

# PREA AUDIT: AUDITOR'S SUMMARY REPORT

## ADULT PRISONS & JAILS



**[Following information to be populated automatically from pre-audit questionnaire]**

|  |  |                                    |                                       |
|--|--|------------------------------------|---------------------------------------|
| <b>Name of facility:</b>                                       | Cold Spring Correctional Unit and Work Center  |                                    |                                       |
| <b>Physical address:</b>                                       | 221 Spitler Circle, Greenville, VA 24440   |                                    |                                       |
| <b>Date report submitted:</b>                                  | September 29, 2014   |                                    |                                       |
| <b>Auditor Information</b>                                     | Charles J. Kehoe   |                                    |                                       |
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| <b>Date of facility visit:</b>                                 | August 26 – 28, 2014   |                                    |                                       |
| <b>Facility Information</b>                                    |  |                                    |                                       |
| <b>Facility mailing address: (if different from above)</b>     |  |                                    |                                       |
| <b>Telephone number:</b>                                       | (804) 598-5503   |                                    |                                       |
| <b>The facility is:</b>  | <input type="checkbox"/> Military  | <input type="checkbox"/> County    | Federal                               |
|  | <input type="checkbox"/> Private for profit  | <input type="checkbox"/> Municipal | X State                               |
|  | <input type="checkbox"/> Private not for profit  |                                    |                                       |
| <b>Facility Type:</b>  | <input type="checkbox"/> Jail  | x Prison                           |                                       |
| <b>Name of PREA Compliance Manager:</b>                        | Jerome Walus and Vickie Kennedy  |                                    | <b>Title:</b> PREA Compliance Mgrs.   |
| <b>Email address:</b>  | <a href="mailto:Jerome.walus@vadoc.virginia.gov">Jerome.walus@vadoc.virginia.gov</a><br><a href="mailto:Vickie.kennedy@vadoc.virginia.gov">Vickie.kennedy@vadoc.virginia.gov</a> |                                    | <b>Telephone number:</b> 540-337-1818 |
| <b>Agency Information</b>                                      |  |                                    |                                       |
| <b>Name of agency:</b>   | Virginia Department of Corrections   |                                    |                                       |
| <b>Governing authority or parent agency: (if applicable) (</b> |  |                                    |                                       |
| <b>Physical address:</b>                                       | 6900 Atmore, Richmond, VA 23225  |                                    |                                       |
| <b>Mailing address:</b>  | P.O. Box 26963, Richmond, VA 23261   |                                    |                                       |
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|                                       |                                       |                          |                  |
|---------------------------------------|---------------------------------------|--------------------------|------------------|
| <b>Agency Chief Executive Officer</b> |                                       |                          |                  |
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| <b>Agency-Wide PREA Coordinator</b>   |                                       |                          |                  |
| <b>Name:</b>                          | Elisabeth Thornton                    | <b>Title:</b>            | PREA Coordinator |
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## AUDIT FINDINGS

**NARRATIVE:** The PREA Audit of the Cold Springs Correctional Unit and Work Center (CSCU/WC) was conducted from August 26 - 28, 2014. The Designated Auditor was Charles J. Kehoe. Mr. Kehoe was assisted by David K. Haasenritter in the preliminary review of the audit files and in the post-audit analysis. Mr. Haasenritter is also a Certified PREA Auditor.

The auditor wishes to extend his deepest appreciation to Superintendent Thomas Redman and his staff for the professionalism, hospitality, and kindness that was given during the audit.

The auditor also wishes to compliment the DOC PREA Coordinator, Elizabeth Thornton and Regional PREA Analysts, Lawanda Long, Joey Parks, and Rose Durbin for their outstanding work in organizing the electronic files that were provided to the auditors in advance of the audit. This enabled the audit to move forward very efficiently.

The Virginia Department of Corrections PREA Coordinator, one of the Regional PREA Analysts, and the agency contract manager were interviewed by Mr. Haasenritter and Mr. Kehoe on December 16, 2013. Mr. Haasenritter conducted a telephone interview with a representative of the victim advocacy agency that provides emotional support services for offenders in the Department of Corrections who have been sexually abused.

On December 30, 2013, the Designated Auditor, Charles Kehoe, interviewed the Director of Corrections, Mr. Harold Clarke.

An Entrance Meeting was held at 8:30 a.m. on August 24, 2014. Superintendent Thomas Redman, Capt. Tony Perry, Vickie Kennedy, Counselor and PREA Compliance Manager, Jerome Walus, Counselor and PREA Compliance Manager, Ella Farrington, Patrick Henry Correction Unit PREA Compliance Manager, Jeffery Wright, Standards Officer, Sharen Anerson, Counselor, and Joseph Parks, DOC Regional PREA Analyst were in attendance. The auditor thanked everyone for their commitment to PREA and for scheduling this PREA audit. The auditor reviewed the audit schedule and gave the Superintendent the list of random staff and offenders he identified that he would interview. The Superintendent gave an overview of the Cold Spring Correctional Unit as an introduction into the tour.

