

# PREA Facility Audit Report: Final

**Name of Facility:** Green Rock Correctional Center

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 05/09/2024

| Auditor Certification   |                                      |
|---|--------------------------------------|
| The contents of this report are accurate to the best of my knowledge.   | <input type="checkbox"/>             |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.   | <input type="checkbox"/>             |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. | <input type="checkbox"/>             |
| <b>Auditor Full Name as Signed:</b> Ron L Kidwell   | <b>Date of Signature:</b> 05/09/2024 |

| AUDITOR INFORMATION                 |                          |
|-------------------------------------|--------------------------|
| <b>Auditor name:</b>                | Kidwell, Ron             |
| <b>Email:</b>                       | ronnie.kidwell@yahoo.com |
| <b>Start Date of On-Site Audit:</b> | 04/09/2024               |
| <b>End Date of On-Site Audit:</b>   | 04/11/2024               |

| FACILITY INFORMATION              |  |
|-----------------------------------|--|
| <b>Facility name:</b>             | Green Rock Correctional Center                       |
| <b>Facility physical address:</b> | 1704 Beverly Heights Road, Chatham, Virginia - 24531 |
| <b>Facility mailing address:</b>  |  |

| Primary Contact |
|-----------------|
|-----------------|

|                          |                                    |
|--------------------------|------------------------------------|
| <b>Name:</b>             | Randall Bateman (Assistant Warden) |
| <b>Email Address:</b>    | randall.bateman@vadoc.virginia.gov |
| <b>Telephone Number:</b> | (434) 433-3402                     |

| <b>Warden/Jail Administrator/Sheriff/Director</b> |                                    |
|---|------------------------------------|
| <b>Name:</b>                                      | Assistant Warden Randall Batemen   |
| <b>Email Address:</b>                             | randall.bateman@vadoc.virginia.gov |
| <b>Telephone Number:</b>                          | (434) 433-3402                     |

| <b>Facility PREA Compliance Manager</b> |                                   |
|---|-----------------------------------|
| <b>Name:</b>                            | Gordon Ballard                    |
| <b>Email Address:</b>                   | gordon.ballard@vadoc.virginia.gov |
| <b>Telephone Number:</b>                | O: 434-433-3404                   |

| <b>Facility Health Service Administrator On-site</b> |                                 |
|--|---------------------------------|
| <b>Name:</b>   | Carri Mayes                     |
| <b>Email Address:</b>                                | carrie.mayes@vadoc.virginia.gov |
| <b>Telephone Number:</b>                             | 434-433-3472                    |

| <b>Facility Characteristics</b>  |       |
|--|-------|
| <b>Designed facility capacity:</b>   | 1050  |
| <b>Current population of facility:</b>   | 996   |
| <b>Average daily population for the past 12 months:</b>                        | 989   |
| <b>Has the facility been over capacity at any point in the past 12 months?</b> | No    |
| <b>Which population(s) does the facility hold?</b>                             | Males |

|  |            |
|--|------------|
| <b>Age range of population:</b>  | 21-95      |
| <b>Facility security levels/inmate custody levels:</b>   | Medium 2/3 |
| <b>Does the facility hold youthful inmates?</b>  | No         |
| <b>Number of staff currently employed at the facility who may have contact with inmates:</b>                       | 312        |
| <b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b> | 30         |
| <b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>             | 40         |

#### AGENCY INFORMATION

|  |   |
|--|---|
| <b>Name of agency:</b>                                       | Virginia Department of Corrections            |
| <b>Governing authority or parent agency (if applicable):</b> |   |
| <b>Physical Address:</b>                                     | 6900 Atmore Drive, Richmond, Virginia - 23225 |
| <b>Mailing Address:</b>                                      | P.O. Box 26963, Richmond, Virginia - 23261    |
| <b>Telephone number:</b>                                     | 8046743000                                    |

#### Agency Chief Executive Officer Information:

|                          |                                    |
|--------------------------|------------------------------------|
| <b>Name:</b>             | Chadwick Dotson                    |
| <b>Email Address:</b>    | Chadwick.Dotson@vadoc.virginia.gov |
| <b>Telephone Number:</b> | 804-887-8080                       |

#### Agency-Wide PREA Coordinator Information

|              |                |                       |                                   |
|--------------|----------------|-----------------------|-----------------------------------|
| <b>Name:</b> | Tammy Barbetto | <b>Email Address:</b> | tammy.barbetto@vadoc.virginia.gov |
|--------------|----------------|-----------------------|-----------------------------------|

## Facility AUDIT FINDINGS

### Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

#### Number of standards exceeded:

0

#### Number of standards met:

45

#### Number of standards not met:

0

## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

|   |            |
|---|------------|
| 1. Start date of the onsite portion of the audit: | 2024-04-09 |
| 2. End date of the onsite portion of the audit:   | 2024-04-11 |

#### Outreach

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|---|--|
| 10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility? | <input checked="" type="radio"/> Yes<br><input type="radio"/> No   |
| a. Identify the community-based organization(s) or victim advocates with whom you communicated:   | The Auditor contacted Just Detention and the victim advocate for the Virginia Department of Corrections GROC (Action Alliance) |

### AUDITED FACILITY INFORMATION

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|--|--|
| 14. Designated facility capacity:  | 1050   |
| 15. Average daily population for the past 12 months:                             | 989  |
| 16. Number of inmate/resident/detainee housing units:                            | 12   |
| 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? | <input type="radio"/> Yes<br><input checked="" type="radio"/> No<br><input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility) |

**Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit**

**Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit**

|  |     |
|--|-----|
| <b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>   | 880 |
| <b>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>  | 26  |
| <b>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b> | 361 |
| <b>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>  | 3   |
| <b>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>   | 1   |
| <b>42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>  | 19  |
| <b>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>   | 6   |

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| <p><b>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b></p>   | <p>5</p>   |
| <p><b>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b></p>   | <p>3</p>   |
| <p><b>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b></p>  | <p>7</p>   |
| <p><b>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b></p>                                     | <p>0</p>   |
| <p><b>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b></p> | <p>The Auditor began conducting random and targeted inmate interviews on the second day of the on-site audit. The Auditor was provided a private area to conduct the confidential interviews. All inmates were made available in a timely manner and no inmates refused to be interviewed by the Auditor. All interviews were conducted using the established DOJ interview protocols.</p> |
| <p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>   |  |
| <p><b>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b></p>   | <p>312</p>   |
| <p><b>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>   | <p>40</p>  |

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| <p><b>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>                        | <p>30</p>  |
| <p><b>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b></p> | <p>The Auditor began conducting random and specialized staff interviews immediately following the completion of the on-site facility tour. The Auditor was provided a private area to conduct the confidential interviews. All staff were made available in a timely manner and no staff refused to be interviewed by the Auditor. All interviews were conducted using the established DOJ interview protocols.</p>              |
| <p><b>INTERVIEWS</b></p>  |  |
| <p><b>Inmate/Resident/Detainee Interviews</b></p>   |  |
| <p><b>Random Inmate/Resident/Detainee Interviews</b></p>  |  |
| <p><b>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>  | <p>15</p>  |
| <p><b>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b></p>   | <p> <input checked="" type="checkbox"/> Age<br/> <input checked="" type="checkbox"/> Race<br/> <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)<br/> <input checked="" type="checkbox"/> Length of time in the facility<br/> <input checked="" type="checkbox"/> Housing assignment<br/> <input type="checkbox"/> Gender<br/> <input type="checkbox"/> Other<br/> <input type="checkbox"/> None </p> |



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| <p><b>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b></p>  | <p>Inmates were selected from all housing units, using the inmate cell assignment report. The Auditor went down the list of each housing unit and selected the an inmate's name from all housing units. The Auditor also ensured that a representative sample of inmates based on race, gender, and ethnicity were selected.</p> |
| <p><b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b></p>  | <p><input checked="" type="radio"/> Yes<br/><input type="radio"/> No</p>   |
| <p><b>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>   | <p>There were no barriers to interviewing the random or targeted inmates.</p>  |
| <p><b>Targeted Inmate/Resident/Detainee Interviews</b></p>  |  |
| <p><b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>  | <p>15</p>  |
| <p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p> |  |
| <p><b>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>  | <p>3</p>   |

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| <p><b>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p> | <p>1</p>  |
| <p><b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>  | <p>0</p>  |
| <p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>   | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>   |
| <p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>                          | <p>The facility reported that they were not currently housing any inmates that are blind or have low vision. The Auditor met with the PREA Compliance Manager and reviewed the list of inmates housed in the facility that requested accommodations, given a particular disability. The Auditor found no evidence of any inmate listed with disabilities regarding vision issues.</p> |
| <p><b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>   | <p>1</p>  |
| <p><b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>  | <p>1</p>  |

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| <p><b>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>  | <p>1</p>  |
| <p><b>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>  | <p>4</p>  |
| <p><b>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>  | <p>3</p>  |
| <p><b>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>   | <p>3</p>  |
| <p><b>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p> | <p>0</p>  |
| <p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>   | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |

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| <p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p> | <p>The Facility reported no instances of placing any inmate in segregated housing for risk of sexual victimization. This was confirmed through interviews with the staff who supervise inmates in segregated housing, the Facility Head, and inmates that reported sexual abuse.</p>  |
| <p><b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>   | <p>The Auditor interviewed 15 targeted inmates at the GROC. Of those inmates interviewed, 3 reported sexual victimization during the risk screening process, 3 reported sexual abuse, 1 LGB, 4 transgender inmates, 3 physically disabled, and 1 inmate that was limited English proficient. The GROC does not house youthful inmates and reported no inmates housed in segregation for high risk of sexual abuse. The Auditor received two correspondences from inmates housed at the GROC for this audit through the mail and spoke to both inmates during the on-site portion of this audit.</p> |
| <p><b>Staff, Volunteer, and Contractor Interviews</b></p>  |   |
| <p><b>Random Staff Interviews</b></p>  |   |
| <p><b>71. Enter the total number of RANDOM STAFF who were interviewed:</b></p>   | <p>12</p>   |
| <p><b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>   | <p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>  |
| <p><b>If "Other," describe:</b></p>  | <p>The Auditor ensured that female officers were interviewed to provide their point of view working at this facility.</p>   |

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| <p><b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>  | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>   |
| <p><b>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>  | <p>The staff were randomly selected by the PREA Auditor. The Auditor chose staff from all shifts, working different assignments, and with different levels of experience. The Auditor also made sure interviews were conducted with a proportionate number of female staff corresponding to the GROC's employee demographics.</p> |
| <p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>   |   |
| <p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p> |   |
| <p><b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b></p>   | <p>21</p>   |
| <p><b>76. Were you able to interview the Agency Head?</b></p>  | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>   |
| <p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>  | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>   |
| <p><b>78. Were you able to interview the PREA Coordinator?</b></p>   | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>   |

**79. Were you able to interview the PREA Compliance Manager?**

Yes

No

NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

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|   | <input type="checkbox"/> Other  |
| <b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>                           | <input checked="" type="radio"/> Yes<br><input type="radio"/> No  |
| <b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>  | 1   |
| <b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>  | <input type="checkbox"/> Education/programming<br><input type="checkbox"/> Medical/dental<br><input type="checkbox"/> Mental health/counseling<br><input checked="" type="checkbox"/> Religious<br><input type="checkbox"/> Other   |
| <b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>                          | <input checked="" type="radio"/> Yes<br><input type="radio"/> No  |
| <b>a. Enter the total number of CONTRACTORS who were interviewed:</b>   | 1   |
| <b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b> | <input type="checkbox"/> Security/detention<br><input checked="" type="checkbox"/> Education/programming<br><input type="checkbox"/> Medical/dental<br><input type="checkbox"/> Food service<br><input type="checkbox"/> Maintenance/construction<br><input type="checkbox"/> Other |
| <b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b>   | The Educational Substance Abuse Program Director and Chaplin were interviewed.  |



## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

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

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|--|--|
| <b>84. Did you have access to all areas of the facility?</b>   | <input checked="" type="radio"/> Yes<br><input type="radio"/> No |
| <b>Was the site review an active, inquiring process that included the following:</b>   |  |
| <b>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</b>                                      | <input checked="" type="radio"/> Yes<br><input type="radio"/> No |
| <b>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</b> | <input checked="" type="radio"/> Yes<br><input type="radio"/> No |
| <b>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b>  | <input checked="" type="radio"/> Yes<br><input type="radio"/> No |
| <b>88. Informal conversations with staff during the site review (encouraged, not required)?</b>  | <input checked="" type="radio"/> Yes<br><input type="radio"/> No |

**89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).**

On 04/09/2024, at approximately 0830 hours a PREA audit kickoff meeting was conducted. Present at the meeting was the Assistant Warden, Chief of Housing and Programs, Regional PREA Analyst, PREA Compliance Manager, PREA Coordinator and fifteen other facility managers and command staff. The inmate population on 4/09/2024 was 880 inmates. The meeting was designed to create a positive working relationship, place names with faces, and prepare for the next three days. Soon after the conclusion of the meeting the Auditor began the facility observation tour. Accompanied by the Assistant Warden, the PREA Regional Analyst, and PREA Compliance Manager, the tour covered the entire facility over the next 3 hours. The tour covered the Front Entrance, Receiving and Intake, Food Services/Kitchen, Laundry, Gym, Program Classrooms, and twelve separate two tier double bunked style housing units. There is also one restorative housing unit that contains twenty single occupancy cells. During the facility tour, the Auditor looked at camera placement for possible blind spots and inmate to officer supervision ratio. The Auditor looked at privacy issues, how the toilet and shower areas were configured, and did the inmates have adequate privacy. Also, did staff of the opposite gender announce their presence when entering a housing unit of the opposite sex. The Auditor documented if PREA posters and PREA audit notices were displayed in the housing units and public areas as well. The Auditor noted the number of phones in each unit and if the advocacy hotline number along with the outside reporting entity contact information was readily available in the housing units. The Auditor also conducted several test calls to the outside entity to prove the effectiveness of the facility's practice to report sexual abuse to an outside entity and provide advocacy to any inmate wanting that service as it relates to sexual abuse. Finally, the Auditor spoke to multiple inmates about if they knew how to report an

allegation of sexual abuse. At the Exit-Briefing the Auditor identified several recommendations that was shared with staff that was in attendance. Present at the Exit-Briefing was the Assistant Warden, Major, Facility Investigator, PREA Regional Analyst, PREA Compliance Manager, PREA Coordinator and the Western Regional Operations Officer.

### **Documentation Sampling**

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

**90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?**

Yes

No

**91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).**

At the conclusion of the third day of the audit, the Auditor reviewed a total of 54 files. Those files consisted of 30 inmate files, 13 staff personnel files, and 11 investigative files. The inmate files consisted of those inmates that had been previously interviewed during the audit. The staff personnel files were selected from those officers the Auditor had previously interviewed. In the staff personnel files, the Auditor was looking for evidence of an initial criminal history check, institutional references, 5 years background check, PREA training documentation, and PREA refresher training. In regard to inmate files the Auditor would confirm evidence of the PREA Intake Screening taken place within 72 hours, proof of a reassessment, PREA information provided at Intake, and if the inmate received their comprehensive education within 30 days of Intake. Finally, when reviewing the investigative files, the Auditor was looking for a complete administrative investigation. This would include the investigative outcome, retaliation monitoring, if a Sexual Abuse Incident Review was conducted, was the preponderance of the evidence used, victims, witnesses, and perpetrator interviewed among many other factors.

