

Standard 115.332 Volunteer and contractor training

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

All agency contractors and volunteers receive training on their responsibility regarding prevention, detection and response to sexual abuse and sexual harassment. This training is documented and also confirmed through interviews.

Standard 115.333 Resident education

☒ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review, Interviews with residents:
SCJF gives educational information to residents during the intake process about the agency's zero tolerance policy regarding sexual abuse and sexual harassment. The information is age appropriate and is documented in the assessment tool.
The agency provides education through video regarding their right to be safe from sexual abuse and sexual harassment, and to be free from retaliation for reporting.

SCJF provides education that is accessible to all youth, including limited English proficient, deaf, visually impaired, or otherwise disabled. This is confirmed through evaluating the assessment tool and interviews with intake staff.
Throughout the facility there are posters in English and Spanish regarding PREA protocol. The video will be available soon on a tablet. SCJF is currently seeking the assistance of the local high school drama department to possibly create a video exclusive to their facility.

Standard 115.334 Specialized training: Investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

The SCJF uses an outside investigator to investigate allegations of sexual abuse or sexual harassment, once substantiated.

Standard 115.335 Specialized training: Medical and mental health care

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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SCJF ensures that all medical and mental health care staff has training in:

1) Detecting and assessing signs of sexual abuse and sexual harassment,
2) Preservation of physical evidence of sexual abuse,
3) Effectively responding to juvenile victims of sexual abuse and sexual harassment,
4) How to report allegations or suspicions of sexual abuse and sexual harassment

The agency solicits Safe Harbor for facilitation of forensic exams.
The facility documents training for medical and mental health staff. Interviews confirm the training.

Standard 115.341 Screening for risk of victimization and abusiveness

☒ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance

determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

SCJF screens all admissions at the time of intake. All aspects of PREA requirements are included, and youth are not classified into housing until the assessment is completed. All admissions are kept in intake for six hours for assessment and observation. Information gained during the assessment is used to reduce risk of sexual abuse by or upon a resident.
The screening tool includes questions regarding:

1) Prior victimization or abusiveness,
2) Gender non-conforming behavior,
3) Charges and offense history,
4) Emotional and cognitive affect,
5) Age
6) Physical appearance (size, stature)
7) Mental Illness or disabilities
8) Intellectual disabilities
9) The residents opinion on vulnerability
10) Physical disabilities
11) Any other information relevant to level of supervision, safety, or separation from risk

SCJF protects sensitive information regarding youth to prevent said information from being exploited. Information is on a need to know basis. This was confirmed through interviews with Superintendent, Compliance Manager, and Intake Staff responsible for screening.
SCJF performs the risk assessment prior to classification and during the first 6 hours of confinement.

Standard 115.342 Use of screening information

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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SCJF uses the screening information gained at intake to make decisions regarding housing, bed, education, work and other programing to ensure all youth remain safe from sexual abuse and harassment.
The agency has a policy regarding isolation. Isolation can only be used as a last resort to keep all residents safe. Policy states that isolation is only used short term, and other less restrictive alternatives are implemented as soon as possible. During isolation, youth are afforded all programs unless this compromises safety and security. Medical or mental health staff is available as needed while a resident is in isolation.
The facility has a policy that housing and other assignments are not made strictly based on gender identity.
The agency takes into consideration on a case by case basis which housing unit to place a transgender or intersex resident, considering the residents health and safety.
Policy states that placement of a transgender or intersex youth is reviewed twice a year.
Residents own perception is taken into consideration regarding their own safety
Policy states that transgender and intersex youth are showered separately from other residents.
In the event of using isolation, the facility documents the concern for the resident's safety as well as reasoning explaining why no alternative is available.
Every 30 days the facility examines the continuing need to isolate youth.

Standard 115.351 Resident reporting

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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Through interviews and policy review, is learned that the facility provides several ways for residents to report privately sexual abuse, sexual harassment, retaliation for reporting abuse or harassment.
The facility provides several ways for youth to report privately and anonymously to parties outside the agency. Youth are not detained solely for civil immigration purposes at SCJF.
Staff allows reports to be made in writing, verbally, anonymously and through third parties. All reports are fully documented.
All staff interviewed indicated that they have avenues to report sexual abuse privately.