Following the Entrance Meeting the tour of the facility began at 9:20 a.m. The auditor was given a very thorough tour of the Cold Spring Correctional Unit #10 and the Works Center #42. The Notice of the Audit was posted in numerous locations.

Following the tour, the auditor began the interviews and reviews of personnel files, training records, and other documents. There have been no allegations of sexual abuse or harassment and therefore no investigations to review.

Eleven (11) offenders were interviewed. Those interviewed were randomly selected, by the auditor, from a list of all the offenders by their housing assignment at the Correctional Unit and Work Center. In addition, one offender who identified as being gay was interviewed. There were no other inmates identified who were in the special categories.

Ten correctional officers were interviewed who were randomly selected by the auditor from both shifts. (Correctional officers work 12-hour shifts.) Twenty-two (22) interviews were conducted with employees identified as specialized staff or staff working in specialized areas. This group included the Superintendent, PREA Managers (2), Investigators (2), first responders, Nurses (2), Counselor (intake and screening), contractual Doctor (M.D.), intermediate level staff, human resources staff, volunteers (2), staff who perform screenings at intake, intake staff (2), staff who monitor for retaliation, and Incident Review Team members (2). The Psychologist (mental health professional) is located at the Augusta Correctional Center in Craigsville, Virginia and was interviewed by phone. One Investigator from the Special Investigations Unit was also interviewed by phone. It should be noted that since the Cold Spring Correctional Unit and Work Center is a relatively small facility, several of the staff have multiple responsibilities. Thus, some individuals were interviewed more than once if their duties covered more than one specialized area.

During the tour a few blind spots were identified and the auditor was informed how these are being addressed with supervision and regular checks. Given that this facility is a level I facility, the supervision of the offenders appears more than adequate.

There have been no reported allegations of sexual abuse or harassment in this facility. However, several weeks after the audit, a person called the auditor and said she was asked by a relative to report a sexual harassment. The specific allegation was that the offender objected to being filmed with other offenders while they were stripped search in the multi-purpose room when they returned from their work detail. The caller declined to give her name or her relative's name. The auditor explained how the caller could report this incident on the PREA hotline and/or via the DOC Web site. The auditor also said that she could call the DOC SIU directly. Following that conversation, the auditor reported the call to the PREA hotline and also called the PREA Analyst the next morning to report the incident.

The auditor was impressed by what the correctional officers and other staff know about PREA, the zero tolerance policy, offender rights regarding PREA, first response, and evidence collection. Regular PREA reminders are provided during the shift briefings which keep the importance of PREA in front of all the staff. The auditor selected and carefully examined three (3) personnel files of correctional officers he randomly selected for interviews. The personnel files were very organized and contained all the necessary background check information and written documentation that the correctional officers received the required training and understood it.

Health care services are provided to the offenders at CSCU/WC by two full-time nurses and a contractual physician. During interviews, the offenders acknowledged that health care professionals are available. There are no offenders in this facility with mental health issues. The auditor interviewed the Senior Psychologist at the Augusta Correctional Center and was informed that if an offender at the CSCU/WC needed a mental health evaluation, he would be transported to the Augusta facility for it. Transfer would take place as soon as it could be arranged. If the offender was diagnosed with a mental illness, he would not be returned to CSCU/WC.

When the on-site audit was completed, the auditor conducted an exit meeting. While the auditor could not give the facility a final finding, as there were some issues needing additional information, the

auditor did give an overview of the audit and thanked the Superintendent and his staff for their hard work and commitment to the Prison Rape Elimination Act. The auditor was very impressed with the positive climate of this facility. The staff spoke very favorably of the facility, the offenders, and the teamwork which is part of the culture of the facility. All the offenders interviewed said this was the best facility they have ever been in and that if you have to "do time" this is place to be assigned. All the offenders said there is no sexual abuse or harassment in this facility because they know it is not tolerated and because most of the offenders here will be released soon and will not do anything to prevent their scheduled release. As an indication of the positive climate at this facility, the auditor noticed during the tour numerous posters announcing "Offender Appreciation Day." The auditor was told that this was the day in September that is set aside to thank the offenders for their hard work throughout the year in the community and in the facility.

### **DESCRIPTION OF FACILITY CHARACTERISTICS:**

The Cold Spring Correctional Unit #10 and Work Center #42 is located at 221 Spitler Circle, Greenville, Virginia, approximately 12 miles South of Staunton, Virginia. The Unit 10 facility was opened in 1953. This Level 1 prison is situated on 163 acres of farm land not far from the Blue Ridge Mountains. The prison occupies approximately 5 acres of the total property. The prison facility itself totals nearly 20,000 square feet. On the day of the audit, there were 110 offenders assigned to Unit #10 and 138 offenders assigned to the Work Center #42 for a total of 248. There are 106 total employees at the facility of which 88 are security staff.