## **SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY**

### **Sexual Abuse and Sexual Harassment Allegations and Investigations Overview**

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

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

|                                      | <b># of sexual abuse allegations</b> | <b># of criminal investigations</b> | <b># of administrative investigations</b> | <b># of allegations that had both criminal and administrative investigations</b> |
|--------------------------------------|--------------------------------------|-------------------------------------|---|--|
| <b>Inmate-on-inmate sexual abuse</b> | 8                                    | 5                                   | 8   | 5  |
| <b>Staff-on-inmate sexual abuse</b>  | 3                                    | 0                                   | 3   | 0  |
| <b>Total</b>                         | 11                                   | 5                                   | 11  | 5  |

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

|   | <b># of sexual harassment allegations</b> | <b># of criminal investigations</b> | <b># of administrative investigations</b> | <b># of allegations that had both criminal and administrative investigations</b> |
|---|---|-------------------------------------|---|--|
| <b>Inmate-on-inmate sexual harassment</b> | 7   | 0                                   | 7   | 0  |
| <b>Staff-on-inmate sexual harassment</b>  | 9   | 0                                   | 9   | 0  |
| <b>Total</b>                              | 16  | 0                                   | 16  | 0  |

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

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

|                                      | Ongoing | Referred for Prosecution | Indicted/ Court Case Filed | Convicted/ Adjudicated | Acquitted |
|--------------------------------------|---------|--------------------------|----------------------------|------------------------|-----------|
| <b>Inmate-on-inmate sexual abuse</b> | 1       | 5                        | 0                          | 0                      | 0         |
| <b>Staff-on-inmate sexual abuse</b>  | 1       | 0                        | 0                          | 0                      | 0         |
| <b>Total</b>                         | 2       | 5                        | 0                          | 0                      | 0         |

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

|                                      | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|--------------------------------------|---------|-----------|-----------------|---------------|
| <b>Inmate-on-inmate sexual abuse</b> | 1       | 1         | 6               | 0             |
| <b>Staff-on-inmate sexual abuse</b>  | 1       | 2         | 0               | 0             |
| <b>Total</b>                         | 2       | 3         | 6               | 0             |

### Sexual Harassment Investigation Outcomes

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

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

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

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

|   | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|---|---------|-----------|-----------------|---------------|
| <b>Inmate-on-inmate sexual harassment</b> | 0       | 0         | 6               | 1             |
| <b>Staff-on-inmate sexual harassment</b>  | 0       | 6         | 2               | 1             |
| <b>Total</b>                              | 0       | 6         | 8               | 2             |

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

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

6

|   |   |
|---|---|
| <p><b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>                  |
| <p><b>Inmate-on-inmate sexual abuse investigation files</b></p>   |   |
| <p><b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>  | <p>5</p>  |
| <p><b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>  | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p> |
| <p><b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>  | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p> |
| <p><b>Staff-on-inmate sexual abuse investigation files</b></p>  |   |
| <p><b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>   | <p>1</p>  |
| <p><b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>   | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>  |



|   |  |
|---|--|
| <p><b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>   | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>       |
| <p><b>Sexual Harassment Investigation Files Selected for Review</b></p>   |  |
| <p><b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>  | <p>5</p>   |
| <p><b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>                  |
| <p><b>Inmate-on-inmate sexual harassment investigation files</b></p>  |  |
| <p><b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>   | <p>4</p>   |
| <p><b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>   | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p> |
| <p><b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>   | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p> |

| <b>Staff-on-inmate sexual harassment investigation files</b>  |  |
|---|--|
| <b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>                         | 1  |
| <b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>                 | <input type="radio"/> Yes<br><input checked="" type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)   |
| <b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>           | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)   |
| <b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b> | <p>During the Targeted Inmate interviews the Auditor was made aware of a sexual abuse allegation made against another inmate that took place during the review period. The inmate informed the Auditor that they had not been notified of the investigative findings of the case, but when the allegation was made the staff took immediate steps to separate, the two inmates and offered medical and mental health services. Therefore, the Auditor requested that the facility confirm notification was made to the inmate. The facility provided proof that showed that the inmate has received and acknowledged receipt of the investigative findings through documentation found provided.</p> |

## SUPPORT STAFF INFORMATION

### DOJ-certified PREA Auditors Support Staff

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

Yes

No

### Non-certified Support Staff

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

Yes

No

## AUDITING ARRANGEMENTS AND COMPENSATION

**121. Who paid you to conduct this audit?**

The audited facility or its parent agency

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

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

Other

**Identify the name of the third-party auditing entity**

Corrections Consulting Services

| <b>Standards</b>   |  |
|--|--|
| <b>Auditor Overall Determination Definitions</b>   |  |
| <ul style="list-style-type: none"> <li>• Exceeds Standard<br/>(Substantially exceeds requirement of standard)</li> <br/> <li>• Meets Standard<br/>(substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <br/> <li>• Does Not Meet Standard<br/>(requires corrective actions)</li> </ul>   |  |
| <b>Auditor Discussion Instructions</b>   |  |
| <p>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.</p> |  |

| <b>115.11</b> | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>  |
|---------------|--|
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) Green Rock Correctional Center (GROC) Pre-Audit Questionnaire</li> <li>b) VADOC Operating Procedure 038.3 Prison Rape Elimination Act</li> <li>c) VADOC Operating Procedure 135.2 Rules of Conduct</li> <li>d) VADOC Organizational Chart</li> <li>e) VADOC Employee Work Profiles for the PREA Coordinator, Eastern, Western, and Central PREA Regional Analysts, and the Green Rock PREA Compliance Manager.</li> <li>f) PREA Unit Key Contact List</li> </ul> |

g) PREA Compliance memorandum dated 08/01/2012

h) GROC Organizational Chart

Interview:

1. Interview with PREA Coordinator
2. Interview with PREA Compliance Manager

Observations made during the On-Site Audit and Document Review

#### 115.11 Provision (a)

The agency has provided a written policy (VADOC OP-038.3) that indicates that The DOC has a Zero Tolerance Policy that strictly prohibits any fraternization, sexual misconduct by staff, contractors, or volunteers with inmates, or between inmates as defined in this operating procedure. The DOC actively works to prevent, detect, report, and respond to any violation. This policy also outlines how it will implement the VADOC's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. Such as employing a PREA Coordinator with enough time and authority to oversee the prisons efforts to comply with PREA standards and to make their best efforts to comply with an agency staffing plan and to have supervisors conduct unannounced rounds among many other strategies. In addition, the definitions associated with prohibited behaviors are also present in this agency policy. For example: the definition of sexual abuse, sexual harassment, and voyeurism. The policy also addresses sanctions for those who violate the PREA policy with discipline up to, and including, termination. Finally, the VADOC PREA Policy in its entirety incorporates the necessary fundamentals needed to describe VADOC's approach to detecting, preventing, and responding to allegations of sexual abuse and sexual harassment.

The evidence collected for this provision shows that the agency has a written policy mandating zero tolerance towards all forms of sexual abuse. The policy also outlines the agency's approach to detecting, preventing, and responding to sexual abuse. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.11 Provision (b)

The VADOC provided an organizational chart that I reviewed. I observed that the State PREA Coordinator is subordinate to the Corrections Operations Manager who is supervised by the Chief of Corrections (Corrections Operations Administrator). The Chief of Corrections falls directly under the supervision and control of The Director of the Department of Corrections. Thus, providing upper-level management positions to develop and implement oversight for the facility's compliance with PREA standards.

An interview was conducted with the VADOC's PREA Coordinator and she was asked whether she felt like she had enough time to manage all her PREA related responsibilities. The PREA Coordinator stated that she did have sufficient time and

that the agency was more than accommodating to her needs and time to coordinate PREA related standards. She further stated that she coordinates the effort to comply with PREA standards by ensuring the appropriate training takes place and monitors the standards for any changes or modifications. She also stated that she oversees approximately 41 PREA Compliance Managers, located at every DOC facility, and 3 PREA Regional Analyst that are responsible for PREA oversight on a select number of correctional facilities located in their region of Virginia. She stated this next level of supervision has been significant to the success of PREA compliance in the VADOC.

The evidence collected for this provision shows that the agency has demonstrated that they employ an upper level PREA Coordinator with enough time and authority to develop, implement, and oversee agency efforts to comply with PREA standards. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.11 Provision (c)

VADOC is a State Correctional System that operates thirty-eight separate confinement facilities. The agency has provided written (Employee Work Profiles) that outlines the responsibilities of the PREA Compliance Managers, the PREA Regional Analysts, and the PREA Coordinator. The work profiles governing the PREA Compliance Managers states in part that; "The role of the PREA Compliance Managers is to work at the facility-level to coordinate the mission, policies, and implementation of all PREA standards between the facilities through the PREA Regional Analyst." The PREA Coordinator provided a list of the three separate regions of Virginia along with their Analyst's names and contact information. The Regional Analysts answer to the PREA Coordinator. The Compliance Managers have specific responsibilities, such as: maintaining necessary documentation of all PREA standard compliance efforts, act as primary facility contacts for the PREA Analyst in coordinating compliance, ensure compliance with all PREA relative departmental policies and procedures, and will provide feedback to the Unit Head and Regional Analyst concerning policies, procedures, or practices that are not in compliance with PREA Standards.

In addition, VADOC has established PREA Regional Analysts. The policy that governs PREA Regional Analysts states in part that; "This position is responsible for coordinating the facilities/regions comprehensive PREA response including technical and administrative guidance, creation of supporting policies and practices, design and modification of training, programming, investigation, analysis, and interpretation relative to PREA implementation, compliance, and investigation. Crafts and orchestrates strategies to ensure appropriate environments/cultures, and enforcement of policies, procedures, practices and standards for the prevention, detection, and reduction of prison rape, ensuring proper reporting, trend evaluation and provision of recommendations for improvement and compliance."

An interview was conducted with a PREA Compliance Manager, and he was asked if he felt he had enough time to manage all the PREA related responsibilities. The PREA Compliance Manager stated that, "Yes, he carves out time for PREA and makes it a priority and that he did have sufficient time to perform the duties required."

|  |  |
|--|--|
|  | <p>Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency to have a written policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment and to employ an agency PREA Coordinator.</p> |
|--|--|

| <b>115.12</b> | <b>Contracting with other entities for the confinement of inmates</b>  |
|---------------|--|
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 260.1 Procurement of Goods &amp; Services</li> <li>c) Memorandum authored by the PREA Coordinator dated 03/20/2023 requiring contract monitoring to ensure the contractor is complying with PREA Standards.</li> <li>d) Lawrenceville Correctional Center Contract with Contract Renewals</li> <li>e) Lawrenceville Final PREA Audit Report 08/12/2022</li> <li>f) Lawrenceville Correctional Center Monitoring Monthly Reports</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>a) Agency's Contract Administrator</li> </ul> <p>Observations made during the On-Site Audit and Document Review</p> <p>115.12 Provision (a)</p> <p>The Virginia Department of Corrections contracts with GEO Corrections and Detention, LLC located in Boca Raton, Florida. VADOC has entered into a contract for private management of a single correctional facility located in the Eastern Region of Virginia. The facility is named the Lawrenceville Correctional Center. On page eleven of the contract, under Article 4, the contract states that the Contractor shall maintain and operate the facility in accordance with all federal, state, and local law; Court Orders, ACA Standards, State Regulations, and the Prison Rape Elimination Act (PREA)</p> |

standards.

The VADOC PREA Operating Procedure page 4, paragraph 2, states in part that; “Through contracts and Board of Corrections operating standards, facilities, and jails that contract for the confinement of DOC inmates must include in any new contract or contract renewal the entity’s obligation to adopt and comply with the PREA standards. Any new contract or contract renewal will provide for DOC contract monitoring to ensure that the contractor is complying with the PREA standards.” In addition, the VADOC Operating Procedure 260.1, page 10, paragraph 14, states in part that; “All contracts for the confinement of DOC inmates must include in any new contract or contract renewal the entity’s obligation to adopt and comply with the PREA standards.”

The evidence collected for this provision shows that the agency has entered into a contract for the confinement of inmates and a written policy that require the contractor to adopt and comply with PREA standards. Therefore, through written policy, the facility has demonstrated that it meets this provision.

#### 115.12 Provision (b)

The VADOC PREA Operating Procedure 038.3 page 4, paragraph 2, states in part that; “Any new contract or contract renewal will provide for DOC contract monitoring to ensure that the contractor is complying with the PREA standards.”

The Agency’s Contract Manager stated that the current contract is in effect for five years with annual renewals up to a ten-year period. She also stated that she ensures that the contract is being fulfilled by ensuring the Private Prison Liaison Officer assigned at the Lawrenceville Correctional Center is providing monthly reports to the Eastern PREA Regional Analyst. The Analyst ensures that the PREA standards are being met. Finally, the facility provided the Auditor with a copy of the PREA final report dated 08/12/2022 as proof the facility is following PREA standards.

The evidence collected for this provision shows that the agency has a written policy that require the contract be monitored for compliance with PREA standards. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard.

|               |  |
|---------------|--|
| <b>115.13</b> | <b>Supervision and monitoring</b>                    |
|               | <b>Auditor Overall Determination:</b> Meets Standard |
|               | <b>Auditor Discussion</b>                            |



The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents

- a) VADOC Operating Policy 401.2 Security Staffing
- b) VADOC Operating Policy 401.1 Development and Maintenance of Post Orders
- c) VADOC Operating Policy 401.3 Administrative Duty Officers
- d) 2023 GROC Staffing Plan dated 02/02/2023
- e) 2023 GROC Staffing Plan Review & Acknowledgement form
- f) GROC Day & Night Duty Rosters
- g) GROC Camera List
- h) Housing Units Building A through D, kitchen, medical, and RHU Unannounced PREA Logs
- i) PREA Supervisor Unannounced Logbook

Interviews:

- 1. Interview with Assistant Warden
- 2. Interview with PREA Coordinator
- 3. Interview with Intermediate or higher-level Facility Staff

Observations made during the On-Site Audit and Document Review

115.13 Provision (a)

VADOC Policy 401.2 states that; "The staffing plan for each facility is a combination of the facility's current Post Audit, approved Shift Design, and proper roster management utilizing the annual Master Roster and Daily Duty Rosters. The facility staffing plan takes into account posts that required specialized training or certification and Corrections Officer supervision of the opposite gender. The facility staffing plan provides for adequate levels of staffing, and where applicable, video monitoring to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring facilities will take into consideration:

- a.) generally accepted detention and correctional practices
- b.) any judicial findings of inadequacy
- c.) any findings of inadequacy from Federal investigative agencies
- d.) any findings of inadequacy from internal or external oversight bodies

- e.) all components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated)
- f.) the composition of the inmate population
- g.) the number and placement of supervisory staff
- h.) institution programs occurring on a particular shift
- i.) any applicable State or local laws, regulations, or standards
- j.) the prevalence of substantiated and unsubstantiated incidents of sexual abuse
- k.) any other relevant factors."