Standard 115.352 Exhaustion of administrative remedies

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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SCJF has a grievance policy regarding no time limits on filing a grievance. The agency has no requirement that the youth making a complaint resolve the issue with staff. SCJF allows a resident making an allegation of sexual abuse without submitting it to a staff member subject to the complaint. Staff who are the subject of a complaint are not involved in the process.
A final decision by the agency on any grievance shall take place within 90 days. Third parties may file or assist youth in filing administrative remedy requests. Parents or legal guardians may file a grievance on behalf of a resident. The agency may discipline any resident filing a grievance in bad faith.

Standard 115.353 Resident access to outside confidential support services

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

SCJF provides outside support services for emotional support for abuse related issues. Information is supplied by posters and during intake. The information includes addresses, hotline numbers. Residents are informed before accessing services the extent that the access will be monitored.
The facility has no MOU with community service providers; however, in talking with Safe Harbor, they indicated that they would respond to any request for services.
Reasonable and confidential access to attorneys is allowed at SCJF, as well as reasonable access to parents or legal guardians.

Standard 115.354 Third-party reporting

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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The facility has a mechanism to receive third party reports of sexual abuse and sexual harassment, and this information is publicly displayed in the facility as well as shared during intake.

Standard 115.361 Staff and agency reporting duties

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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Policy requires all staff to immediately report knowledge of an incident of sexual abuse or harassment that occurred in any facility and obliges all staff to report any retaliation pertaining to an incident of abuse or harassment. All staff is knowledgeable of mandatory reporting laws. Information regarding an allegation of abuse or harassment is confidential and shall now be released to anyone except for investigative, treatment or security reasons.
Medical and mental health practitioners are required to report. Interviews confirm staff understanding of mandatory reporting and the requirement to inform youth of their responsibility to report.
Facility head is required to report an allegation of sexual abuse to DCS, parent, guardian, caseworker, or attorney within 14 days.
The Superintendent reports all allegations to investigators.

Standard 115.362 Agency protection duties

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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In the event a resident at the facility is in imminent risk of sexual abuse, staff takes immediate action to protect the resident. Immediate was defined by staff interviewed as right away. There have been no instances in the last 12 months.

Standard 115.363 Reporting to other confinement facilities

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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Interviews confirm all allegations of abuse while at another facility are passed along to the head of that facility and the investigative entity for that facility. This report is made no more than 24 hours after knowledge of the incident is learned. This report is documented.

Standard 115.364 Staff first responder duties

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Site Visit/Interviews

a) 1 The Sevier County Juvenile Detention Center has a first responder policy for allegations of sexual abuse.
The facility separates the victim and the abuser
Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence
If the abuse occurred within a specific time period that still allows for the collection of physical evidence, request that the victim not take any actions that could destroy any 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 the collection of physical evidence, ensure the alleged abuser does not take any actions to destroy physical evidence, including as appropriate, washing, brushing teeth, changing clothes, urinating,

defecating, smoking, drinking or eating.
This is documented in the Sevier Emergency Plan. Interviews with staff also corroborated that they knew the policy and procedure to follow as a first responder including all of the above.

b) 1 The Sevier County Juvenile Detention Center Policy requires that if the first responder is not a security staff member , that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify Security Staff. This is documented in the Sevier Emergency Plan. Staff interviews also corroborated this in their interviews.

b) 2 Of the number of times a non-security of the allegations that a juvenile was sexually abused made in the last 12 months the first responder was not a non-security staff was a first responder: there were no incidents in the past 12 months at the Sevier County Juvenile Detention Center.

a) 3 Of those allegations responded to by a non-security staff , that number of times that staff member:
Requested the alleged victim not take any actions that could destroy evidence 0
Notify Security Staff- There were no alleged incidents in the past 12 months at the Sevier County Juvenile Detention Center..

This was also corroborated through interviews with the staff and the PREA Compliance Manager and the Director.

Standard 115.365 Coordinated response

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Reviews/Interviews/Site Visit

a) 1 The Sevier County Juvenile Detention Center has a written Emergency Plan to coordinate actions to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators and facility leadership. This is documented in the Sevier County Juvenile Detention Emergency Plan
This standard was also corroborated by interviews with staff who knew about the Emergency plan.

Standard 115.366 Preservation of ability to protect residents from contact with abusers

☒ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(a) 1 The Sevier County Juvenile Detention Center has a policy to protect all juveniles and staff who report sexual abuse or sexual harassment or cooperate with a sexual abuse or sexual harassment investigation from retaliation by other juveniles or staff. This is documented in Sevier County Juvenile Detention Policy.