The Cold Springs Work Center was constructed in 1995 and is located behind Correctional Unit #10. The Work Center also occupies approximately 20,000 square feet and is also a Level 1 facility.

According to a CSCU/WC PowerPoint, the farm land is utilized to provide sustainable products to support the offenders at this facility and other Department of Corrections facilities. Virtually all of the offenders at the CSCU/WC are employed either within the facility, on the farm, or at sites within the community. The agribusiness at the facility includes a herd of 45 Black Angus cattle and two greenhouses that provide year-around vegetables for the entire facility. The vegetables are grown hydroponically using mineral nutrient solutions in water. Offenders are trained in hydroponics which is becoming a very marketable job skill. The offenders maintain the greenhouse and care for and harvest the vegetables.

Offenders at this facility also work with Virginia Department of Transportation providing mowing and landscaping services on highways and roads throughout the counties within an 80 mile area. Offenders also help to maintain public parks, county landfills, and county and state buildings. In the winter months, offenders are involved in snow removal and indoor maintenance projects that include plumbing, electrical, painting, carpentry, and masonry skills. The sites where offenders have worked to restore and maintain buildings include the Cyrus McCormick Farm, the Woodrow Wilson Rehabilitation Center, and the Virginia Wildlife Center.

Through a partnership with the U. S. Forest Service, Wildland Firefighter Program, selected offenders from the CSCU/WC receive intensive training and certification as Wildland Firefighters. These offenders can be called upon to fight fires in wilderness and Wildland areas near the facility. Upon release, these offenders can find employment as Certified Wildland Firefighters.

Another program offered at the facility is the Wastewater Apprenticeship Program. Through the collaborative efforts of the Virginia Department of Corrections Environmental Service Unit and the Department of Professional Occupational Regulation qualified offenders can obtain a professional license in wastewater treatment. Offenders in the program can become operators in training at an ESU directed

wastewater facility. Trainees can receive on-the-job training and assist in the daily operation of wastewater treatment plant while following an approved course of study. When the ESU reports to the Department of Professional Occupational Regulation that the offender has completed the necessary apprenticeship hours and course of study, the offender should be able to sit for Class 4 Wastewater Treatment exam.

Offenders can also take a 10-hour OSHA Construction Safety Outreach Training Program. For those offenders who wish to work in a food preparation and food service career, the facility offers a Servsafe Food Safety Management Program. This program helps to prepare the offender for the ServSafe Food Protection Manager Certification exam.

The facility also offers GED classes and testing and helps offenders measure career and college readiness skills.

Lastly, the facility offers Reentry Programs in Thinking for Change (T4C) and Road to Success to help prepare offenders for their return to the community.

The tour of the facility began with Unit 10 which includes two (2) open-bay dormitories. There are two cameras in each dorm. The notice of the audit was clearly posted in the dorms and elsewhere throughout the facility. Phones are available to the offenders during specific times of the day. A poster, located above the phone in English and Spanish, explains how to report sexual abuse. The auditor tested the phone by calling the reporting number. Within a short period of time a person answered. The auditor explained who he was and that this was a PREA Audit test. The person at the agency then explained to the auditor what she would do if a person reported sexual abuse or harassment. The auditor was impressed with how this call was handled. Both dorms were very clean and well maintained, given the facility's age. The auditor was then taken to the dining hall, the kitchen and food preparation areas. There was a camera in the dining hall, but not in the food preparation area. There was a camera in the lower level food preparation area, however. The food preparation areas are always under supervision.

There are four segregation beds in this facility. At the time of the tour there was one offender in one cell, but he was released by the end of the tour.

Unit #10 has a large recreational area and weight room on the lower level that is also where the offenders' lockers are located. Classrooms are also in this area. Showers and toilets are located at the far end of this area. This area is always under the direct supervision of at least one correctional officer. Female officers can supervise in this area, but their presence is obvious and the offenders' privacy is respected according to what the offenders told the auditor during the interviews. There are no cameras in the classroom, but the classrooms are large multi-use rooms with no blind spots and large view panels (windows). There is also a nurse's office in this building.

The Counselor's Office is located on this lower level, as well.

The auditor was then taken to the Cold Spring Work Center Unit #42. This building includes administrative offices and a main hall with a control room. The nurse has an office in this unit and there is also a barber shop in this facility. Unit #42 has two large open-bay dormitories. There are 75 beds in each dorm. Two new Rapid Eye cameras were added to the dorms. Visibility in these dorms is good. Each dorm has a shower and toilet area with 5 showers. There are six phones in each dormitory. PREA signs were visible everywhere. The auditor observed the cameras in the laundry area.