Since the last PREA audit, the average daily population of inmates at the GROC was 989 and the current staffing plan was predicated on 1100 inmates housed at the facility.

During the interview with the Assistant Warden, she was asked if the facility had a staffing plan and if the staffing levels to protect inmates from sexual abuse was considered in the plan? Also, if video monitoring is part of this plan and if the staffing plan is documented? The Assistant Warden confirmed, "Yes." to all the above questions. The Assistant Warden also confirmed that when reviewing the staffing plan on an annual basis that they consider all the above matters. The Auditor also interviewed the PREA Coordinator and asked if the above considerations are weighed when developing the staffing plan. The coordinator explained that they were considered. The staffing plan is developed for 192 full-time security staff and 175 cameras. However, the facility currently has 13 full-time security employee positions vacant in the GROC Staffing Study. Finally, the facility provided a copy of the staffing plan review and acknowledgement form that indicates that both the PREA Western Regional Analyst and the PREA Coordinator reviewed and signed off on the GROC staffing plan.

During the on-site facility tour, the Auditor looked for potential blind spots, camera placement, and understaffing or overcrowding situations. The Auditor made a recommendation to add a mirror inside a classroom to cover a potential blind spot where classes can be held for inmates and staff counselors who provide this service. However, at the time of this onsite audit phase this particular classroom was not being utilized. Any recommendations made by the Auditor during the facility tour were reiterated during the tour to the Assistant Warden, Major, and PREA Coordinator. The mirror was immediately installed and proof of this was downloaded into the OAS supplemental file.

The evidence collected for this provision shows that the agency has a written policy that addresses appropriate staffing plans and reviews. Therefore, through written policy, personal observations, interviews conducted and corrective action, the facility has demonstrated that it meets this provision.

#### 115.13 Provision (b)

VADOC Operating Policy 401.2 states that; “Each facility must make its best efforts to comply on a regular basis with the facility staff plan. In circumstances where the staffing plan is not complied with, the Facility Unit Head or designee must document and justify all deviations from the facility staffing plan.”

During the interview with the Assistant Warden, she was asked if the facility documents all instances of non-compliance with the staffing plan. The Assistant Warden stated that, “Yes, it is documented and the explanation for not meeting the plan must be justified.” The facility reported no instances of not complying with the staffing plan during the audit period.

The GROC Assistant Warden listed the top six reasons for non-compliance in the staffing plan annual review as follows:

- Vacancies
- Staff on short term disability, Parental leave, or Military leave
- Staff Sick leave
- Staff authorized leave
- Increase in medical transportation and hospital duty demands
- Mandatory In-Service Training

The evidence collected for this provision shows that the agency has a written policy that addresses documenting situations where staffing plans are not met. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.13 Provision (c)

VADOC Operating Policy 401.2 states in part that; “By January 31 of each year and more frequently if needed, the Facility Unit Head or designee will review their existing staffing plan for the facility.

1. This review will assess, determine, and document whether adjustments are needed to:

a. The facility’s established staffing plan

b. The facility’s deployment of video monitoring systems and other monitoring technologies

c. The resources the facility has available to commit to ensure adherence to the staffing plan.

2. If the review indicates that the facility is not staffing to plan, the facility must provide a comprehensive written explanation as to why and provide possible solutions

to increase facility staffing levels.

3. These comprehensive written explanations will be submitted to the Regional Operations Chief for review and forwarded to the Regional PREA Analyst. Each facility in consultation with the PREA Coordinator shall assess, determine, and document any adjustments needed whenever necessary, but no less frequently than once each year for each facility.”

The GROC has provided the 2023 Staffing Plan memorandum documenting that since the last staffing study a complete full body scanner has been acquired. This allowing all staff and visitors that enter the secured perimeter to be searched prior to entry. The facility also instituted the wearing of twenty-three body worn cameras that both record and capture audio.

During the PREA Coordinator interview, the coordinator was asked if she is consulted regarding any assessments or adjustments to the staffing plan. The coordinator stated that the staffing plan is reviewed yearly and that the PREA Coordinator must review and sign off on all staffing plan documentation.

The evidence collected for this provision shows that the agency has a written policy that addresses performing annual staffing plan reviews. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.13 Provision (d)

VADOC Operating Policy 401.1 (Supervisor Rounds) state in part that; “Post Orders will require that lieutenants and above conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Supervisors are prohibited from notifying staff of unannounced rounds and supervisors of the opposite gender must announce their presence when entering an inmate housing unit to conduct their unannounced rounds; this announcement must be document in the post logbook. Unannounced rounds must be conducted intermittently during the month and must be conducted on both night and day shifts.”

In addition, VADOC Operating Policy 401.3 states in part that; “Between the Facility Unit Head and the Assistant Facility Head, each institution’s living and activity areas shall be visited weekly.”

The GROC provided examples of PREA Supervisor Unannounced logbooks from each housing unit, kitchen and infirmary spanning over the last year. These logbooks cover both day and night shift. The unannounced log pages identify and document unannounced rounds by supervisors across all shifts at separate housing units during different times of the tour of duty. The Auditor reviewed every duty post log on security posts during the site review tour confirming that these unannounced rounds are being conducted.

During the interview process, the Auditor interviewed an intermediate or higher-level supervisory staff about unannounced rounds. The supervisor was asked if he

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|  | <p>conducted unannounced rounds and if he documented those rounds. The supervisor stated that, “Yes, he performs unannounced rounds and that they are documented on the ‘Unannounced Rounds Logbook’ and that the Commanders document their unannounced rounds.” When asked how the supervisor would prevent staff from alerting other staff members about unannounced rounds. The supervisor responded that he staggers his rounds and what buildings he enters from different directions at random times.</p> <p>The evidence collected for this provision shows that the agency has a written policy that addresses performing unannounced rounds. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency to have supervision and monitoring.</p> |
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| <b>115.14 Youthful inmates</b> |   |
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|                                | <p><b>Auditor Overall Determination:</b> Meets Standard</p>   |
|                                | <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 425.4 Management of Bed &amp; Cell Assignments</li> <li>b) Warden Memorandum referencing standard 115.14 provision (a) dated 01/2024</li> <li>c) VADOC Jail Management System CORIS Age &amp; Date of Birth report</li> </ul> <p>Observations made during the On-site Audit and Document Review</p> <p>115.14 Provision (a)</p> <p>VADOC Operating Procedure 425.4 states in part that; “Youthful Inmates under the age of 18, convicted as an adult; not under Youthful Inmate Law, the DOC provides specialized housing arrangements for youthful inmates that meet the requirements of this standard. A youthful inmate will not be placed in a housing unit in which the inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. Direct supervision by institutional staff is required at all times when a youthful inmate and an adult inmate have sight, sound, or physical contact with one another. All</p> |

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|  | <p>youthful inmates will be assigned to the specialized unit, unless this assignment would create a risk to the safe, secure, and orderly operation of the institution. Exigent circumstances may require removal to a restrictive housing unit.”</p> <p>The PREA Compliance Manager provided this Auditor with a copy of the inmate population report to provide proof that the GROC was not housing any youthful inmates over the last 12 months and that it is against policy to house a juvenile at the GROC.</p> <p>115.14 Provision (b) &amp;(c)</p> <p>VADOC Operating Procedure 425.4 states in part that; “A youthful inmate will not be placed in a housing unit in which the inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. Direct supervision by institutional staff is required at all times when a youthful inmate and an adult inmate have sight, sound, or physical contact with one another. All youthful inmates will be assigned to the specialized unit, unless this assignment would create a risk to the safe, secure, and orderly operation of the institution. Exigent circumstances may require removal to a restrictive housing unit.”</p> <p>The GROC is not authorized to hold or house youthful inmates, in accordance with the Warden’s memorandum dated 01/2024. The GROC Warden’s memo indicates that “Green Rock Correctional Center does not house inmates under the age of 18.” Therefore, this standard is not applicable.</p> <p>During the on-site tour of the physical plant, the Auditor did not witness any youthful inmates housed in the general or restricted housing units. After conducting 60 interviews with staff and inmates there was no evidence to suggest that the GROC houses youthful inmates. Also, no interviews were conducted for this standard because there have been no incidences involving youthful inmates. Therefore, this standard is not applicable, however, the agency does have policies and procedures in place to manage youthful inmates when these situations occur.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence the PREA Auditor has determined that the facility is fully compliant with this standard.</p> |
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| <b>115.15</b> | <b>Limits to cross-gender viewing and searches</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: |

Documents:

- a) VADOC Operating Procedure 445.4, Screening and Searches of Persons
- b) VADOC Operating Procedure 401.1, Development Maintenance of Post Orders
- c) VADOC Operating Procedure 401.2, Security Staff
- d) VADOC Operating Procedure 801.1, Inmate Reception and Classification
- e) VADOC Operating Procedure 720.2, Medical Screening
- f) Housing Unit Post Logs indicating Female staff announcements
- g) Memorandum by the GROC Warden dated 01/08/2024 regarding no instances of Cross-Gender Viewing & Searches
- h) GROC In-Service Roster
- i) GROC New Employee Training roster.

Interviews:

1. Interviews with Random Staff
2. Interviews with Random Inmates
3. Interview with Non-Medical Staff involved with strip searches

Observations made during the On-Site Audit and Document Review

115.15 Provision (a)

The GROC is situated on a complex that utilizes a horseshoe figuration concept with the yard area situated in the middle of the housing units in a rural area in the county of Pittsylvania, VA. The facility houses male inmates only. VADOC Operating Procedure 445.4, states in part that; "One Corrections Officer and one other DOC employee both of whom are of the same gender as the inmate or of the gender indicated on the approved Strip Search Deviation Request will accompany the inmate into an appropriate area where privacy can be ensured. No person of the opposite gender can be present or witness the strip search. The inmate will remove every article of clothing including wigs, dentures, etc. and give them to the Corrections Officer for inspection. While the inmate is disrobed, DOC employees will conduct a visual inspection of the inmate's head, hair, mouth, torso, pelvic area, legs, and feet. The inmate will spread their legs; bend over, spread their buttocks, squat, and cough, and raise arms, penis, scrotum, and breasts during the visual inspection. At no time during the visual inspection will DOC employees touch the inmate or conduct any physical intrusion into the individual's rectal or vaginal cavities. The inmate must be allowed to dress immediately after the search. Strip searches of inmates by DOC employees of the opposite gender from the inmate or the gender indicated on their approved Strip Search Deviation Request may only be conducted when there is an

immediate threat to the safe, secure, orderly operation of the facility and there is no other available alternative. Prior to conducting the search, the Shift Commander must approve the search and will be responsible for notifying the ADO and Regional PREA Analyst.”

Finally, Operating Procedure 445.4 states in part that, “Only a medical practitioner may conduct probes of the body cavities of the inmate. The medical practitioner conducting a body cavity search may or may not be the same gender as the individual being searched. At least one DOC employee of the same gender as the individual being searched must be present at all times. At least one DOC employee of the gender indicated on an approved Strip Search Deviation Request must be present at all times for the body cavity search of a transgender or intersex inmate. At the discretion of the medical Practitioner conducting the body cavity search, electronic/ radiographic imaging may be used to supplement or substitute for a physical search.”

There are no examples of exigent circumstances in the last 12 months because it is against policy and there are no female inmates housed at this facility. When conducting the on-site review of the facility, the Auditor observed adequate female staff to accommodate any day-to-day operations involving gender specific searches. When interviewing the non-medical staff responsible for conducting strip searches the officer was asked under what circumstance would it require a cross-gender strip search. The officer replied that she could not think of any circumstance that would constitute the need to cross gender strip-search an inmate of the opposite gender unless in a life-threatening situation.

The evidence collected for this provision shows that the agency has a written policy that prohibits staff from conducting cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances when performed by medical practitioners. The interview with non-medical staff that conducts strip searches confirmed the practice during the interview. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.15 Provision (b)

The VADOC Operating Procedure 445.4, states in part that; “Male or Female Corrections Officers will frisk search male inmates. Female Corrections Officers, only, will frisk search female inmates unless there is an immediate threat to the safe, secure, orderly operation of the facility and there are no Female Corrections Officer available nor other available alternative, in which case Male Corrections Officers may frisk search female inmates subject to the following conditions:

1. Prior to the search, the Shift Commander must approve the search and will notify the ADO and the Regional PREA Analyst.
2. The Corrections Officers conducting the search must submit an Internal Incident Report; see Operating Procedure 038.1, Reporting Serious, or Unusual Incidents.



Access to regularly available programming or other out of cell opportunities for female inmates must not be restricted in order to comply with the search requirements.” As stated previously, the GROC does not house female inmates. There are no examples of exigent circumstances over the last 12 months because it is against policy and no female inmates are housed at the GROC. When conducting the on-site review of the facility, the Auditor observed adequate female staff to accommodate any day-to-day operations involving gender specific pat searches if necessary.

During the on-site phase, the Auditor interviewed 12 random staff members from both day and night shifts. There was no need to ask questions concerning female inmate searches and the possible lack of inmate privileges associated with the need for female officers to search such inmates because the facility does not house female inmates.

The evidence collected for this provision shows that the agency has a written policy that prohibits staff from conducting cross-gender pat searches except in exigent circumstances. The interviews conducted with staff confirmed that there have not been incidents where female inmates have been limited to activities due to the shortage of female officers. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.15 Provision (c)

The VADOC Operating Procedure 445.4 states in part that; “Strip searches of inmates by DOC employees of the opposite gender from the inmate or the gender indicated on their approved Strip Search Deviation Request may only be conducted when there is an immediate threat to the safe, secure, orderly operation of the facility and there is no other available alternative. Prior to conducting the search, the Shift Commander must approve the search and will be responsible to notify the ADO and the Regional PREA Analyst. The Corrections Officers conducting the search must submit an Internal Incident Report; see Operating Procedure 038.1, Reporting Serious, or Unusual Incidents.” The GROC Assistant Warden provided a memo dated 01/08/2024, that indicates there were no examples of these situations during the audit rating period.

The evidence collected for this provision shows that the agency has a written policy that prohibits staff from conducting cross-gender strip searches and cross gender visual body cavity searches, except in exigent circumstances when performed by medical practitioners. Therefore, through written policy, the facility has demonstrated that it meets this provision.

#### 115.15 Provision (d)

The VADOC Operating Procedure 401.2, states in part that; “Corrections Officers of the opposite gender should be allowed to supervise an inmate housing unit when appropriate physical modifications have been made to the toilet and shower areas to provide inmates with a reasonable degree of privacy. Inmates must be allowed to shower, perform bodily functions, and change clothing without nonmedical staff of the

opposite gender viewing their breasts, buttocks, or genitalia; except in exigent circumstances or when such viewing is incidental to routine housing unit checks. Staff of the opposite gender must announce their presence when entering an inmate-housing unit and must document these announcements in the logbook.”