(b) 2 The agency designates a staff members or charges departments with monitoring of possible retaliation. Supervisory Staff along with the PREA Coordinator are charged with the issue of monitoring for possible retaliation.

(c)3 The facility monitors the conduct or treatment of all juveniles and staff who report sexual abuse and of juveniles who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by juveniles or staff, throughout their stay.

(c) 4 If yes how long does the facility monitor the conduct or treatment. The PREA Compliance Manager says this is monitored throughout the juveniles stay.

(c) 5 The facility acts promptly to remedy any retaliation. Yes if there were any retaliation action would be taken immediately. c) 4 The facility continues to monitor beyond 90 days if the initial monitoring indicates a continued need. Yes, but is very unlikely that a juvenile would be at the facility for more than 14 days. Sevier County is a short term secure facility

c) 6 The number of times an incident of retaliation occurred during the past 12 months. Sevier County Juvenile Detention reports there have been no reports of sexual abuse or retaliation in the past 12 months.

Standard 115.367 Agency protection against retaliation

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(c) 1 The Sevier County Juvenile Detention has a policy to protect all juveniles and staff who report sexual abuse or sexual harassment or cooperate with a sexual abuse or sexual harassment investigation from retaliation by other juveniles or staff. Sevier Policy.

(d) 2 The agency designates a staff members or charges departments with monitoring of possible retaliation. Supervisory Staff along with the PREA Coordinator are charged with the issue of monitoring for possible retaliation.

(c)3 The facility monitors the conduct or treatment of all juveniles and staff who report sexual abuse and of juveniles who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by juveniles or staff. Yes, throughout their stay.

(c) 4 If yes how long does the facility monitor the conduct or treatment. The PREA Compliance Manager says this is monitored throughout the juveniles stay.

(c) 5 The facility acts promptly to remedy any retaliation. Yes if there were any retaliation action would be taken immediately. c) 4 The facility continues to monitor beyond 90 days if the initial monitoring indicates a continued need. Yes, but is very unlikely that a juvenile would be at the facility for more than 14 days. Sevier County Detention is a short term secure facility

c) 6 The number of times an incident of retaliation occurred during the past 12 months. Sevier County Detention Center states there have been no reports of sexual abuse or retaliation in the past 12 months.

Standard 115.368 Post-allegation protective custody

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

a)1 The Sevier County Juvenile Detention Center has a policy that juveniles who allege to have suffered sexual abuse may only be placed in isolation as a last resort if less restrictive measures are inadequate to keep them and other juveniles safe , and only until an alternative means of keeping all juveniles safe can be arranged. Sevier Policy states above however there have not been any allegations in the past 12 months. Staff and PREA Compliance Manager were all aware of this policy and could articulate their understanding of the policy.

Standard 115.371 Criminal and administrative agency investigations

☒ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site visit

(a) 1 When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third party and anonymous reports.
Sevier County Juvenile Detention Center works cooperatively and collaboratively as a multidisciplinary team to ensure an effective coordinated response to child sexual abuse defined in TCA-9-4-213, 37-1-607 .Allegations in this agreement is signed and documented by the Sevier County Department of Children's Services Representative, the Sevier County District Attorney, The Sevier County Sheriff's Office Police Department, Sevier County Juvenile Court, and Safe Harbor Children's Advocacy Center (which represents all CAC Services, such as forensic interview, and mental health, and victim advocacy /support components).
Sevier County does their own administrative investigations if they do not rise to the level of criminal investigations which would fall under the grievance process.

(b) Where sexual abuse is alleged, the agency shall use investigators who have received special training involving juvenile victims pursuant to standard 115.334. (Members of the CPIT receive special sexual abuse training).

(c) Investigators shall gather and preserve , direct and circumstantial evidence , including any DNA evidence and any other electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. This is documented in the Sevier County Juvenile Detention Center Policy and is also documented in the Child Protective Investigative Team (CPIT) Protocol

(d) The facility shall not terminate an investigation solely because the source of the allegation recants the allegation. This is documented in Sevier County Policy.