While in the control room, the auditor checked the log book and found documentation that unannounced rounds were being conducted. Announcements that a female was on the floor were also documented in the log.

Unit #42 has an outdoor recreation area. This area has a camera to record what is happening outside.

The dining and food preparation areas were also seen. There are no cameras in the food preparation areas, but visibility and supervision are adequate. The dining hall has two cameras.

There is also a multi-purpose room that is used for visitation, muster, and as a staging area where offenders are stripped searched when they return from their off-grounds work assignments. There are two cameras in this area and they do record the strip searches, but the auditor was told these videos are not reviewed by nor monitored by female officers.

The auditor was then given a tour of the farm. The farm buildings do not have cameras, but officers are making unannounced checks in all the areas on a regular basis. There is only one offender working in each greenhouse.

The entire facility is well maintained. The buildings and housing units are clean and well organized. The farm land and grounds are beautifully preserved. The CSCU/WC is truly an exceptional facility.

The tour ended at 11:40 a.m.

**SUMMARY OF AUDIT FINDINGS:**

|                               |    |
|-------------------------------|----|
| Number of standards exceeded: | 3  |
| Number of standards met:      | 38 |
| Number of standards not met:  | 0  |
| Non-applicable:               | 2  |

## **§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

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

Virginia Department of Corrections has a written policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment. Operating Procedure 038.3 outlines the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment; other agency policies supplement the main PREA policy. Agency policies and procedures were well organized and have been continually revised over the last few years as Virginia Department of Corrections has developed and implemented PREA standards and procedures.

Ms. Elizabeth Thornton is the PREA Coordinator. She supervises three regional PREA Analysts. Mr. Joseph Parks is the regional PREA Analyst for the for the CSCU/WC. Ms. Rose Durbin and Ms. Lawanda Long are the other two regional PREA Analysts. All three regional PREA analysts are active in managing the Virginia Department of Corrections PREA program. They conduct training and meetings to keep facility PREA compliance managers up to date on any changes and best practices. Mr. Parks, Ms. Long, and Ms. Durbin are very knowledgeable about the PREA Standards and process and are actively involved in the full implementation of PREA. Ms. Long is also a Certified PREA Auditor. Mr. Parks' involvement at CSCU/WC was obvious by his knowledge of the facility's operations and procedures.

Ms. Vickie Kennedy is the PREA Manager for the Cold Spring Correctional Unit #10. Mr. Jerry Walus is the PREA Manager for the Cold Spring Work Center, Unit #42. Both Ms. Kennedy and Mr. Walus have multiple responsibilities. They both serve as counselors. In addition, Ms. Kennedy trains volunteers, contractors, and staff, does intake and participates in meetings as the PREA Manager. Mr. Walus does intakes, classification and screening, and does PREA training for contractors (worksites where offenders are working), volunteers and staff. Both PREA Managers reported that they have a lot of responsibility, but they ensure there is always time for their PREA duties and responsibilities.

## **§115.12 - Contracting with other entities for the confinement of inmates**

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

Virginia Department of Corrections has one contracted facility. The Lawrenceville Correctional Center operated by the GEO Group Inc. In March 2013 its contract was amended to include the <http://leonard4sheriff.com/entity>'s obligation to adapt and comply with PREA standards and the Virginia Department of Corrections responsibility to monitor GEO's compliance with PREA and any standards promulgated in furtherance of PREA. The

Virginia Department of Corrections Operating Procedure 038.3 established the requirements in policy. Following the on-site audit, the auditor interviewed Lawanda Long, regional PREA Analyst by phone. Ms. Long stated that she visits the Lawrenceville Correctional Center quarterly and monitors that facility's compliance with PREA by interviewing staff and offenders and checking records.

### **§115.13 – Supervision and Monitoring**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

CSCU/WC has developed a staffing plan and endeavors to comply with the plan on a daily basis. Shift Commanders use roster management to assure the facility is in compliance with the staffing plan and post assignments. The staffing plan is reviewed annually by the facility, region, and PREA Coordinator. The auditor was also told that the Virginia Joint Legislative Audit and Review Commission conducts bi-annual reviews of correctional facility staffing requirements. The facility documents all deviations to the plan.

The auditor reviewed the Unit logs and confirmed that unannounced rounds are documented in logs, and are done randomly by the Lieutenants, the Major, and the Superintendent. The agency has a policy that prohibits staff from alerting other staff members that supervisory staff rounds are occurring.

The facility has video cameras strategically placed throughout the Correctional Unit and the Work Center. While most of the farm buildings do not have cameras, the security level of the facility and correctional officer supervision insure that areas without cameras are being closely monitored and supervised. Security audits are conducted by teams from the DOC at every facility annually which also helps to identify any monitoring or supervision issues.