When conducting the site review, the Auditor observed half wall partitions separating toilets from view, shower curtains or half doors for privacy when showering, and monitoring screens with pixelated screens or cameras positioned away from these specific areas so staff could not view inmates when using the restrooms or showers. The Auditor also witnessed officers announce their presence when entering a housing block of inmates of the opposite sex. Finally, the facility provided the Auditor with facility post logs with notations made by officers documenting their opposite gender announcements.

During the on-site phase, the Auditor interviewed both random staff and inmates. The 12 random staff were asked if they or other officers announce their presence when entering a housing unit of inmates of the opposite sex. All 12 officers stated that they do. When asked if inmates can dress, shower, and use the restroom without being viewed by officers of the opposite sex, 12 officers stated yes. The Auditor also interviewed 15 random inmates and 15 targeted inmates. When asked if female officers announce their presence when entering the housing block of the opposite sex: 26 inmates stated yes, 3 inmates stated, “most of the time,” and one stated, “not all of the time.” When asked if they or other inmates are ever naked in full view of female officers all 30 inmates stated, no. That they are not.

The evidence collected for this provision shows that the agency has a written policy that enables inmates to shower, perform bodily functions, and change clothes without being viewed by staff of the opposite sex. They also have a policy that requires all staff to announce their presence when entering a housing unit of inmates of the opposite sex. The interviews conducted with random staff and inmates confirmed that staff is practicing these policies. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.15 Provision (e)

The VADOC Operating Procedures 445.4 and 720.2, both collectively state in part that; “A transgender or intersex inmate shall not be searched or physically examined for the sole purpose of determining the inmate’s genital status. If the inmate’s genital status is unknown then it may be determined through conversation with the inmate, a review of the medical record, or if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. A physical examination will not be conducted for the sole purpose of determining the genital status when a transgender or intersex inmate’s genital status is unknown. This information may be determined during an interview, by reviewing medical records, or if necessary, by learning this information as part of a broader medical examination conducted in private.”

When interviewing random staff, they were asked if they were aware of the agency

policy prohibiting staff from searching or physically examining a transgender person for the sole purpose of determining the inmate's genital status. All random officers stated that yes, they are aware and searching for the sole purpose of identifying gender is prohibited. The facility reported six transgender inmates being housed at the GROC at the time of the on-site audit phase. The Auditor was able to interview four transgender inmates that confirmed that they had not experienced a situation where they were searched for the sole purpose of determining the inmate's genital status and that the facility has abided by their choice selected on the search deviation form that was completed by the inmate.

115.15 Provision (f)

The GROC does not conduct cross-gender pat searches unless exigent circumstances exist. The facility provided training records and training curricula as proof of receiving training on cross-gender pat searches and searches of transgender and intersex inmates in a professional manner. During the on-site review, the Auditor interviewed 12 random staff and in those interviews the officers were asked if they had received training on how to conduct a cross-gender pat search and when did they received the training. All 12 officers stated that they had received training. From those interviews, 12 officers stated that they received the training during in-service training, the academy, and during their phase training.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency to have limits on cross-gender viewing and searches.

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| <b>115.16</b> | <b>Inmates with disabilities and inmates who are limited English proficient</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) Propio Audio LLC formally known as Optimal Phone Interpreters</li> <li>c) Homeland Language Services Contract (effective until 12/2024)</li> <li>d) PREA Zero-Tolerance Posters in both English &amp; Spanish</li> </ul> |

- e) PREA Informational Posters in both English & Spanish
- f) PREA Handbook in Braille
- g) PREA Inmate Acknowledgement in both English & Spanish
- h) Inmate PREA educational video in both English & Spanish
- i) GROC Warden memorandum dated 01/08/2024 regarding no instances during this rating period where the GROC housed any inmates that required American Sign Language (ALS) or who were deaf or hard of hearing.
- j) GROC Facility Handbook in Spanish

Interviews:

- a) Agency Head
- b) Random Staff
- c) Inmates with Disabilities or limited English proficient

115.16 Provision (a)

The VADOC PREA Operating Procedure 038.3 states in part that; "Inmates with disabilities and inmates who are limited English proficient (LEP), the Facility staff must take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the DOC's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such disabilities include, but are not limited to; inmates who are deaf or hard of hearing, blind or have low vision, and those who have intellectual, psychiatric, or speech disabilities. When necessary, to ensure effective communication with inmates who are deaf or hard of hearing, access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary must be provided. Written materials will be provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, and who are blind or have low vision. The facility is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans with Disabilities Act, 28 CFR 35.164."

The agency has provided documentation of two separate contracts between the VADOC and Language Lines to provide interpreting services. The first contract is between the VADOC and Homeland Language Services LLC. This company provides sign language translation and video remote interpretation with qualified American Sign Language (ASL) interpreters and the 40 most common foreign languages from any desktop, tablet or handheld device using Zoom or Teams webinar integration. The company also provides telephonic interpretation supporting 200 plus languages 24

hours a day, 7 days a week. The second contract is with Propio Interpreters Services, which provides a foreign language telephone interpreter service. During the site review, the Auditor observed the PREA Posters located in the housing units.

The Agency Head was interviewed and asked if his agency has established procedures to provide inmates with disabilities and inmates who are limited English can participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Agency Head stated that, "Yes, his agency has published information in Spanish, made accommodations for people with disabilities, (braille) and people with hearing disabilities. The Department provides for sign language interpreters and has contracts for language translation services."

The Auditor interviewed three inmates that were disabled. Two inmates were physically disabled and one inmate that was cognitively disabled. All disabled inmates were asked if the facility provided information about sexual abuse that they were able to understand, and if not, did the facility provide someone to help, write, read, or explain? Also, did the inmates understand the information that was provided? The inmates stated "Yes" to the question regarding PREA information that they could understand and "No" to having someone help them read, write, or explain their rights under PREA.

The evidence collected for this provision shows that the agency has a written policy that addresses that the facility takes appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse or sexual harassment. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.16 Provision (b)

The VADOC PREA Operating Procedure 038.3, states in part that; "Facility staff must take reasonable steps to ensure inmates who are limited English proficient, are afforded meaningful access to all aspects of the DOC's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary."

The agency has provided documentation of contracts between Propio Language Services Inc and Homeland language Services with the VADOC to provide interpreting services. The facility provided a Spanish-Inmate PREA Training Acknowledgement form that the inmate signs acknowledging receiving the PREA training. During the site review, the Auditor observed the PREA Posters located in the housing units both in English and Spanish. The facility also provides a GROC Facility Handbook in Spanish.

The Agency Head was interviewed and asked if his agency has established procedures to provide inmates with disabilities and inmates who are limited English can participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Agency Head stated

that, "Yes, his agency has published information in Spanish, made accommodations for people with disabilities, (braille) and people with hearing disabilities. The Department provides for sign language interpreters and has contracts for language translation services."

Finally, the Auditor interviewed one LEP inmate. The inmate acknowledged that the facility had provided sexual abuse information in a format that he was able to understand via a Spanish version of the educational video, Spanish PREA written material, the PREA informational posters and the interpreter services. He also stated that a counselor speaks Spanish and medical staff has used the phone line to communicate.

The evidence collected for this provision shows that the agency has a written policy that addresses that the agency takes appropriate steps to ensure that inmates who are "limited English proficient" have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse or sexual harassment. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.16 Provision (c)

The VADOC PREA Operating Procedure 038.3 states in part that; "Facility staff cannot rely on inmates' interpreters, inmate readers, or other types of inmate's assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under, or the investigation of the inmate's allegations. Video Remote Interpreting (VRI) should be utilized to effectively communicate with deaf inmates when American Sign Language interpreters are not available on-site."

During the audit interview process, the Auditor asked 12 random staff if the facility ever allows the use of inmate interpreters. From that, 8 officers stated that they would not use inmate interpreters and 4 officers stated that they would. When asked further about when and how, the 4 staff members indicated that they would use inmate interpreters when they could not communicate with the inmate due to the language barrier. Also, that to the best of their knowledge, that they had never witnessed an inmate interpreter being utilized to assist in a sexual abuse allegation.

The evidence collected for this provision shows that the agency has a written policy that addresses that the facility shall not rely on inmate interpreters. Therefore, through written policy, observations, and interviews conducted the facility has demonstrated that it meets this provision.

During the out-briefing meeting, the Auditor recommended refresher training be provided to security staff regarding in what circumstances an inmate interpreter can and should be used to assist in making an alleged sexual abuse report at the GROC based on the random staff interviews conducted. The Assistant Warden immediately directed the PCM to initiate training regarding this recommendation. On 05-03-2024, the PREA Regional Analyst provided the Auditor documentation in the form of signed training rosters indicating staff to take the required training as described above.

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|  | <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard referencing requirements for inmates with disabilities and inmates who are limited English proficient having equal opportunity or benefiting from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</p> |
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| <b>115.17</b> | <b>Hiring and promotion decisions</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 102.3</li> <li>b) VADOC Operating Procedure 102.2</li> <li>c) VADOC Operating Procedure 260.1</li> <li>d) VCIN Transaction Report for Green Rock</li> <li>e) GROC New Hire Job Applications</li> <li>f) GROC Promotion Job Application</li> <li>g) GROC Contractor and Volunteer VCIN Background Checks</li> <li>h) GROC Staff Employee Files</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>a) Interview with Human Resources Staff</li> </ul> <p>Observations made during the On-Site Audit and Document Review</p> <p>115.17 Provision (a)</p> <p>VADOC Operating Procedure 102.3 states in part that; "The DOC will not hire or promote anyone who may have contact with inmates, and will not enlist the services of any contractor who may have contact with inmates, who:</p> <ul style="list-style-type: none"> <li>1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, as defined in 42 U.S.C.</li> </ul> |

2. Has been civilly or administratively adjudicated to have engaged or has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse.”

VADOC Operating Procedure 102.2 states in part that; “The DOC will not hire or promote anyone for a position that may have contact with inmates, who:

- a. Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution.
- b. Convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
- c. Civilly or administratively adjudicated to have engaged in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse.”

Lastly, VADOC Operating Procedure 260.1 states in part that; “The DOC must not enlist the services of any contractor who may have contact with inmates, who:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution.
2. Has been civilly or administratively adjudicated to have engaged or has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse.”

During the file review part of this audit 13 personnel files were sampled. This sample included civilian staff and security staff. The review resulted in all 13 files indicating either an initial criminal history being run, a five-year criminal history check, or both checks present. In addition, the Auditor observed Personal History Questionnaires with evidence that the sexual abuse questions appear in the pre-hire interview questions. Also included in the documentation reviewed in the files were the Pre-Questionnaire Promotional Applications where the questions were reiterated and answered regarding sexual abuse. Finally, there is an attachment to the employee’s annual evaluation where the sexual abuse questions must be answered and attached to their evaluation.

The evidence collected for this provision shows that the agency has a policy prohibiting the hiring or promoting anyone who may have contact with inmates if they had engaged in sexual abuse in a confinement setting or if convicted of engaging or attempting to engage in sexual abuse and had been civilly adjudicated due to engaging in these activities. Therefore, through written policy, personal observations, and file review the facility has demonstrated that it meets this provision.



115.17 Provision (b)

VADOC Operating Procedure 102.2 states in part that; “The DOC must consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with incarcerated inmates.”

VADOC Operating Procedure 102.3 states in part that; “The DOC will consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.”

Lastly, VADOC Operating Procedure 260.1 states in part that; “The DOC must consider any incidents of sexual harassment in determining whether to enlist the services of any contractor, who may have contact with inmates.”

During the audit interview process, the Human Resources staff member was asked if the agency considers prior incidents of sexual harassment when determining whether to hire or promote anyone and to enlist services of any contractors. The H.R. staff member stated that yes, the facility does consider those prior incidents when reviewing employee evaluations and new hire applications.

The evidence collected for this provision shows that the agency has a policy requiring the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.

115.17 Provision (c)

VADOC Operating Procedure 102.3 states in part that; “Before hiring new employees, who may have contact with inmates, the DOC will:

1. Perform a criminal background records check, i.e., Virginia Criminal Information Network (VCIN)
2. Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.”

During the audit interview process, the H.R. staff member was asked if the facility performs criminal record background checks for all newly hired sworn employees, employees considered for promotion, and any contractor that may have contact with inmates. The H.R. staff member stated that; “The agency performs a criminal record check on all new hires, volunteers, contractors, and current employees every five years through the VCIN system.” She further stated that it is each facility’s responsibility to ensure the five-year checks are completed. The Auditor reviewed 13 personnel files. The Auditor determined that the 13 names of staff members that were selected had evidence in the personnel file of an initial VCIN Background Check and several that had a recurring five-year check. The facility also provided a copy of the VCIN transaction record check log that identifies the individual being run, the date, and the reason for the record check, including pre-employment background

checks.

The evidence collected for this provision shows that the agency has a policy requiring that criminal records be run on all new employees. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.17 Provision (d)

VADOC Operating Procedure 102.3 states in part that; "All DOC facilities will perform a VCIN before enlisting the services of any contractor who may have contact with inmates. All DOC community based administrative offices should perform a VCIN before enlisting the services of any contractor who will have unescorted contact with inmates."

During the audit interview process, the H.R. staff member was asked if the facility performs criminal record background checks for all newly hired sworn employees considered for promotion, and any contractor that may have contact with inmates. The H.R. staff member stated that; "The facility performs a criminal record check on all volunteers, contractors, prior to having access to the facility and every five years after that through the VCIN system." She further stated that it is each facility's responsibility to ensure the contractors and volunteers background VCIN checks are completed, and that the Assistant Warden determines if access is approved.

The facility provided the Auditor with a contractor spreadsheet that identified the names of the contractors and volunteers along with the date the background check was run along with an FBI or VA State identification number if available.

The evidence collected for this provision shows that the agency has a policy requiring that criminal records be run on all new contractors that have contact with inmates. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.17 Provision (e)

VADOC PREA Operating Procedure 038.3 states in part that; "A background investigation with a criminal history record investigation (e.g., VCIN) will be conducted every five years on all current and prospective staff and contractors to ensure against the hiring of any person with a history of perpetrating sexual abuse, assault, misconduct, or harassment."

During the audit interview process, the H.R. staff member was asked if the facility performs criminal record background checks for all sworn employees, and any contractor that may have contact with inmates. The H.R. staff member stated that; "The agency performs a criminal record check on all new hires, volunteers, contractors, and current employees every five years through the VCIN system." She further stated that it is the facility's responsibility to ensure this task is completed. The Auditor reviewed 13 personnel files. The Auditor determined that all the staff files contained a record of a criminal background check and those employed for more than

five years also had evidence of the five-year background check. The facility also provided the Auditor with a contractor VCIN spreadsheet with the dates the records check was conducted on all contractors and volunteers.