(e) When the quality of evidence appears to support criminal prosecution, the facility shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Sevier County Detention works directly with the CPIT Team, all interviews would be coordinated to deter any obstacle to criminal prosecution. This is documented in the Sevier County Policy and CPIT Protocol. This was also corroborated by interviews with members of the CPIT Team including an assistant district attorney, a mental health representative, medical personnel and CAC staff, as well as staff of the Sevier County Staff.

(f) The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the

person's status as a resident or staff. No agency shall require a juvenile who has alleged sexual abuse to submit to a polygraph examination or any other truth telling device as a condition for proceeding with the allegation. This is documented in the Sevier County Policy and CPIT Protocol.

(g) Administrative Investigations:
   1. Shall include an effort to determine whether staff actions or failures to act contributed to the abuse and
   2. Shall be documented in a written report that includes a description of physical testimonial evidence, the reasoning behind credibility assessments and Investigative facts and findings.

(h) Criminal Investigations shall be documented in written report that contains a thorough description of physical evidence, testimonial and documentary evidence where feasible. This is documented in Sevier County Juvenile Detention Policy.

(i) Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution. This is documented in the Sevier County Juvenile Detention Policy as well as the CPIT Team. This was also corroborated by interviews with members of the CPIT Team and interviews of Sevier County Staff.

(j) The agency shall maintain all written reports referenced in paragraphs (g) and (h) of this section for as long as the alleged abuser is incarcerated or employed by the agency., plus five years , unless the abuse was committed by a juvenile resident and applicable law requires a shorter time period. There have been no reports of sexual abuse made at the Sevier County Juvenile Detention Center in the past 12 months. However, juvenile files are stored until the juveniles 25th birthday, so if there were an incident it would be stored until the juvenile's 25th birthday. Sevier County Juvenile Detention Center Policy and interview with the PREA Compliance Manager document this as well.

(k) The departure of the alleged abuser or victim from employment or control the facility does not provide basis for terminating an investigation. This is documented in Sevier County Policy and was also corroborated by interviews with assistant district attorney and other members of the CPIT Team.

(l) Any State entity or Department of Justice component that conducts such an investigation shall do so pursuant to the above requirements. Documented by Sevier County Policy and interviews with CPIT members.

(m) When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the process of the investigation. This is not usually the case at the Sevier County Juvenile Detention Center however there could possibly be an investigation by an outside authority and Sevier County staff would cooperate with an outside investigation. Sevier County Staff and interviews with the PREA Compliance Manager corroborate this information.

Standard 115.372 Evidentiary standard for administrative investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(a) Sevier County Juvenile Detention shall impose no standard of evidence higher than a preponderance of evidence in determining if the allegation of sexual abuse or sexual harassment is substantiated. Documented in Sevier County Juvenile Detention Policy. . The administrative investigation would be done by the PREA Compliance Manage at the Sevier County Juvenile Detention Center. The PREA Compliance Manager has a certificate of training for PREA Investigations inside a facility. The auditors were provided a copy of this certificate during the Interview with the PREA Compliance Manager.

Standard 115.373 Reporting to residents

☐ Exceeds Standard (substantially exceeds requirement of standard)

☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the

relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(a) Following an investigation into a juvenile's allegation of sexual abuse suffered in the Sevier County Juvenile Detention the juvenile shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. This is documented in Sevier County Detention Policy and in the Student Handbook. The PREA Compliance manager also corroborated this in the interview. There have been no incidents in the past 12 months so there was no documentation in the juvenile files

(b) If the Sevier County Juvenile Detention does not perform the investigation they will request the relevant information from Internal Affairs or other outside agency in order to inform the juvenile. This is documented in Sevier County Juvenile Detention Policy. Supported by the interview with the PREA Compliance Manager.

(c) Following a juveniles allegation that a staff member has committed sexual abuse against the juvenile, the facility shall subsequently inform the juvenile (unless the facility has determined the allegation is unfounded)
Whenever:
1. The staff member is no longer posted within the juveniles housing unit;
2. The staff member is no longer employed by the facility.
3. The facility learns that the staff member has been indicated on a charge related to sexual abuse within the facility;
4. The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

This information is documented in Sevier County Juvenile Detention Policy and corroborated by the PREA Compliance Manager.