### **§115.14 – Youthful Inmates**

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)

XX  Not Applicable

CSCU/WC does not house youthful offenders. Operating Procedure 038.3 and 425.4 covers the standard of separating youthful inmates. All youthful inmates are housed at Sussex 1 State Prison.



## **§115.15 – Limits to Cross-Gender Viewing and Searches**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

CSCU/WC does not conduct cross gender strip searches. Body cavity searches are only done by medically trained professionals per Operating Procedure 445.1.

Policy and procedures are implemented to enable inmates to shower, perform bodily functions, and change clothes without non-medical staff observing their genitalia or buttocks. Interviews with offenders and staff confirmed that female staff do not observe offenders naked, in the shower or when using toilet facilities.

Staff and offenders interviewed confirmed female staff are announced when entering housing areas. The auditor observed female staff announce their presence when they entered the housing units. When female administrators make unannounced supervisory checks, they announce their presence when they enter the dorm area per the DOC policy and procedures that were amended on March 20, 2014 for opposite gender supervisors conducting unannounced rounds.

Operating Procedure 445.1 was amended on August 21, 2014 by the Chief of Corrections Operations. The Memorandum that amends the procedure states that female correctional officers will conduct all frisk searches of transgender and intersex offenders unless exigent circumstances are present and documentable. The procedure also states that transgender and intersex offenders may express, in writing, a preference regarding the sex of the correctional staff conducting strip searches. The request would be made to the facility Treatment Team. No transgender inmates were assigned to CSCU/WC during the audit.

## **§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

CSCU/WC takes some steps to ensure inmates with disabilities and inmates with limited English proficiency have an opportunity to participate in and benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The PREA brochure is in English and Spanish.

Hearing impaired inmates go to Powhatan Correctional. The DOC contracts for sign language and video remote interpreting services. Through the medical contract the agency also can access other language interpretations. The Auditor was told the DOC contracts with OPTIMAL for phone interpreters. In addition, there are Spanish speaking staff at nearby correctional facilities and at the local Community College who can be brought into the facility,

as needed. Both offenders and staff stated offenders are not used as interpreters, especially if it is an issue with sexual abuse and sexual harassment.

### **§115.17 – Hiring and Promotion Decisions**

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

The Office Services Specialist manages the personnel files at the facility. The auditor confirmed that all employees have had their 5 year background checks. The facility also provided documentation that required background checks of all contractors who have contact with offenders are current, as well. The personnel files are very organized and provided complete documentation.

Applicants and employees have a continuing affirmative duty to disclose any sexual abuse in prison or other institution or conviction of or civil or administrative adjudication for engaging in sexual activity in the community by force or coercion or in a case where the victim did not consent. The auditor confirmed that application process and agency procedures demonstrated this is required. Virginia DOC recently changed policy 057.1 to allow information on substantiated allegations of sexual abuse or sexual harassment involving a former employee to be furnished to any institutional employer for whom the former employee has applied to work.

### **§115.18 – Upgrades to Facilities and Technology**

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

The camera upgrades that have been made at the facility were completed prior to June of 2013. Camera coverage appears adequate for the security level of this facility.

### **§115.21 – Evidence Protocol and Forensic Medical Examinations**

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

Policy and procedures outline evidence protocols and requirements for forensic medical exams. No outside agencies conduct investigations. Hospitals with SANE/SAFE are identified on a list for all DOC facilities by region. Forensic exams would be provided at no costs to the offender when requested. The auditor called the Rockingham Memorial Hospital, which is the

hospital the facility would use for a forensic exam, and confirmed that this hospital has SAFE/SANE nurses available. No inmate has requested a forensic medical examination during the audit period. Action Alliance trains Virginia DOC staff to be victim advocates. Victim advocates are on call and are not from the facility the victim is from. No victim advocates were required to date.

### **§115.22 – Policies to Ensure Referrals of Allegations for Investigations**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

An administrative or criminal investigation is completed on all allegations of sexual abuse and sexual harassment. Officer Christine Hall and Lt. John Kelly are the designated investigators for CSCU/WC. It is the DOC's policy that all allegations regarding sexual assault and sexual harassment will be investigated by the Special Investigations Unit. The facility investigators conduct preliminary investigations and work closely with the SIU on criminal investigations when the SIU investigator arrives. All investigations are internal to DOC. The Auditor interviewed one of the facility investigators on site and the SIU Investigator (by phone). Both investigators at the CSCU/WC and the Investigator at SIU have received the PREA Investigator Training that was conducted at the Virginia State Police Academy.