The evidence collected for this provision shows that the agency has a policy requiring that criminal records check be run on all employees, contractors, and volunteers at least every five years. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.17 Provision (f)

The Virginia State Employment Application for Corrections New Applicant Interview Questions document listed three PREA related questions that must be asked of the applicant. Question 1 states, "Have you engaged in sexual abuse in an institutional setting?" Question 2 states in part that; "Have you been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?" And finally, question 3 states in part that; "Have you been civilly or administratively adjudicated for having engaged in sexual activity described in questions 1 and 2?" The VADOC imposes an affirmative duty on each of its employees to disclose any sexual misconduct prior to employment as well as during their employment.

During the interview with the H.R. staff member, it was asked if the facility asks all applicants and employees about previous misconduct regarding inmates and does the facility impose upon employees a continuing affirmative duty to disclose previous misconduct. The H.R. staff member stated that the agency has a list of questions that must be answered during the applicant's interview as part of the background investigation. She also stated that, "Yes, all employees must report any misconduct or interaction with law enforcement." The agency provided copies of staff personal history applications, promotional applications, and annual evaluations with the questions and answers given.

The evidence collected for this provision shows that the agency has a policy requiring that they ask about previous misconduct and the employee's responsibility to disclose such misconduct. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.17 Provision (g)

VADOC Operating Procedure 102.3 states in part that; "The DOC will not hire or promote anyone who may have contact with inmates and will not enlist the services of any contractor who may have contact with inmates, who has made material omissions regarding such misconduct, or has provided materially false information, material omissions or providing false information will be grounds for termination." In addition, VADOC Operating Procedure 135.1 states in part that; "Material omissions regarding convictions or charges of sexual abuse or sexual harassment in an institutional setting, sexual activity by force or coercion, or administrative adjudication for sexual activity by force shall be grounds for termination." There are

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|  | <p>no examples or circumstances during this audit rating period to provide as proof or documentation for this provision.</p> <p>The evidence collected for this provision shows that the agency has a policy requiring that material omissions regarding such misconduct or the provision of materially false information are grounds for termination. Therefore, through written policy the facility has demonstrated that it meets this provision.</p> <p>115.17 Provision (h)</p> <p>VADOC Operating Procedure 102.7 states in part that; “Information on substantiated allegations of sexual abuse or sexual harassment involving a former employee must be furnished to any institutional employer for whom which the employee has applied to work provided the request is written.” The H.R. staff member was asked during the interview, “If a former employee applies for work at another institution and a request by that institution is made, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving that former employee?” The H.R. staff member stated that she would require a signed release of information from the requesting agency prior to releasing that information.</p> <p>The evidence collected for this provision shows that the agency has a policy requiring that unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse and sexual harassment involving a former employee upon receiving a request from an institutional employer for whom the employee has applied to work. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring hiring and promotional decisions.</p> |
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| <b>115.18</b> | <b>Upgrades to facilities and technologies</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <p>a) Warden Memorandum dated 01/08/2024 documenting no design or modifications made to its facilities during this audit period.</p> <p>b) Warden Memorandum dated 01/08/2024 documenting no installation or</p> |

modifications to any video, surveillance, or monitoring technology was made to the facility during this audit period.

c) VADOC Operating Procedure 801.1

d) GROC Camera List

#### Interviews

a) Interview with Agency Head

b) Interview with Assistant Warden / Designee

#### Observations made during the On-Site Audit and Document Review

##### 115.18 Provision (a)

VADOC Operating Procedure 801.1 states in part that; “The effect of the facility’s design, acquisition, expansion, or modification on the facility’s ability to protect the inmate from sexual abuse shall be taken into consideration when designing or acquiring any new facility and in planning any substantial expansion or modification to an existing facility.”

The facility has not acquired or made a substantial expansion or modifications to the existing facility since the last PREA audit in 2021.

The agency has provided a memo authored by the Facility Warden stating that there has been no new expansions or modifications to his facility since the last PREA Audit.

During the audit interview phase, the Agency Head was asked that when planning substantial modifications to a facility, “How does the agency consider such changes on its ability to protect inmates from sexual abuse?” The Agency Head stated, “When designing facilities, we include individuals from various departments and disciplines in the process to include people responsible for PREA and ADA.” In addition, the Assistant Warden was also asked the same question. The Assistant Warden stated, “There had been no changes or current renovations to the facility.”

The evidence collected for this provision shows that the agency shall consider the effect of such design to improve the ability to protect inmates from sexual abuse. Therefore, through personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

##### Provision B:

VADOC Operating Procedure 801.1 states in part that: “For new installations or updates to existing video monitoring systems, electronic surveillance systems or other monitoring technologies, the facility shall take into consideration how such technology may enhance their ability to protect inmates from sexual abuse.”

The agency has provided a memo authored by the Facility Warden stating that there has been no new installation or updates to any video monitoring systems, electronic

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|  | <p>surveillance systems, or other monitoring technology at its facility since the last PREA Audit.</p> <p>During the audit interview phase, the Agency Head was asked how the agency uses monitoring technology. The Agency Head stated that; “The department utilizes cameras extensively throughout their facilities to help with detection of illegal activities to include sexual abuse. They also use telephonic notifications so anyone can pick up the phone to report any such violations.” The Assistant Warden was also asked a similar question about how the facility had considered using technology to enhance inmates’ protection from sexual abuse. The Assistant Warden, stated that; “The facility tries to identify blind spots and review all technology on a weekly basis to make sure all cameras are in working order to be as effective as possible.”</p> <p>During the on-site review tour, the Auditor observed security cameras and monitors located throughout the facility.</p> <p>The evidence collected for this provision shows that the agency has considered how technology may enhance the facility’s ability to protect inmates from sexual abuse. Therefore, through written memorandums, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard addressing upgrade to facilities and technology.</p> |
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| <b>115.21</b> | <b>Evidence protocol and forensic medical examinations</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 030.4 Special Investigative Unit</li> <li>c) VADOC Operating Procedure 030.1 Evidence Collection and Preservation</li> <li>d) VADOC Operating Procedure 720.7 Emergency Medical Equipment and Care</li> <li>e) Code of Virginia 53.1-10</li> <li>f) Special Investigations Unit (SIU) Matrix</li> </ul> |

- g) Virginia Forensic Nurse Examiner Program by Region
- h) Business Contract between Virginia Department of Corrections and the Virginia Sexual and Domestic Action Alliance. (Effective date 04/18/2023)
- i) Memorandum by the GROC Assistant Warden dated 01/08/2024 regarding no instances requiring medical forensic exams.
- j) Memorandum by the GROC Assistant Warden dated 02/09/2024 regarding no instances where a request was made for victim advocacy services regarding a sexual abuse forensic medical examination.

Interviews

- 1. Interview with SANE/SAFE staff
- 2. Interview with inmates who reported a sexual abuse
- 3. Interview with the PREA Compliance Manager
- 4. Interviews with random staff

Observations during on-site Facility tour.

115.21 Provision (a)

VADOC PREA Operating Procedure 038.3 states in part that: "Unless the Facility Investigator quickly and definitively determines that the allegation is unfounded, allegations of sexual abuse or sexual harassment must be referred for investigation to SIU. The facility Investigator will document all such referrals. SIU conducts investigations into criminal behavior, procedural, or administrative violations, and staff misconduct affecting operations of the DOC."

VADOC Operating Procedure 030.4, states in part that; "The SIU is authorized to conduct administrative and / or criminal investigations into allegations of sexual abuse or sexual harassment in DOC facilities." It further states that; "All special agents are required to be sworn police officers in the state of Virginia with full police powers and must maintain DCJS law enforcement certification." Page 12, paragraph 7, of the VADOC policy 030.4 states in part that; "SIU has an established uniform evidence protocol which maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions."

Code of Virginia §53.1-10 "Powers and duties of the Director" paragraph 11 states that; "The Director of VADOC will designate employees of the Department with internal investigations authority to have the same power as a sheriff or a law-enforcement officer in the investigation of allegations of criminal behavior affecting the operations of the Department."

During the review phase of the Pre-Audit Questionnaire the Auditor reviewed standard 115.21 and noted that the VADOC Special Investigations Unit (SIU) is responsible for all criminal investigations that occur on the grounds owned and operated by the

VADOC. The PREA Coordinator was contacted and asked this question. The PREA Coordinator explained that the VADOC SIU conducts all criminal sexual assault investigations at the VADOC facilities. The Auditor contacted the VADOC Special Investigation Unit to establish if they did in fact conduct alleged sexual assault criminal investigations at the GROC. Arrangements were made by the Auditor to contact a SIU Agent via phone call. The Auditor contacted an Agent with the Special Investigation Unit. He informed the Auditor that they do in fact investigate all criminal sexual assault allegations and acknowledged that the only requirement needed to send an investigator is an official request from the Facility Investigator. The SIU is responsible for investigating allegations of sexual crimes that occur within the VADOC facilities and is familiar with PREA standard 115.21 pertaining to the investigation of sexual assaults, the collection of evidence, and forensic examinations. Furthermore, the GROC provided VADOC Policy 030.1, Evidence Collection and Preservation which states in part that; "The Sexual Assault Victim Search/ Evidence Collection Protocol (see Operating Procedure 038.3, Prison Rape Elimination Act (PREA)) shall be followed for all investigations into allegations of sexual abuse to maximize the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. See Operating Procedure 030.4, Special Investigations Unit, and Operating Procedure 720.7, Emergency Medical Equipment and Care, for additional guidance."

When the Auditor interviewed random staff, it was determined that all 12 staff were aware of their responsibilities to preserve evidence during a sexual abuse allegation. They discussed securing the scene, notifying a supervisor immediately, contacting medical personnel, placing clothing in a brown paper bag, writing a detailed report, and not allowing the victim or accuser to bathe or brush their teeth. Also, when asked who was responsible for investigating criminal and administrative cases, staff members identified the VADOC SIU 2 times, the Facility Investigator 3 times, the PREA Compliance Manager 4 times, two officers were not sure, and one officer indicated medical staff. All random staff interviewed were therefore aware of the protocol for evidence collection, however, the majority of sworn staff were not sure who, and under what circumstances, the facility investigator or SIU would conduct sexual abuse allegations. The facility investigator does conduct an initial inquiry to determine what the allegation is and if it appears to be a legitimate allegation. If the allegation is indeed a sexual abuse allegation then that information is forwarded to the SIU for investigation. If it is determined that the allegation is sexual harassment then the facility investigator is assigned the case.

The Auditor recommended that remedial training be conducted to all security staff regarding the agency/facility responsibility for conducting criminal sexual abuse investigations including inmate-on-inmate sexual abuse or staff sexual misconduct and who is responsible for conducting those investigations. On 05/03/2024 the PREA Regional Analyst uploaded completed PREA Post-Audit Security Refresher Training rosters for both days and nights security staff that outlines the agency policy 038.3 and informs staff of who is responsible for conducting sexual abuse and sexual harassment investigations.

The evidence reviewed for this provision shows that the agency has demonstrated



that they do follow a uniform evidence protocol for obtaining physical evidence for administrative and criminal proceedings. Therefore, through written policy, and interviews conducted, the agency has demonstrated that it meets this provision.

#### 115.21 Provision (b)

The facility did not house youthful inmates in their facility over the last twelve months. The GROC provided VADOC Policy 030.4, which states in part that; "The established protocol is developmentally appropriate for youth and is based on or similar to other comprehensive and authoritative protocols developed after 2011."

The GROC utilizes the VADOC SIU to conduct all criminal investigations within the facility. The GROC provided policy that states all Special Agents for the VADOC are certified law enforcement officers through the Department Criminal Justice Services. In addition, the policy listed above would suggest that all necessary protocols would be adapted and followed on the most recent edition of the Department of Justice (DOJ's) Office on Violence Against Women publication in accordance with this standard.

The evidence reviewed for this provision shows that the agency has demonstrated that they do follow a protocol that is developmentally appropriate for youth. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.21 Provision (c)

The Facility offered VADOC Operating Procedure 720.7, which states in part that; "If evidentiary or medically appropriate, inmate victims of sexual assault are referred under appropriate security provisions to an outside facility for treatment and gathering of evidence. A history is taken by a health care professional who will conduct a forensic medical examination to document the extent of physical injury. Such examinations will be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. There will be no financial cost to the inmate victim for this examination."

Any allegations of sexual abuse that appears criminal will be referred to the VADOC SIU for criminal investigation. The alleged victim shall be immediately transported to Centra Gretna Medical Center to be examined by a medical professional who is skilled and experienced in the use of rape kits for the collection of forensic evidence. Gretna Medical Center employs Sexual Assault Nurse Examiners (SANE) or a Sexual Assault Forensic Examiners (SAFE). However, they are only available from 0700 hours to 2300 hours a day. If the situation dictates that a forensic medical examination is required outside this time frame then the inmate victim can be taken to Centra Lynchburg Hospital. This policy also specifically states that treatment services shall be provided to the alleged victim without financial costs to the victim.

The Centra Gretna Hospital is a licensed health care facility that will provide health care services to inmates housed in a state or local correctional institution. An inmate who is a victim of an alleged sexual abuse may be transported to Gretna Medical

Center for a sexual assault forensic examination. The hospital employs one or more staff members trained in sexual assault examination. The hospital agrees that any such examination will be performed by a nurse trained in sexual assault examination under the direction of a physician.

The facility provided a memo from the Assistant Warden that indicated that there have been no instances during this rating period where an inmate housed at the GROC required a forensic medical examination. However, prior to the on-site visit the facility did report one SANE examination.

During the pre-audit phase, an interview was conducted by the Auditor with a Sexual Assault Nurse Examiner (SANE). The interview was conducted by phone with a SANE Nurse employed with Centra Hospitals in VA. A SANE nurse is a highly skilled certified nurse trained in the art of evidence collection and chain of custody. The nurse is considered the subject matter expert in collecting evidence after an alleged sexual assault has occurred. The nurse is also required to provide testimony in court cases related to sexual abuse. The Nurse explained that she is aware of an agreement between the VADOC and the Centra Gretna Medical Center when it comes to conducting SANE exams. She explained that Centra Medical Centers conducts SANE exams for the surrounding jurisdictions. When asked if the Centra Gretna Medical Center is responsible for conducting all forensic medical exams for inmate victims of sexual abuse for Green Rock Correctional Center, the SANE Nurse stated, "Yes, they are the hospital that offers forensic medical examinations and would provide those services for the surrounding correctional facilities if requested by law enforcement." When asked if SANE staff is unavailable to conduct forensic medical examinations, then who assumes the responsibility? The SANE Nurse replied, "That her medical facility is available and that nurses are always on call 24 hours a day 7 days a week 365 days a year." However, she did state that there is a lapse in coverage between the hours of 11:00pm and 7:00am. The SANE Nurse explained that if the incident occurred during this time period the alleged victim would have to wait until 7:00 am, or if necessary, referred to Lynchburg General Hospital that provides medical forensic examinations during that time period.

The facility did report one incident of a SANE examination being performed during this auditing period. The Auditor viewed the case file where evidence existed of medical treatment being provided.