(d) Following a juveniles allegation that he or she has been sexually abused by another juvenile the facility shall subsequently inform the alleged victim whenever:
1. The agency learns that the alleged abuser has been indicated on a charge of sexual abuse within the facility; or
2. The facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

This information is documented in Sevier County Juvenile Detention Policy and corroborated by the PREA Compliance Manager. However, there has not been an allegation of sexual abuse or sexual harassment in SCJF in the past 12 months so there were no reports to review or notifications to review.

(e) A facility's obligation to report under this standard shall terminate if the juvenile is released from the facility's custody. This is documented in the Sevier County Juvenile Detention Policy and corroborated by interview with the PREA Compliance Manager.

Standard 115.376 Disciplinary sanctions for staff

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(a) Sevier County Juvenile Detention employees shall be subject to sanctions up to and including termination for violating facility sexual abuse or sexual harassment policy. Documented by Sevier County Juvenile Detention Policy and corroborated by the PREA Compliance Manager's interview. There have no reports of sexual abuse or sexual harassment at Sevier County Juvenile Detention

in the past 12 months therefore there were no disciplinary sanction forms to review.

(b) Termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse. This is documented in the Sevier County Juvenile Detention Employee Manual. There have been no reports of sexual abuse against staff in the past 12 months therefore there were no staff terminated for violating the facility's sexual abuse or sexual harassment policies. There were no staff that received sanctions or resigned due to sexual abuse or sexual harassment allegations during the past 12 months. This was corroborated with random staff interviews and interview with the PREA Compliance Manager.

(c) Disciplinary sanctions for violations of facility policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed the staff member's disciplinary history and the sanctions imposed for comparable offenses by staff with similar histories. This is documented in the Sevier County Juvenile Detention Employee Manual. This was also corroborated in the interviews with the PREA Compliance Manager and other staff interviews. There have been no allegations and no sanctions related to sexual abuse or sexual harassment in the past 12 months. Therefore, there was no documentation to be reviewed.

(d) All terminations for volunteers of facility sexual abuse or sexual harassment policies shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and relevant to any relevant licensing bodies. This is documented in the Sevier County Juvenile Detention Volunteer Handbook. There have been no allegations of sexual harassment or sexual abuse in the past 12 months. Therefore there were no documents to be reviewed. This was also corroborated by interviews with The PREA Compliance Manager and Volunteer interviews.

Standard 115.377 Corrective action for contractors and volunteers

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(a) Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with juveniles and shall be reported to law enforcement agencies, unless the activity is clearly not criminal , and to relevant licensing bodies. This is documented in the Sevier County Human Resources Policy. All contractors and volunteers go through the same PREA Training as staff and are held to the same standard. Volunteers and Contractors must sign off after they receive the PREA Training and knowledge of ZERO TOLERANCE and the understanding they are held to the same standard as staff up to prosecution. This was also corroborated by The PREA Compliance Manager interviews, interviews with volunteers and contractors.

(b) The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with juveniles, in the case of sexual abuse or sexual harassment policies by a contractor or volunteer. This is documented in the Sevier County Juvenile Detention Human Resource Policy. There is Zero Tolerance for sexual abuse or sexual harassment by volunteers and contractors and appropriate measures up to prosecution is in place. This was corroborated by interviews with PREA Compliance Manager, Volunteer Interviews and Contractor Interviews.

Standard 115.378 Disciplinary sanctions for residents

☐ Exceeds Standard (substantially exceeds requirement of standard)

☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the

relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(a) A juvenile may be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that a juvenile has engaged in juvenile on juvenile sexual abuse or following a criminal finding of guilt for juvenile on juvenile sexual abuse. Sevier County Juvenile Detention Policy states that juveniles will be held accountable for any offense of sexual abuse with other juveniles. Sevier County Juvenile Detention has Zero Tolerance Policy on Sexual abuse.
Juveniles are subject to this policy and they are subject to a formal disciplinary procedure, disciplinary sanctions from an administrative finding or a criminal finding of guilt, up to prosecution. This was also corroborated by staff interviews and juvenile interviews as well as interview with PREA Compliance Manager.
There have been no disciplinary sanctions in the past 12 months in regards to sexual abuse or sexual harassment; therefore there were no sanctions to review.