### **§115.31 – Employee Training**

XX 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)

Virginia DOC provides all employees a three hour PREA class which includes a video. The Auditor reviewed training records at CSCU/WC and found signed acknowledgement of training and understanding of material covered forms, and attendance sheets. Interviews of staff demonstrated they understand the zero tolerance policy; the agency policy and procedures for prevention, reporting and response to a sexual assault or sexual harassment incident, and the dynamics of sexual abuse and harassment in a confinement setting. Correctional officers said PREA training also takes place during shift briefings. Briefing minutes are kept which list the topics covered by the Watch Commander and state the correctional officers who received a briefing on the topics listed in the minutes and "understand the subject matter of the topics." Areas specific to PREA are always on the agenda. On August 27, 2014, for example, the officers received a briefing on zero tolerance and fraternization and on the importance of announcing "female on the floor" when a female staff member enters housing areas. The officers were reminded that these announcements are to be documented in the dorm control log. With daily reminders, this facility exceeds the standard.

## **§115.32– Volunteer and Contractor Training**

- XX 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)

All contractors and volunteers 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.

Interviews with one contractor and two volunteers demonstrated their knowledge of PREA and their responsibilities and agency zero tolerance policy. The auditor reviewed contractor and volunteer acknowledgement forms.

In addition to the training that is provided to contractors and volunteers who work "inside" the facility, the two PREA Managers have also trained over 325 contractors with whom the offenders will work at various community sites. The amount of training these individuals receive depends on the level of contact the contractor will have with the offender. A "Level 3" contractor will receive PREA and Gang Awareness Training that nearly equals what a correctional officer would receive. This training lasts between 90 and 120 minutes and includes watching a PREA Video and PowerPoint presentation which provides information on how to report sexual assault. Most often, the PREA Managers take the training to the contractors as a matter of convenience for the contractors.

## **§115.33 – Inmate Education**

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

During intake, offenders are provided information through a PREA pamphlet that explains the DOC's zero tolerance policy regarding sexual abuse and sexual harassment and how to report such incidents. During facility orientation offenders receive additional training which consists of a video and additional information which expands on the previous information provided in the pamphlet and handbook. The inmates sign an acknowledgement of having received the training. Offender handbooks are provided to inmates and posters are displayed in the dorms in formats accessible to all inmates.

During the interviews offenders acknowledged the information being provided upon arrival and orientation. All offenders knew the agency zero tolerance policy and how to report it if they are abused or harassed. A few offenders claimed to be unaware that victim advocates are available for emotional support services related to sexual abuse. The auditor pointed out that this information is available in the DOC brochure and they can also access emotional support by calling #55. All offenders know that by calling #55 they can make a sex abuse or sexual harassment referral.

Several of the offenders said that the entire offender population at CSCU/WC was shown the latest version of the PREA video within the last three months. The auditor recommends annual or refresher classes for the offender population as done for staff.

### **§115.34 – Specialized Training: Investigations**

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

Officer Christine Hall and SIU Investigator Ron Hall both stated they had participated in three days of training for PREA Investigators that was held at the Virginia State Police Academy in 2013. Lt. John Kelly received his training in 2014.

### **§115.35 – Specialized training: Medical and mental health care**

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

Medical staff do not conduct forensic medical examinations. Both the Registered Nurses and the Doctor stated they have received PREA Health Care Training provided by the Department. Training records confirmed their participation in the training.

### **§115.41 – Screening for Risk of Victimization and Abusiveness**

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

All inmates are assessed during intake screening for their risks of being sexually abused by other inmates or sexually abusive towards other inmates. The screening is completed within 72 hours of arrival by policy and check of records. Offender records are maintained by the counselors. Within 30-days of admission, if any additional information becomes available the offender's risk of victimization or abusiveness will be reassessed. The Superintendent reported that no additional information has been received at the facility that would cause a reassessment.

The auditor was provided screening documentation that confirmed inmates were being asked their own perception of vulnerability. This was also confirmed by offender interviews.

## §115.42 – Use of Screening Information

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

The facility uses the screening information to determine housing, bed, work, education, and program assignment with the goal of keeping inmates at high risks of being sexually victimized separate from those at high risks of being sexually abusive. Housing and program assignments are done on a case by case basis. Offenders with convictions for Murder I or II, sex offenses, kidnapping or abduction or with an escape history, or with any disruptive behavior in the last 24 months will not be admitted to CSCU/WC.

The Department recently amended its policy regarding the Gender Identity Disorder Committee and the local treatment teams which now meet the standard.

At the time of the audit there was no transgender or intersex inmate in the CSCU/WC.

## §115.43 – Protective Custody

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

Agency policy states inmates at high risks for sexual victimization shall not be 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.

Only Riverside Correctional Center houses Protective Custody inmates. No offenders from CSCU/WC were placed in Protective Custody.