The evidence collected for this provision shows that the agency has procedures in place to offer all victims of sexual abuse access to forensic medical examinations at an outside facility, without financial cost to the victim. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.21 Provision (d)

The facility has provided VADOC PREA Policy 038.3, which states in part that; "The DOC will attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the services of a qualified staff member or a qualified staff member from a community-

based organization must be made available.” In addition, VADOC Operating Procedure 730.2 states in part that; “The DOC will attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the DOC must make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member.”

The Facility has provided a business contract between The VADOC and the Virginia Sexual and Domestic Violence Action Alliance with a renewal contract dated 09/01/2023. The Action Alliance is a victim services advocate that provides confidential support and assistance to sexual assault victims for the entire inmate population incarcerated in the Virginia Department of Corrections. In accordance with 42. USC 14043g (b) (2) (c) the requirements to be considered a “rape crisis center” are as follows:

1. Provide a 24-hour hotline
2. Accompaniment and advocacy through the medical, criminal justice, and social support systems.
3. Short-term crisis intervention support.
4. Information and referral to assist sexual assault victim and family
5. Community out-reach for underserved communities
6. The development and distribution of materials on issues related to the above-listed issues.

The Auditor has reviewed The Virginia Sexual and Domestic Violence Action Alliance website to determine that this advocacy group does meet all the criteria listed above to be considered a “rape crisis center.”

The MOU states that The Action Alliance will maintain a trained pool of advocates to respond to sexual assault and maintain confidentiality as required by state standards for certified crisis counselors.

The PREA Compliance Manager was interviewed by the Auditor and stated that staff would allow access to a victim advocate if the inmate requested. The PREA Compliance Manager also stated that the facility provides access to Action Alliance through the phone. During the on-site facility tour the Auditor initiated a call to the Action Alliance through the inmate phone system while touring a housing unit to determine the effectiveness and efficiency of the organization. Finally, the Auditor interviewed three inmates that had recently reported sexual abuse. When asked if the facility allowed them to contact anyone after reporting the sexual abuse, one inmate stated that he did, and the other two inmates indicated that they were not offered any services.

During the on-site review, the Auditor spoke to several inmates who confirmed the availability to contact The Action Alliance via phone and test called both the reporting

sexual abuse number and the requesting advocacy number. This demonstrates the agency's attempt to make available to victims of sexual abuse a victim advocate from a rape crisis center.

The evidence collected for this provision shows that the agency has demonstrated that they do offer services from a victim advocate from a rape center that is not associated with the criminal justice system or law enforcement and provides confidentiality. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.21 Provision (e)

The facility has provided VADOC PREA Operating Procedure 038.3, which states in part that; "As requested by the victim, a victim advocate, qualified staff member, or qualified community-based organization member will accompany and support the victim through the forensic medical examination process and investigatory interviews and will provide emotional support, crisis intervention, information, and referrals." VADOC Operating Procedure 030.4 states in part that; "If requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interview." And finally, under VADOC Operating Procedure 720.7 it states in part that; "As requested by the inmate victim, a victim advocate, qualified DOC staff member, or a qualified community-based organization staff member will accompany and support the inmate victim through the forensic medical examination process and investigatory interviews and will provide emotional support, crisis intervention, information, and referrals."

The facility also provided the MOU with Action Alliance as additional guidance addressing when a victim advocate can accompany an alleged sexual assault victim through the forensic examination and during the investigatory interview process. The MOU states in part that; "Upon request of the victim or someone requesting on behalf of the victim, have a trained qualified advocate available to accompany and support the victim through the forensic medical examination process and investigatory interviews within a reasonable period of time."

The GROC provided a memo from the Assistant Warden indicating that the facility did not have any instances requiring a victim advocate to accompany an inmate during a medical forensic examination. However, prior to the on-site phase an inmate was taken to the hospital for a SANE examination. When the Auditor reviewed the case file that required a SANE examination the facility documented that an advocate was made available to the inmate at the time of the examination through the medical center. Lastly, when asked how the agency ensures that the advocate meets the qualifications described above, the PREA Compliance Manager stated that the service is coming from an official rape crisis center and the counselors must be licensed. When conducting interviews with three inmates that reported sexual abuse, none of these inmates required a medical forensic examination given the nature of their allegations.

The evidence collected for this provision shows that the agency has demonstrated

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|  | <p>that they do allow victim advocates to accompany and support alleged victims of sexual assault during the forensic examination and during the investigatory interview. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>115.21 Provision (f)</p> <p>The agency/facility is responsible for conducting administrative and criminal sexual abuse investigations; Therefore, this provision is not applicable to the GROC.</p> <p>The evidence collected for this provision shows that the agency/facility conducts their own administrative and criminal sexual abuse investigation and therefore, this provision is not applicable to this facility.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency to provide evidence protocols and forensic medical evaluations.</p> |
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| 115.22 | <b>Policies to ensure referrals of allegations for investigations</b>   |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 030.4 Special Investigative Unit</li> <li>c) Investigations Matrix</li> <li>d) GROC Sexual Abuse and Sexual Harassment investigative case files</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Agency Head</li> <li>2. Interview with Investigative Staff</li> </ul> <p>Observations made during the On-site Phase of the Audit.</p> <p>115.22 Provision (a)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “An administrative or</p> |

criminal investigation conducted in accordance with PREA standards must be completed and documented for all allegations of sexual abuse and sexual harassment. If the alleged abuser is staff, the staff member must be reassigned to a post with no inmate direct contact with the alleged victim, suspended, or placed on pre-disciplinary leave with pay based on circumstance or situation, pending completion of the investigation as outlined in Operating Procedure. Upon receipt of an allegation of sexual abuse or sexual harassment, investigative staff will have 30 days to complete an administrative investigation into the allegation. The initial investigation will be conducted by the Facility Investigator or other staff member who has received the required specialized training to conduct sexual abuse investigations. If it is determined that the investigation will not be completed within 30 days, the Facility Investigator must contact the Regional PREA Analyst to discuss an extension. When the Regional PREA Analyst determines that an extension is needed, periodic updates must be provided at an interval deemed appropriate by the Regional PREA Analyst. If a determination is made that the sexual abuse allegation will be handled by SIU, the Facility Investigator will notify the Regional PREA Analyst.”

VADOC Operating Procedure 030.4 states in part that; “The Facility Unit Head shall ensure that an administrative and/or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.”

In the past twelve months, the GROC reported that they had received 28 allegations of sexual abuse or sexual harassment. The facility has reported that 23 resulted in administrative investigations and 5 cases were turned over to the SIU unit for criminal investigation. While on-site, the Auditor reviewed 11 administrative investigations.

When interviewing the Agency Head, he stated that “Yes, the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and harassment.” The Agency Head explained that sexual abuse allegations can be investigated by institutional investigators who can then refer to the Special Investigation Unit if there is evidence of wrongdoing.

During the document review, the Auditor reviewed 11 case files that consisted of 5 allegations of sexual harassment and 6 allegations of sexual abuse. All cases were investigated by the Facility Investigator and/or SIU respectively.

The evidence collected for this provision shows that the agency has procedures in place to ensure that an administrative or criminal investigation is completed on all allegations of sexual abuse and sexual harassment. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.22 Provision (b)

VADOC PREA Operating Procedure 038.3 states in part that; “Unless the Facility Investigator quickly and definitively determines that the allegation is unfounded, allegations of sexual abuse or sexual harassment must be referred for investigation to SIU. The facility investigator will document all such referrals. SIU conducts investigations into criminal behavior, procedural or administrative violations, and staff

misconduct affecting the operations of the DOC.” In addition, VADOC Operating Procedure 030.4 states in part that; “Unless the facility investigator quickly and definitively determines that the allegation is unfounded, allegations of sexual abuse or sexual harassment shall be referred for investigation to the DOC Special Investigations Unit who has the legal authority to conduct criminal investigations.” The agency PREA Policy 038.3 can be found in its entirety on the agency website.

During the pre-audit phase, the Auditor interviewed a Special Agent with the DOC Special Investigation Unit that is assigned to conduct investigations at the GROC. The investigator was asked if agency policy requires that allegations of sexual abuse be referred for investigation to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potential criminal activity. The investigator stated, “Yes, the agency has policy that directs all criminal investigations be conducted by the Special Investigation Unit.” In addition, while on-site the Auditor conducted an interview with the facility investigator. When this same question was posed to the facility investigator, he indicated that he would conduct an initial inquiry and if he believed probable cause existed that a crime had been committed then he would contact SIU. The facility investigator also stated that SIU has the legal authority to conduct criminal investigations.

The evidence collected for this provision shows that the agency has procedures in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### Provision (c)

The GROC is part of the Virginia Department of Corrections who perform their own criminal investigations into sexual abuse and sexual harassment allegations that occur on the prison grounds. Therefore, this provision in the standard is not applicable to this facility.

#### Provision (d)

The GROC has provided OP 030.4 (Special Investigations Unit) with governs and outlines the guidance when conducting criminal sexual abuse investigations in a confinement setting for those SIU agents assigned to this Unit.

#### Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency to ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

**Auditor Overall Determination: Meets Standard**

**Auditor Discussion**

The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) VADOC Operating Procedure 102.6 Staff Orientation
- b) VADOC Operating Procedure 350.2 Training & Development
- c) Basic Correctional Officer (BCO) Training Checklist
- d) BCO Participant Outline
- e) BCO PREA Trainer Outline
- f) PREA Basics Curriculum Training
- g) PREA In-Service Training Outline and Checklist
- h) PREA & ADA News issues
- i) GROC In-service Roster
- j) 2023 PREA Online In-service Training

Interviews:

- 1. Interview with Random Staff

Observations made during the On-Site Audit and Document Review

115.31 Provision (a)

The GROC provides PREA refresher training to all their employees on an annual basis. The facility also trains contractors and volunteers during their initial orientation process and then annually. New hires are trained while in basic training and then on an annual basis. The GROC has provided the PREA BCO Introduction & Checklist along with the PREA Overview Curriculum through on-line services. They have provided PREA In-Service Training rosters along with agency policy VADOC Operating Procedure 350.2, which states in part that; "In-service training programs shall include refresher training on current DOC sexual abuse and sexual harassment policies and procedures and will cover the following areas:

- Its zero-tolerance policy for sexual abuse and sexual harassment
- How to fulfill responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures
- Inmates' right to be free from sexual abuse and sexual harassment



- The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment
- The dynamics of sexual abuse and sexual harassment in confinement
- The common reactions of sexual abuse and sexual harassment victims vii. How to detect and respond to signs of threatened and actual sexual abuse
- How to avoid inappropriate relationships with inmates
- How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates
- How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.”

Also provided is agency policy 102.6, which states in part that; “The DOC will train all employees who may have contact with inmates on:

- a. Its zero-tolerance policy for sexual abuse and sexual harassment
- b. How to fulfill their responsibilities under DOC sexual abuse and sexual harassment prevention, detection, reporting, and response procedures
- c. The inmates’ right to be free from sexual abuse and sexual harassment
- d. The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment
- e. The dynamics of sexual abuse and sexual harassment in confinement
- f. The common reactions of sexual abuse and sexual harassment victims
- g. How to detect and respond to signs of threatened and actual sexual abuse
- h. How to avoid inappropriate relationships with inmates
- i. How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates
- j. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.”

During the interview process, 12 random staff were asked if they had received PREA training, and if so, when? All 12 officers indicated that they have received PREA training. Annual in-service training was mentioned 9 times; when they were first hired was mentioned 6 times; and during a phase class was mentioned twice. When the Auditor reviewed staff files, it contained the dates of the initial training and proceeding PREA refresher training.

The evidence collected for this provision shows that the agency has procedures in place to train all employees on all relevant topics outlined in this standard provision.

Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.31 Provision (b)

VADOC Operating Procedure 102.6 states in part that; “Training is tailored to the gender of the inmates at the employee’s facility. The employee must receive additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa.” In addition, agency policy 350.2 states in part that; “Such training shall be tailored to the gender of the inmates at the employee’s facility. The employee shall receive additional training, to include gender diversity, if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa.”

The evidence collected for this provision shows that the agency has trained all employees in all aspects of PREA regarding the specific gender facility. Therefore, there is no need to provide additional training when transferred to a facility that holds only one specific gender. Through written policy the facility has demonstrated that it meets this provision.

#### 115.31 Provision (c)

The GROC provides PREA training on a yearly basis. All new employees receive initial training when attending the new-hire orientation and basic training. All new contractors and volunteers receive their initial training during the orientation process as well and then annually. This practice was confirmed by sampling 12 employee training records. The files indicated that all 12 employees received initial PREA training, and 9 officers had received refresher training. The 3 staff files that were missing the refresher training documentation had hire dates of 2024 and the Fall of 2023. The Auditor has determined that these files were accurate given the newly hired status and that the officers had not been employed for an entire year. Finally, the GROC provided several PREA training attendance rosters and basic training records documenting the completion of the agency’s annual PREA refresher training. The facility also provided a monthly newsletter specific to PREA and ADA with updates and reminders associated with PREA.

The evidence collected for this provision shows that the agency has provided initial and refresher PREA training to all their employees at least once a year. Therefore, through written policy and file review observations, the facility has demonstrated that it meets this provision.

#### 115.31 Provision (d)

VADOC Operating Procedure 350.2 states in part that; “The agency shall document, through employee signature or electronic verification, that employees understand the training they have received.” The facility also offered agency policy 102.6, which states in part that; “The agency will document through employee signature or electronic verification that employees understand the training they have received.”

The GROC maintains training documentation that includes certificates of completion, training rosters, and PREA Training Acknowledge forms. These documents show either electronic verification or staff signatures from volunteers, contractors, and sworn staff verifying they understand the PREA training and materials they have received.

The GROC provided examples of employee training records in either hard copy with handwritten signatures or signatures generated from a Jail Management System platform that makes the student/officer electronically acknowledge the training that was received and that requires the employee to sign acknowledging that they understand the training that was provided.

The evidence collected for this provision shows that the facility has provided documentation through employee signature, acknowledging that the employee understands the training received. Therefore, through written policy and file review observations, the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency train all employees who have contact with inmates on its zero-tolerance policy for sexual abuse and/or harassment. Also, how to fulfill their responsibilities for preventing, detecting, reporting, and responding to sexual abuse. The inmates and employees' rights to be free from retaliation, inmates right to be free from sexual abuse, the dynamics of sexual abuse in confinement, common reactions of sexual abuse victims, how to communicate effectively with inmates, including LGBTQ inmates, and how to comply with relevant laws related to mandatory reporting of sexual abuse.