(b) Any disciplinary sanctions shall be commensurate with the nature and circumstances of the abuse committed by the juvenile, the juvenile's disciplinary history, and sanctions imposed by other juveniles with similar histories. In the event a disciplinary sanction results in isolation of a juvenile, agencies shall not deny the juvenile large muscle exercise daily, or access to legally required education programming or special education services. Residents in insolation shall receive daily visits from medical or mental health care clinician. Juveniles shall also have access to work opportunities to the extent possible. This is documented in Sevier County Policy. Juveniles who are isolated are allowed one hour of large muscle exercise per day and they are allowed to continue their educational services, as well as be seen by medical staff daily. This was also corroborated by interviews with staff and an interview with a youth in isolation as well as the interview with the PREA Compliance Manager.
In the past 12 months there have been no juveniles placed in isolation due to a sanction for juvenile on juvenile sexual abuse or sexual harassment.

(c) The disciplinary process shall consider whether a juvenile's mental disabilities or mental illness contributed to his /her behavior when determining what type of sanction, if any shall be imposed. Resident disciplinary sanctions are documented in Sevier County Juvenile Detention Policy as well as the Student Handbook. There have been no disciplinary sanctions for sexual abuse /sexual harassment in the past 12 months so there were no sanctions to be reviewed, however, the policy and procedure are in place and documented to consider the juveniles mental disabilities or mental illness when making disciplinary decisions.

(d) If the facility offers therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to offer the offending resident participation in such interventions. The agency may require the juvenile in such interventions as a condition of access to any rewards based behavior management system or other behavioral based incentives, but not as a condition to access general programing or education. The Sevier County Juvenile Detention Center requires all juveniles to receive the mental health services they need. However the Sevier County Juvenile is a short term facility. However, the local mental health agency often comes and sees juveniles at the facility both for victims of sexual abuse as well as abusers. This was corroborated by the PREA Compliance Manager Interview and the local mental health providers.

(e) The agency may discipline a resident for sexual contact with staff only upon finding out that a staff member did not consent to such contact. This is documented in Sevier County Juvenile Detention Policy.

(f) For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged incident occurred shall not constitute lying even if an investigation does not establish sufficient evidence to substantiate the allegation. Documented in Sevier County Juvenile Detention. The Sevier County Juvenile Detention prohibits disciplinary action for a report made in good faith.

(g) An agency may, in its discretion, prohibit all sexual activity between juveniles and may discipline juveniles for such activity. An agency may not constitute, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced. Consensual activity is not considered to be sexual abuse although it violates Sevier County Juvenile Detention Policy unless there is a four year age difference. Policy and subjects the juvenile to sanctions. There is to be no sexual contact between juveniles at the facility. This is also documented in the Student Handbook and corroborated by student and staff interviews.

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

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(a) If the screening pursuant to 115.341 indicates that a juvenile has experienced prior victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. This is documented in the Sevier County Detention policy. The screening instrument at the Center indicates whether a youth has been sexually abused in the past. If the juvenile disclosing an incident of sexual abuse they will be referred to medical and mental health staff within 14 days of the screening. In the past12 months no juveniles have disclosed prior sexual abuse during the intake screening. Therefore there is no medical or mental health forms available for review.

(b) If the screening pursuant to 115.341 indicates that a resident has previously perpetrated sexual abuse, whether in an institutional setting or community, staff shall ensure the juvenile is offered a follow-up meeting to ensure that: the juvenile was offered a meeting with a mental health practitioner within 14 days. Sevier County Juvenile Detention makes this requirement in policy. There have been no youth that have disclosed prior perpetration during the intake screening at the Sevier Juvenile Detention Center in the past 12 months .Therefore there were no documents to review.

(c) Any information related to sexual victimization or abusiveness, occurred in an institutional setting shall be strictly limited to medical and mental health practitioners, and other staff as necessary to inform treatment plans, management decisions, including housing , bed, work, education and program assignments , or as otherwise required by Federal, State or local law. Sevier County Detention documents the information gained from the intake assessment be given on a need to know basis, for housing, bed, work, educational decisions and to ensure the safety of all the juveniles.

Review of juvenile records did not reveal any disclosures of juvenile prior victimization during the past 12 months. The PREA Compliance Manager interview stated there were no such disclosures in the past 12 months.

(d) Medical and Mental health practitioners shall obtain informed consent from juveniles before reporting information about prior victimization that did not occur in an institutional setting, unless the juvenile is under the age of 18 Sevier County houses juveniles between ages 12 and 18. All staff interviewed knew they were mandatory reporters of child sexual abuse and sexual harassment.