## §115.51 – Inmate Reporting

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

The Virginia DOC and CSCU/WC provide multiple internal ways for offenders to report sexual abuse, sexual harassment and retaliation. Offender interviews confirmed that offenders are aware of their options. The MOU with Action Alliance allows for reporting to Action Alliance and that the Alliance will only forward immediately if victim agrees. Per the MOU, if not immediately reported it will be forwarded to DOC as part of the quarterly report. The Action Alliance staff member will take the information provided by the offender, to include any request for follow-up

actions, and forward it to the DOC. The offender's name will not be provided. Reports can also be taken through a third party.

### **§115.52 – Exhaustion of Administrative Remedies**

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

Virginia DOC Grievance Operating Procedures have been modified to address PREA standards. CSCU/WC reports there have been no grievances submitted referencing sexual assault, sexual harassment or retaliation for reporting a sexual incident.

### **§115.53 – Inmate Access to Outside Confidential Support Services**

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

Action Alliance is used for confidential reporting and outside confidential support services. Phone numbers and mailing addresses are provided to the inmate population on the PREA pamphlets they receive upon arrival to the facility. The most recent change to the pamphlet added a PO Box address. Inmate interviews indicated some offenders did not know these outside support services were available. The auditor showed the inmates where the information is available in the pamphlet and also reminded them that the information was available by calling #55, the PREA Hotline. During the audit, the auditor called #55. The message directed the caller to enter one number to report a sexual assault and another number for emotional support. The phone system worked without any difficulty.

### **§115.54 – Third-Party Reporting**

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

The Virginia Department of Corrections Web site provides point of contacts and how to do a third party report. Third party reporting forms are in English and Spanish. CSCU/WC had not received any third party report as of the time of the audit. Interviews with staff and offenders confirm that staff and offenders are aware that third party options are available.

Several weeks after the audit, the auditor received a phone call from a person who identified herself as a family member of an offender in CSCU/WC. She asked if videotaping of strip searches was sexual harassment or a violation of privacy. The person declined to give her name or the offender's name. The auditor advised her to call the DOC PREA Hotline and gave her the

number. He also told her how to report this on-line at the DOC Web site. He also added that she could call the DOC and speak to the SIU. After the phone call, the auditor called the DOC PREA Hotline and reported the incident. The next morning the auditor also notified Ms. Lawanda Long, the PREA Regional Analyst. The auditor was notified that afternoon by the CSCU/WC Investigator that his messages had been received and the matter would be investigated.

### **§115.61 – Staff and Agency Reporting Duties**

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

Agency policy requires all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and for staff not to reveal any information related to a sexual abuse report to anyone other than to the extent necessary. Every staff interviewed understood and spoke specifically about this procedure. Offender interviews supported the fact that offenders are also aware of the reporting and confidentiality requirements of sexual abuse and harassment cases. Correctional Officers also know they can make referrals privately by calling the PREA Hotline.

### **§115.62 – Agency Protection Duties**

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

Agency policy requires staff to take immediate action to protect any inmate they learn is subject to substantial risks. All staff interviewed knew this procedure. There was no case of an inmate who was subject to a substantial risk of imminent sexual abuse at CSCU/WC.

### **§115.63 – Reporting to Other Confinement Facilities**

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

Operating Procedure 038.3 meets the requirements of the standard. CSCU/WC has not had any sexual abuse allegations made concerning other facilities.



### **§115.64 – Staff First Responder Duties**

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

The agency's operating procedures meet the standard. (OP 030.4; 075.1; and 038.3)

Interviews with correctional officers and other staff at the CSCU/WC confirm that they have been trained and know how to respond when they learn that an offender was sexually abused.

### **§115.65 – Coordinated Response**

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

Operating procedures and the CSCU/WC PREA Management Plan, June 2014, were reviewed and meet the requirements of the standard. The plan clearly articulates the responsibilities of the various departments within the facility (i.e., administration, security, medical, mental health, and investigations). Interviews with staff confirmed they were knowledgeable about the PREA Management Plan and the coordinated duties and collaborative responsibilities.

### **§115.66 – Preservation of ability to protect inmates 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)
- XX  Not Applicable

State employees in the Commonwealth of Virginia do not have collective bargaining rights per the Code of Virginia 40.1-57.2. As a result, there has been no collective bargaining agreement entered into since August 2012.

### **§115.67 – Agency protection against retaliation**

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

Operating Procedure 130.1. has been updated to state that a specific staff member must be designated to monitor retaliation.

The CSCU/WC PREA Management Plan states that Superintendent and the Major, will monitor for retaliation up to 90 days, or longer if required, to ensure no retaliation takes place that involves the offender or the staff member who reported an allegation. Interviews with the Superintendent and Major confirmed their expertise in this area.

### **§115.68 – Post-Allegation Protective Custody**

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

OP 425.4 meets the requirements of the standard. No offenders from CSCU/WC have been sexually abused or assaulted and therefore protective custody was never used. This was confirmed in a written memo from the Superintendent.