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| <b>115.32</b> | <b>Volunteer and contractor training</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 102.6 Staff Orientation</li> <li>b) VADOC Operating Procedure 350.2 Training &amp; Development</li> <li>c) VADOC PREA Operating Procedure 038.3</li> <li>d) VADOC Operating Procedure 027.1 Volunteer and Internship Programs</li> </ul> |

- e) Contractor and Volunteer PREA Training Acknowledgement
- f) Guide for Maintaining Boundaries Brochure
- g) PREA Contractor/Volunteer Trainer Outline
- h) Contractor/Volunteer PREA Training PowerPoint presentation

Interview:

1. Interview with Volunteer
2. Interview with Contractor

115.32 Provision (a)

VADOC PREA Policy 038.3 states in part that; "All contractors and volunteers with the DOC who have physical, visual, or auditory contact (or could have contact) with inmates will be trained on their responsibilities to prevent, detect, monitor, and report allegations and incidents of sexual abuse and sexual harassment of inmates. The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates. At minimum, such persons will be notified of the DOC's Zero Tolerance Policy regarding sexual abuse and sexual harassment and informed how to report such incidents. All volunteers and contractors will be provided with a copy of Attachment 4, a Guide to Maintaining Appropriate Boundaries with Inmates for Contractors and Volunteers of the Virginia Department of Corrections, and will be required to sign Attachment 6, Prison Rape Elimination Act (PREA) Training Acknowledgement."

VADOC Operating Procedure 102.6 also states in part that; "The agency must ensure that all interns, volunteers, and contractors who have contact or could have contact with inmates have been trained on their responsibilities under the DOC sexual abuse and sexual harassment prevention, detection, and response procedures and have signed the Prison Rape Elimination Act (PREA) Training Acknowledgement attachment to Operating Procedure 038.3, Prison Rape Elimination Act (PREA)."

All volunteers and contractors who have contact with inmates will be trained on the VADOC's responsibilities under the department's PREA policy. The level and type of training provided to the volunteers and contractors is based on the services they provide and the level of contact they have with inmates, but all volunteers and contractors who have contact with inmates are notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report such incidents. GROC maintains documentation showing volunteers, contractors, and DOC employees signatures verifying that they understand the training and materials they have received.

Volunteers and Contractors are trained during their initial orientation and are required to acknowledge that they have received the necessary PREA training by signing a Contractor/Volunteer PREA Acknowledgement form. The facility maintains all copies of signed volunteer and contractor acknowledgement forms and the facility provided

examples of those forms as evidence of their compliance.

During the interviews with a volunteer and a contractor, the Auditor asked if they had been trained in their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response. Both individuals that were interviewed answered in the affirmative.

While performing the document review and the PAQ review the Auditor observed several signed volunteer/contractor PREA Acknowledgement forms.

The evidence collected for this provision shows that the agency has procedures in place to ensure all volunteers or contractors that have contact with inmates are trained on the prevention, detection, and response policies regarding sexual abuse and sexual harassment. Therefore, through written policy, personal observations, and interviews conducted, the agency has demonstrated that it meets this provision.

#### 115.32 Provision (b)

VADOC Operating Procedure 027.1 states in part that; "The level and type of training provided to volunteers/interns will be based on the services they provide and level of contact they have with inmates. All volunteers/interns who have contact with inmates must be notified of the DOC's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents." In addition, the facility provided VADOC Operating Procedure 350.2, which states in part that; "Contractors and volunteers with the DOC who have contact (or could have contact) with inmates shall be trained on their responsibilities to prevent, detect, monitor, and report allegations and incidents of sexual abuse and sexual harassment of inmates and probationers. The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. The facility shall maintain documentation confirming that volunteers and contractors understand the training they have received."

The facility currently reports 40 contractors and volunteers reporting 100% participation in training. Volunteers and contractors are trained during their initial orientation and are required to acknowledge that they have received the necessary PREA training by signing a Volunteer/Contractor PREA Acknowledgement form. The facility maintains all copies of signed Volunteer and Contractor Acknowledgement forms.

When interviewing the volunteer, he stated that training consists of the PREA zero-tolerance policy, and how to report if you are told. Also, if he was confronted with an allegation, how he would tell the watch commander or security staff. When one contractor was asked the same question her response was that she received the PREA training when she first got hired. She explained that the training consisted of the definition of sexual abuse and harassment; separating the victim and asking the victim not to eat, drink, shower, and use the bathroom. The contractor also indicated

that if someone made an allegation of sexual abuse to her that she would notify the Watch Commander or Assistant Warden. The PREA training curriculum provided in the PAQ contains information regarding the agency’s zero-tolerance towards all sexual abuse and the PREA volunteer and contractor acknowledgement form confirms receipt of that information.

The evidence collected for this provision shows that the agency has procedures in place to ensure all volunteers or contractors are notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

115.32 Provision (c)

VADOC Operating Procedure 027.1 states in part that; “Receipt and understanding of these materials will be documented by the volunteer’s/intern’s signature on the Volunteer/Intern Agreement 027\_F4 and on the Prison Rape Elimination Act (PREA) Training Acknowledgement attachment to Operating Procedure 038.3, Prison Rape Elimination Act.” Also, the facility provided VADOC Policy 102.6 which states in part that; “The agency will maintain documentation confirming that interns, volunteers, and contractors understand the training they have received.”

The volunteer and contractor acknowledgement forms are maintained by the PREA Compliance Manager and observed during the document review phase of this audit. In addition, the facility provided several examples of signed PREA acknowledgment forms in the PAQ.

The evidence collected for this provision shows that the agency has procedures in place to ensure all volunteers or contractors documentation confirming that they received PREA training and understood that training. Therefore, through written policy and personal observations, the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring PREA training for both volunteers and contractors.

| 115.33 | Inmate education  |
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|        | <b>Auditor Overall Determination:</b> Meets Standard  |
|        | <b>Auditor Discussion</b>   |
|        | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> |

- a) VADOC PREA Operating Procedure 038.3
- b) VADOC Operating Procedure 810.2
- c) Zero-Tolerance PREA Posters both in English, Spanish, and Hearing Impaired
- d) Inmate PREA Training Acknowledgement Form
- e) Inmate Training Comprehensive Document
- f) Inmate Training Intake Document
- g) PREA Handbook in Braille
- h) GROC Inmate Handbook

Interview:

1. Interview with Intake Staff
2. Interview with Random Inmates

115.33 Provision (a)

All VADOC inmates arriving at the state correctional system are initially sent to an Intake Facility. Here the inmates are classified, medically evaluated, and provided with all the necessary education and information needed during their stay. It is at these Intake Facilities that the VADOC inmates initially receive the PREA information along with the more comprehensive PREA education. At the GROC, they receive inmates from only other Virginia State Penitentiaries. Therefore, all inmates will receive their initial PREA education and information regardless as to where the inmate was housed before.

VADOC PREA Operating Procedure 038.3 state in part that; "All inmates newly received into the DOC from a jail or other non-DOC facility will receive information explaining the DOC's Zero Tolerance Policy for sexual abuse and sexual harassment and instructions on how to report incidents or suspicions of sexual abuse or sexual harassment. This information must be communicated verbally and in writing, in language clearly understood by the inmates and will include the following topics: Definition of sexual misconduct/assault, and behaviors prohibited by staff, contractors, volunteers and inmates. DOC Zero Tolerance Policy, Prevention/ Intervention, Self-protection, Reporting sexual abuse/assault/harassment, Treatment and counseling, Inmate telephone sexual abuse Hotline Number #55, Free Emotional Support through Hotline Number #55, Option 2."

"Within 10 days of arrival, the inmate will receive a comprehensive PREA training, utilizing Attachment 2b, Preventing Sexual Abuse & Sexual Assault Trainer Outline (Comprehensive) and the video PREA: What You Need to Know."

The GROC identified that there were 822 inmates admitted into their facility in the last twelve months. Of those 822 inmates, all received the initial PREA information

during the intake process along with comprehensive PREA educational information from the facility counselor within 10 days of transferring to the GROC.

During the interview with the Intake Officer, she explained that part of her responsibility as a facility counselor is to provide all arriving inmates with the zero-tolerance policy and how to report sexual abuse. She stated the inmates sign the PREA Training Acknowledgement form after they have watched the PREA video. She also goes over the PREA hotline and third-party reporting. The Intake Officer provides the inmates with a packet in written format that also goes over the PREA video. Finally, the counselor indicated that there are posters mounted on the walls throughout the facility that explain these same instructions. When the Auditor interviewed 15 random inmates and 15 targeted inmates, they were asked if they had received information about the facility's rules against sexual abuse and harassment. All 30 inmates affirmed and acknowledged that they had received PREA educational information. Of those 30 inmates interviewed, 9 inmates specifically indicated that they had received the training in the form of video and a written packet and were given that information within 1 to 2 days of arriving at the facility.

The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates receive information explaining how to report sexual abuse and the agency's policy on zero-tolerance for sexual abuse or harassment at the time of intake. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.33 Provision (b)

VADOC PREA Operating Procedure 038.3 states in part that; "Within 10 days of arrival, the inmate will receive a comprehensive PREA training, utilizing Attachment 2b, Preventing Sexual Abuse & Sexual Assault - Trainer Outline (Comprehensive) and the video PREA: What You Need to Know. Inmates received from another DOC facility must be provided a copy of the Zero Tolerance for Sexual Abuse and Sexual Harassment attachment that includes the Sexual Assault Hotline Number. If the signed Preventing Sexual Abuse and Assault Training Acknowledgement is not available in VACORIS, the inmate must be provided the comprehensive PREA training as described for an inmate newly received into the DOC. The signed Acknowledgement must be uploaded as an external document in VACORIS and identified as a Special Entry Note on the date the training was completed. Once uploaded, the paper form does not need to be retained."

The GROC identified 748 inmates whose length of stay in the facility was over 30 days or more in the last twelve months. Of those 748 inmates, the facility reports that all have received comprehensive PREA education regarding sexual abuse or harassment.

The Auditor interviewed an Intake Officer who stated that PREA information is posted in all of the housing units which provides the definitions of sexual abuse and sexual harassment. She also stated that the inmates must watch the PREA video in its entirety which is shown in the visitation room. Finally, she stated that all inmates arriving at GROC will have to watch the video the day of getting to the facility. When



asked how long from the date of arrival inmates made aware of these rights, the counselor stated by that afternoon of arriving to the facility.

The Auditor also interviewed 30 inmates. Those inmates were asked if they were told about their right to not be sexually abused, how to report a sexual abuse, the right not to be punished for reporting a sexual abuse, and how long before they were made aware of these policies. All 30 inmates confirmed receiving the PREA information within twenty-four hours or immediately after arriving at the facility.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all inmates receive a comprehensive education regarding their right to be free from sexual abuse, sexual harassment, and all forms of retaliation. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.33 Provision (c)

VADOC PREA Operating Procedure 038.3 states in part that; "Inmates received from another DOC facility must be provided a copy of the Zero Tolerance for Sexual Abuse and Sexual Harassment attachment that includes the Sexual Assault Hotline Number. If the signed Preventing Sexual Abuse and Assault Training Acknowledgement is not available in VACORIS, the inmate must be provided the comprehensive PREA training as described for an inmate newly received into the DOC. The signed Acknowledgement must be uploaded as an external document in VACORIS and identified as a Special Entry Note on the date the training was completed. Once uploaded, the paper form does not need to be retained."

When the Intake Officer was asked how they ensure that current inmates, along with those transferred from another facility, have been educated on agency's zero-tolerance policy and sexual abuse; She explained that part of her responsibility as a facility counselor is to provide all arriving inmates with the zero-tolerance policy and how to report sexual abuse. In addition, they have to watch a PREA video. She stated that all inmates sign a PREA Orientation form acknowledging that the information was provided and that they understand what was presented to them. Several examples of these signed forms were provided to the Auditor in the PAQ.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all inmates who have not received PREA education shall be educated within 1 year of the effective date. Also, that inmates receive PREA education upon transfer to another facility. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.33 Provision (d):

The GROC provided examples of different inmate PREA educational materials in formats that would be accessible to all inmates in accordance with Title VII of the Americans with Disabilities Act, 42 U.S.C. These formats include, but are not limited to: Interpreters for the deaf, reading material to the visually impaired, video in both English and Spanish with subtitles, and providing Interpreters services for non-English

speaking inmates.

VADOC PREA Operating Procedure 038.3 states in part that; “Facilities must make arrangements for inmates that speak languages other than English or Spanish, and with inmates who are deaf, visually impaired, or otherwise disabled, as well as to inmates with limited reading skills, to receive training and materials in a language understood by the inmate. The inmate must document receiving the Preventing Sexual Abuse and Sexual Assault Trainings (Comprehensive) by signing the Preventing Sexual Abuse and Assault Training Acknowledgement.”

The GROC utilizes the VADOC contracted “Homeland Language Services” in which services are expanded to include in-person, video, and voice translation and/or interpretation. In addition, there are subtitles that are shown during the PREA educational video to ensure all inmates receive the information. The video is also audio for those who are visually impaired or those who may have limited reading skills. The GROC also provided documentation of versions of their inmate acknowledgement form and PREA informational posters in Spanish.

The evidence collected for this provision shows that the agency has procedures in place to ensure that the facility provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, and limited reading skills. Therefore, through written policy and personal observations, the facility has demonstrated that it meets this provision.

#### 115.33 Provision (e)

The facility utilizes an acknowledgement form that is signed by the inmate and placed in the inmate’s classification file. This information was verified by the Auditor while reviewing inmate files during the document review phase of this audit. In addition, the facility provided twenty-six signed PREA orientation acknowledgement forms in the PAQ.

The evidence collected for this provision shows that the agency has procedures in place to ensure that the agency maintains documentation of inmate participation in PREA education sessions. Therefore, through written policy and personal observations, the facility has demonstrated that it meets this provision.

#### 115.33 Provision (f)

VADOC PREA Operating Procedure 038.3 states in part that; “In addition to providing such training and education, each facility will ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.” The facility also provided VADOC Operating Procedure 810.2, which states that; “Each institution will ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.”

The GROC has posters strategically posted and painted throughout the facility, in every housing unit, and departments i.e. (kitchen, educational and vocational

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|  | <p>classrooms) to ensure compliance with PREA standards. The Auditor personally observed these posters during the facility site review. All inmates are also issued a GROC Inmate Handbook which has all PREA related information documented inside.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that information will be continuously and readily available or visible to inmates. Therefore, through written policy and personal observations, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring PREA inmate education.</p> |
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| <b>115.34</b> | <b>Specialized training: Investigations</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 030.4 Special Investigative Unit</li> <li>b) VADOC Operating Procedure 350.2 Training and Development</li> <li>c) VADOC 2019 Basic Training for Investigational Investigators</li> <li>d) Certificate of Completion by the National Institute of Corrections “Investigating Sexual Abuse in Confinement Setting”</li> <li>e) VADOC SIU Specialized Training Certificates</li> <li>f) PREA Investigations Matrix</li> </ul> <p>Interview:</p> <ul style="list-style-type: none"> <li>1. Interview with Investigative staff</li> </ul> <p>115.34 Provision (a)</p> <p>VADOC Operating Procedure 030.4 states in part that; “SIU investigators will receive special training in sexual abuse investigations before conducting PREA investigations. In addition to the general PREA training provided to all employees, investigators shall receive specialized training in conducting sexual abuse investigations in confinement</p> |

settings.” Specialized training shall include:

- a. Techniques for interviewing sexual abuse victims.
- b. Proper use of Miranda and Garrity warnings
- c. Sexual abuse evidence collection in confinement settings
- d. Criteria and evidence required to substantiate a case for administrative action or prosecution referral.