Standard 115.382 Access to emergency medical and mental health services

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(a) Juvenile victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope or which are determined by medical and mental health practitioners, according to their professional judgement. This is documented in the Sevier County Juvenile Detention Policy and CPIT Team Protocol, which includes medical and mental health professionals. This was also corroborated through interviews with members of the CPIT Team, medical and mental health members, and law enforcement interviews.

(b) If no qualified medical or mental health practitioners are on duty at the time the report is made, staff first responders shall take preliminary steps to protect the victim pursuant to 115.362 and shall immediately notify appropriate medical and mental health practitioners Sevier County Juvenile Detention Policy states that first responders are to make sure the alleged victim is safe. All first responders interviewed could articulate the actions they would take to protect the victim. Sevier County Juvenile Detention and the CPIT Team includes: medical and mental health practitioners. These members are available 24/7. The region has a Children's Hospital where medicals are conducted and a Child Advocacy Center where medicals are conducted.

(c) Juvenile victims of sexual abuse while incarcerated shall be offered timely information about timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professional accepted standards of care, where medically appropriate. Sevier County Detention works with the CPIT medical professionals to ensure that alleged victims of sexual abuse are offered timely medical treatment and all of the above if an incident were to occur. The staff at Sevier County Juvenile Detention Center know and could articulate their necessary duties to ensure that the juvenile receive immediate medical care and treatment. Interviews with staff, CPIT members. The PREA Compliance Manager also corroborated the above as does the documented CPIT with Policy.

(d) Treatment services shall be provided to the victim, without financial cost regardless if the victim names the abuser or cooperates with any investigation arising out of the incident. Sevier County Policy and the CPIT Protocol state victims are provided all medical services from an incident of sexual abuse with no financial cost, no matter the circumstances. This was corroborated with a member of the CPIT Team who was interviewed, both medical and mental health practitioners.

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

☒ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(a) The detention center shall offer medical and mental health evaluation and, as appropriate, treatment to all juveniles who have been victimized by sexual abuse in a juvenile facility. Sevier County Detention Policy documents that juveniles will receive medical and mental health evaluations who have been victimized at any juvenile facility. The CPIT also coo borates through interviews with CPIT members. (Child Protective Investigative Team).The juvenile would receive evaluations from Safe/Sane nurses and mental health services through the local mental health center or Knoxville Children's Hospital SANE nurse or pediatrician. Entitles from both these parties were interviewed by the auditors.

(b) The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Sevier County Policy documents this information. Interviews with medical and mental health staff also confirm this information. The Facility contracts with the local mental health facility which provides advocates, therapist and group counseling. The local mental health provider also provides treatment to abusers. There were no incidents reported in the past 12 months therefore there were no other records to review.

(c) The facility shall provide such victims with medical and mental health services consistent with community level of care. Sevier County Juvenile Detention Center Policy and CPIT Protocol both document that the juvenile receive care as all community residents. There have been no incidents reported in the last 12 months therefore, there were no records to review.

(d) Juvenile victims of vaginal penetration while incarcerated shall be offered pregnancy tests. This is documented in Sevier County Juvenile Facility Policy and by CPIT Protocol. There have been no incidents reported in the past 12 months therefore there were no other documents to review.

(e) If pregnancy results from conduct specified in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy –related medical services. Medical and Mental health members of the Sevier County Detention Center CPIT Team were interviewed and stated the juveniles would receive all medical services provided by the safe/sane nurses and mental health services by the mental health practitioner. There were no incidents of reports of sexual abuse at the SCJF therefore there were no juveniles to interview.

(f) Treatment services of sexual abuse victims while incarcerated shall be offered tests for sexually transmitted infections as medically

appropriate. This is done by the Safe/Sane nurses during the forensic medical exam. There have been no reports in the past 12 months at the Sevier County Juvenile Detention therefore there was no other documentation to review.

(g) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim cooperates with any investigation arising from the incident. This is documented in Sevier County Juvenile Detention Policy as well as the CPIT Team Members. There were no reports in the past 12 months verified by the interview with the PREA Compliance Manager and therefore there were no victims to interview or other documentation to review.