### **§115.71 – Criminal and Administrative Agency Investigations**

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

Lt. John Kelly or Correctional Officer Christine Hall will conduct initial investigations at the CSCU/WC and call upon SIU Investigator Ron Hall if assistance is needed. All three of these investigators have received the PREA Investigator Training. If an allegation appears to be criminal in nature, the Investigator will call upon the DOC Special Investigation Unit (SIU) to conduct the investigation. The SIU will provide technical assistance and support to the facility investigator for administrative investigations. The DOC SIU has full police powers. There have been no allegations of sexual assault or sexual harassment reported at this facility.

### **§115.72 – Evidentiary Standard for Administrative Investigations**

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

A review of DOC OP 130.1.9, 135.1.E and 861.1.11.b and interviews with the investigator and administrative staff confirm the CSCU/WC meets the standard.

### **§115.73 – Reporting to Inmate**

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

A review of OP 030.4 and OP 038.3 and interviews with the investigator and administrative staff confirm the CSCU/WC meets the standard

### **§115.76 – Disciplinary sanctions for staff**

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

The DOC's Operating Procedures 130.1 and 135.1 meet the standard. The Superintendent reported that no staff at CSCU/WC have been subject to discipline for sexual abuse or sexual harassment policies.

### **§115.77 – Corrective action for contractors and volunteers**

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

Operating Procedure 027.1 meets the requirements of the standard. Operating Procedure 130.1 was updated on March 20, 2014 designating the PREA Coordinator as the person responsible to notify law enforcement and any relevant licensing body as applicable.

The CSCU/WC Superintendent reported that there have been no allegations of sexual abuse by contractors or volunteers.

### **§115.78 – Disciplinary sanctions for inmates**

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

Operating procedures 038.3, 820. 2, 830, and 861, confirm compliance with all parts of this standard. The Superintendent reported that there have been no reports of inmate-on-inmate sexual abuse at this facility.

### **§115.81 – Medical and mental health screenings; history of sexual abuse**

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

CSCU/WC meets the requirements of the standard as confirmed by review of OP 425.4, 701.3 and 730.2 and staff and offenders interviews. The Superintendent reported that there have been no cases reported of an offender being sexually abused at any prison, jail, or lockup.

### **§115.82 – Access to emergency medical and mental health services**

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

Review of operating procedures and interviews with staff confirm compliance. The nurses said that in the event of a sexual assault, they would be notified and make a decision, in consultation with the Doctor, as to the need for emergency services. A memo from the Superintendent confirmed there were no sexual assaults and therefore access to emergency medical services was not needed or utilized.

### **§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers**

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

Review of operating procedures 720.1, 720.4, 720.7 and 730.2 and interviews with staff confirm compliance. The interview with the Senior Psychologist at Augusta Correctional Center confirmed that mental health services would be available to any victim of sexual abuse without undue delay. A memo from the Superintendent confirmed there were no sexual assaults and therefore ongoing medical services and mental health care were not needed or utilized. The Augusta Correctional Center is approximately 35 miles from the CSCU/WC.

Standard 115.83 (e) is Not Applicable since this is an all-male facility.

### **§115.86 – Sexual abuse incident reviews**

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

A memo from the Superintendent confirmed there were no sexual assaults and therefore the Sexual Abuse Incident Review Team has not had a meeting. However, he did state that if an incident did happen the Team would review all the points required in 115.86 as per the DOC OP 038.1 and 038.3. The team consists of the Major, the Investigators, the PREA Managers, the medial staff, and the Senior Psychologist at Augusta Correction Center.

### **§115.87 – Data Collection**

- XX  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)

The agency collects accurate uniform data for every allegation of sexual abuse at facilities under its control using a standardized instrument since 2008. The system is continuously improved. The system allows the agency to submit the annual DOJ Survey of Sexual Violence timely; and for use by the agency to monitor, trend and take corrective action.

The agency collects accurate uniform data for every allegation of sexual abuse at facilities under its control uses a standardized instrument since 2008. The system is continuously improving. The system also allows the agency to submit the annual DOJ Survey of Sexual Violence in a timely fashion. The data is also used by the agency to monitor trends and take corrective action as quickly as possible.

### **§115.88 – Data Review for Corrective Action**

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

The agency reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; and to identify problem areas and take corrective actions. An annual report with comparisons from previous years and corrective actions is published, signed by the Director, and posted on the VA DOC website.

### **§§115.89 – Data Storage, Publication, and Destruction**

- Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Data is properly stored, maintained and secured. Access to data is tightly controlled.

**AUDITOR CERTIFICATION:**

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



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Auditor Signature  
Charles J. Kehoe,  
Certified PREA Auditor

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October 7, 2014

Date