The facility shall attempt to conduct a mental health evaluation of all known juvenile on juvenile abusers within 60 days of learning of such abuse history and offer treatment which is deemed appropriate by mental health practitioners. Interview with the PREA

Standard 115.386 Sexual abuse incident reviews

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(a) The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has been substantiated, unless the allegation has been determined to be unfounded. There have been no reports of sexual abuse at the Sevier Juvenile Detention Center in the past 12 months. However, they have set up a procedure to review an incident review if an incident occurs. The PREA Compliance Manager stated the review would occur by him, The PREA Compliance Manager, the Director of the Detention Facility is also the CEO. There were no incidents reported in the past 12 months .Therefore there was no other documents to review.

(b) Such reviews shall ordinarily occur within 30 days of the conclusion of the investigation: There have been no allegations at the Sevier County Juvenile Detention Center of sexual abuse in the past 12 months and therefore there have been none to review. This information came from the interview with the PREA Compliance Manager.

(c) The facility shall implement recommendations for improvement, or shall document reasons for not doing so. In the interview with the PREA Compliance Manager she stated there have been no sexual abuse allegations in the past 12 months and therefore there have been no reviews. However, the Sevier County Detention Center has this in policy and will definitely review any incident of sexual abuse and look for ways to improve if an incident occurred.

Standard 115.387 Data collection

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(a) Sevier County Juvenile Detention states the facility shall collect accurate, uniform data for every allegation of sexual abuse at the

facility using a standardized instrument and set of definitions. The incident based data shall include, at minimum, the data necessary for all questions from the most recent version of Survey of Sexual Violence conducted by the Department of Justice. The Agency collects accurate data for every allegation of sexual abuse at facilities under its control using a standardized instrument and set of definitions. Sevier County Juvenile Detention uses their data system to enter their data. The instrument includes at a minimum the data necessary to answer all questions from the most recent survey of the Survey of Sexual Violence conducted by the Department of Justice. There have been no allegations of abuse in the Sevier County Juvenile Detention Center in the past 12 months therefore was no documentation to review. However the system for review is in place.

(b) The agency shall aggregate the incident based data at least annually, Sevier County Juvenile Detention Center require this data to be aggregated annually. There have been no allegations of sexual abuse at the Center in the past 12 months and therefore no incidents on the data base.

D The agency shall maintain, review, and collect data as needed from all available incident based documents, including reports, investigation files, and sexual abuse incident reviews. Sevier County Policy requires this to be done. However there has been no incident of sexual abuse at the Sevier County Juvenile Detention in the past 12 months therefore there was no data to review

(e) The agency does not make any contracts with confinement.

Therefore this is N/A

(e) Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30. The Agency shall provide all data to the Department of Justice from the previous year to the Department of Justice by June 30 2017.

This documentation will be located on the Sevier County Juvenile Detention Center website: The SCJF Policy on ZERO TOLRANCE is also on this website as is how to report suspected abuse.

Standard 115.388 Data review for corrective action

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Visit

(a) The agency shall review data collected and aggregated pursuant to 115.387 in order to access and improve effectiveness of its sexual abuse prevention, detection , and response policies, practices, and training including :

1. Identifying Problem areas;
2. Taking Corrective Action on an on-going basis ;and
3. Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

The Sevier County Juvenile Detention Center prepares an annual report that reflects all data collected and aggregated pursuant to policy 115.387. In order to make improvements, identify problems and prepares an annual report. Documentation and Policy.

Standard 115.389 Data storage, publication, and destruction

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Policy Review/Interviews/Site Review

(a) The agency shall require that data collected pursuant to 115.387 is securely retained.
The Sevier County Juvenile Detention Center has a PREA Cabinet in the PREA Compliance Managers Office and any PREA data will be kept in a locked secure file cabinet Interview with PREA Compliance Manager.

(b) The agency shall make all aggregated data from facilities under its control or contracts with readily available to the public at least annually by website or other means. The Sevier County aggregate data will be on the 2017 Sevier Juvenile County Website along with their Zero Tolerance Policy.

(c) Before making Public aggregated data, the agency shall remove all personal identifiers. Sevier County Policy requires this and was corroborated by the PREA Compliance Manager Interview.

(d) The agency shall maintain data collected pursuant to 115.387 for at least 10 years unless Federal, State or local law requires other The Sevier Juvenile Detention Center requires all PREA related data be maintained for at least 10 years.

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.

Martin Harrelson Jennifer Hamilton _____ 02/26/2017

Auditor Signature Date