In addition, VADOC Operating Procedure 350.2 states in part that; “Sexual abuse and sexual harassment investigations shall only be conducted by investigators who have received special training in sexual abuse investigations. In addition to the general PREA training provided to all employees, facility investigators shall receive specialized training in conducting sexual abuse investigations in confinement settings.”

Specialized training shall include:

- a. Techniques for interviewing sexual abuse victims
- b. Proper use of Miranda and Garrity warnings
- c. Sexual abuse evidence collection in confinement settings
- d. Criteria and evidence required to substantiate a case for administrative action or prosecution referral.

All sexual abuse and sexual harassment investigators who conduct non-criminal investigations at the GROC have received specialized training. This specialized training was through the National Institute of Corrections (NIC). In addition, all SIU VADOC Special Agents receive the training to conduct both administrative and criminal investigations. The facility provided certificates of completion for the course titled, “Specialized Training: Investigating Sexual Abuse in Correctional Settings Course.” The GROC identified 2 facility investigators and 25 Special Agents. They provided specialized training certificates of completion for all facility and SIU investigators.

When interviewing the Investigative staff, the special agent stated that he had received the PREA investigative training and has also attended additional Investigator classes at the Virginia State Police Academy. The special agent stated that the PREA classes dealt with the proper use of Garrity and Miranda in criminal cases, evidence collection, and interview techniques. The Auditor also interviewed the facility investigator. He explained that he received the training through the on-line course provided by the National Institute of Corrections (NIC).

The evidence collected for this provision shows that the agency has procedures in place to ensure that agency investigators receive specialized training in the art of investigating sexual abuse in a confinement setting. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

115.34 Provision (b)

VADOC Operating Procedure 030.4 states in part that; "SIU investigators will receive special training in sexual abuse investigations before conducting PREA investigations. In addition to the general PREA training provided to all employees, investigators shall receive specialized training in conducting sexual abuse investigations in confinement settings." Specialized training shall include:

- a. Techniques for interviewing sexual abuse victims.
- b. Proper use of Miranda and Garrity warnings
- c. Sexual abuse evidence collection in confinement settings
- d. Criteria and evidence required to substantiate a case for administrative action or prosecution referral.

In addition, VADOC Operating Procedure 350.2 states in part that; "Sexual abuse and sexual harassment investigations shall only be conducted by investigators who have received special training in sexual abuse investigations. In addition to the general PREA training provided to all employees, facility investigators shall receive specialized training in conducting sexual abuse investigations in confinement settings."

Specialized training shall include:

- e. Techniques for interviewing sexual abuse victims
- f. Proper use of Miranda and Garrity warnings
- g. Sexual abuse evidence collection in confinement settings
- h. Criteria and evidence required to substantiate a case for administrative action or prosecution referral.

All sexual abuse and sexual harassment investigators who conduct non-criminal investigations at the GROC have received specialized training. This specialized training was through the NIC. In addition, all SIU VADOC Special Agents receive the training to conduct both administrative and criminal investigations. The facility provided certificates of completion for the course titled, "Specialized Training: Investigating Sexual Abuse in Correctional Settings Course." The GROC identified 2 facility investigators and 25 Special Agents. They provided specialized training certificates of completion for both the facility and SIU investigators.

When interviewing the Investigative staff, the special agent and facility investigator confirmed receiving training in the art of interviewing sexual abuse victims, proper use of Miranda and Garrity, sexual abuse evidence collection in a confinement setting, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

The evidence collected for this provision shows that the agency has procedures in place to ensure that agency investigators receive specialized training in the art of investigating sexual abuse in a confinement setting. Therefore, through written

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|  | <p>policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>115.34 Provision (c)</p> <p>VADOC Operating Procedure 030.4 states in part that; “The PREA Compliance Manager shall maintain documentation that the required specialized training in conducting sexual abuse investigations has been completed by the investigators. In addition, the PREA Regional Analyst also maintains documentation that the agency special agents have completed the required specialized training in conducting sexual abuse and sexual harassment investigations.”</p> <p>The GROC has provided copies of specialized training records for all staff trained in investigating sexual abuse in a confinement setting to include all twenty-five SIU Agents in the VADOC. This documentation is in the form of certificates of completion by the National Institute of Corrections.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that all staff responsible for investigating sexual abuse have received additional specialized training and maintains the documentation necessary to prove that training. Therefore, through written policy and personal observation by documents provided, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring specialized training for investigators who perform sexual abuse and sexual harassment investigations.</p> |
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| <b>115.35</b> | <b>Specialized training: Medical and mental health care</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) National Institute of Corrections (NIC) Medical Health Care for Sexual Assault Victims in a Confinement Setting training modular</li> <li>b) VADOC Operating Procedure 038.3 PREA</li> <li>c) VADOC Operating Procedure 102.6 Staff Orientation</li> <li>d) VADOC Operating Procedure 701.1 Health Services Administration</li> </ul> |

e) GROC Specialized PREA Training Medical / Mental Health NIC Certificate of Completion.

Interview:

1. Interview with Medical & Mental Health Staff

Observations made during the on-site audit and document review.

115.35 Provision (a)

VADOC Operating Procedure 701.1 states in part that; “The Health Authority and/or Institutional Training Officer shall document that all full and part-time medical and mental health staff who work regularly in DOC facilities receives specialized training in:

- a. How to detect and assess signs of sexual abuse and sexual harassment
- b. How to preserve physical evidence of sexual abuse
- c. How to respond effectively and professionally to victims of sexual abuse and sexual harassment
- d. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.”

The facility reported that there are 41 medical health staff and mental health professionals employed by the GROC who work regularly with inmates and have received the specialized training as required by the agency’s policy. This Auditor conducted an interview with the mental health staff member that is responsible for providing services at the GROC. This interview was conducted on-site. During the pre-audit phase, the Auditor was provided with copies of certificates of completion showing that medical staff and mental health staff had completed the online NIC specialized courses.

When interviewing the Medical and Mental Health Staff, they informed the Auditor that they had previously received initial training when they first started work and receive annual PREA refresher training. They also received additional training on the above-listed topics by going online and taking PREA online classes through the National Institute of Corrections.

The evidence collected for this provision shows that the agency has procedures in place to ensure that medical and mental health personnel receive additional training as outlined in this standard. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

115.35 Provision (b)

VADOC PREA Operating Procedure 038.3 states in part that; “If there is indication of a recent sexual assault: ensure the victim is transported to the local hospital for further treatment, examination, documentation, collection of forensic evidence (PERK), and

testing for sexually transmitted diseases.” The Centra Gretna Medical Center performs forensic medical exams for this facility. Medical staff at this facility do not conduct forensic medical examinations. This practice was confirmed during the interview conducted with the Facility Health Service Administrator and mental health staff who stated that they do not perform forensic medical examinations. Therefore, this standard is not applicable to the GROC.

The evidence collected for this provision shows that the agency does not perform forensic medical examinations. Therefore, this provision is not applicable to the GROC facility.

#### 115.35 Provision (c)

The GROC relies on the PREA Compliance Manager to maintain the documentation on their personnel that confirms Medical and Mental Health Practitioners have received the training referenced in this standard.

The GROC has provided copies of specialized training records for medical and mental health staff. This documentation is in the form of training rosters and certificates of completion.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all medical and mental health staff have received additional specialized training. Therefore, through written policy and documents provided, the facility has demonstrated that it meets this provision.

#### 115.35 Provision (d)

VADOC Operating Procedure 102.6 states in part that; “Medical and mental health care providers must also receive the training mandated for employees or for contractors, interns, and volunteers depending upon the provider’s status in the DOC.” In addition, the facility provided VADOC 350.2, which states that; “Medical and mental health care practitioners shall also receive the training mandated for employees or for contractors and volunteers depending upon the practitioner’s status in the DOC.”

During the pre-audit phase the agency provided copies of training logs indicating that medical staff receive the same in-service annual PREA training that security staff receives. In addition, while interviewing medical and mental health staff the Auditor was told that they receive PREA training on an annual basis.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all medical staff receive(s) the same PREA training that volunteers, contractors, and security staff receive. In addition, they receive this training on an annual basis. Therefore, through written policy and documents provided, the facility has demonstrated that it meets this provision.

#### Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring



specialized training for Medical and Mental health care.

**115.41 Screening for risk of victimization and abusiveness**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) VADOC 810.2 Transferred Inmate Receiving Orientation
- b) VADOC 810.1 Inmate Reception & Classification
- c) VADOC 730.2 Mental Health Services
- d) VADOC 861.1 Inmate Discipline
- e) Classification Assessment Scoring
- f) Classification Assessment Details
- g) GROC PREA Intake Packets
- h) PREA Reassessment Forms
- i) Perception Memorandum dated 04/30/2015

Interviews:

- 1. Interview with Staff performing Risk Screening.
- 2. Interview with Random Inmates
- 3. Interview with PREA Coordinator
- 4. Interview with PREA Compliance Manager

Observations made during the on-site audit and document review.

115.41 Provision (a)

VADOC Operating Procedure 810.1 states in part that; "Staff using the results of the Classification Assessment in VACORIS, and available inmate records will screen the inmate for potential vulnerabilities or tendencies for acting out with sexually aggressive or other violent behavior and will interview and evaluate the inmate for High-Risk Sexual Aggressor (HRSA) or High-Risk Sexual Victim (HRSV) tendencies."

VADOC Operating Procedure 810.2 states in part that; “A counselor or other non-clerical facility staff will assess each inmate, upon transfer from one DOC facility to another for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.” In addition, the policy indicates that; “Utilizing the results of the Classification Assessment in VACORIS and available inmate records, staff will screen the inmate for potential vulnerabilities or tendencies for acting out with sexually aggressive or other violent behavior and will interview and evaluate the inmate for High-Risk Sexual Aggressor (HRSA) and/or High-Risk Sexual Victim (HRSV) tendencies.”

During the interview with the facility counselor, the Auditor went through the risk screening process. The Auditor asked if the counselor screened inmates for risk of sexual victimization upon arrival or transfer from another facility. The counselor stated that, “Yes, she does.” Also, during the interviews with 30 inmates; 14 inmates recalled having been asked those specific questions listed below, 12 inmates stated they did not get asked, and 4 inmates did not recall. The Auditor reviewed the risk assessment questionnaire called the Classification Assessment History and identified that the screening form contained the following:

- Have they been in jail before?
- Have they ever been sexually abused?
- Did they identify with being LGBT?
- Did they think they might be in danger of sexual abuse while incarcerated when they first came to prison?

The evidence collected for this provision shows that the agency has procedures in place to ensure all inmates receive a risk screening evaluation for the risk of being sexually abused while incarcerated. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 Provision (b)

VADOC Operating Procedure 810.1 states in part that; “The Classification Assessment will include a review of the following factors: history of assaultive behavior, potential for victimization, history of prior victimization, special medical or mental health status, escape history, age, enemies or inmate separation information, and any other related information and must be approved within 72 hours of the inmate’s arrival at the institution.” In addition, the facility provided Operating Procedure 810.2, which states in part that; “A Classification Assessment must be completed and approved within 72 hours of arrival at the institution.”

The facility reported that they received 822 inmates into their facility in the last twelve months that had a length of stay more than 72 hours. The facility reports that 100% of the inmates received a risk screening assessment for risk of being sexually abused during incarceration.

The facility provided samples of completed risk screening forms (classification assessments) during the pre-audit phase and downloaded those documents into the Pre-audit Questionnaire. In addition, during the document review, the Auditor observed completed PREA Risk Screening Checklist Instrument forms in the inmate record files.

When conducting the interview with staff responsible for performing risk-screening assessments, the facility counselor stated that she usually conducts the risk screening process within 24 hours of the inmate being transferred to the facility. As stated in the previous provision, the Auditor interviewed 30 inmates, for which 14 inmates indicated that they had been questioned about sexual victimization within 72 hours of arriving at the facility. When conducting the Inmate file review, the Auditor sampled 30 inmate files which indicated that all 30 inmates had a risk screening performed within the first 72 hours of arriving at the facility.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all inmates are screened for the risk of sexual abuse within 72 hours of arrival at the facility. Therefore, through written policy, personal observations, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 Provision (c)

The risk screening assessment consists of 28 overall yes or no questions with 13 specifically addressing sexual victimization or aggression. In addition, the facility provided classification assessment instructions that describes if certain questions are answered 'yes' to, then that person could be either classified as a potential victim or aggressor. In addition, the instructions indicate that if an inmate answers 'yes' to four or more sexual victimization questions then that inmate will be deemed a potential heightened risk of being sexually victimized (HRSV). If the inmate answers 'yes' to four or more sexual aggression questions, then that inmate will be deemed a potential heightened risk of being sexually aggressive (HRSA). Therefore, there is no subjectivity to this assessment.

When interviewing the facility counselor, she was asked what the initial risk screening considers and what is the process for conducting the risk screening? The facility counselor indicated that the risk screening considers charges, sexual victimization, LGBTQ, first incarceration, mental health, and an array of other topics. The facility counselor also stated that the process takes place at a computer in the counselor's office by asking and then calculating yes or no answers. She also stated that certain questions allow the counselor to insert comments.

Through observations, interviews, and policy the facility has demonstrated that it uses an objective risk assessment tool to identify potential inmates at risk of being sexually victimized or sexually aggressive. Therefore, the facility meets this provision.

#### 115.41 Provision (d)

VADOC Agency Classification Assessment Form (Risk Screening Tool) takes into

consideration at the minimum the following:

- Whether the inmate has a mental, physical, or developmental disability
- Age of inmate
- Physical build of inmate
- If the inmate has previously been incarcerated
- If the inmate's criminal history is exclusively nonviolent
- If the inmate has prior convictions for sex offenses
- If the inmate is or perceived to be LGBTQ or gender nonconforming
- If the inmate has previously experienced sexual victimization
- The inmate's own perception of vulnerability
- If the inmate is detained solely for civil immigration purposes

The staff member responsible for performing risk-screening assessments (facility counselor) was asked what the risk screening considered and what is the process for conducting these assessments. The counselor stated the assessment asks questions such as; has the inmate been sexually abused in the past, sexual relationships in confinement, gender identity, prior convicts of sexual assault, and the age and stature of the inmate. Finally, the counselor stated that the screening is conducted face to face and software in VACORIS assists in identifying potential inmate victims or aggressors. She also stated that mental health makes the determination related to if the inmate suffers from mental or developmental disability issues.

The evidence collected for this provision shows that the agency has procedures in place to ensure that the intake screening shall consider, at a minimum, the 10 criteria identified in this standard provision. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 Provision (e)

The risk screening form (Classification Assessment) utilized by the GROC staff does consider prior acts of sexual abuse, prior convictions for violent offenses, and a history of prior institutional sexual abuse. The staff member responsible for performing risk-screening assessments was asked what the risk screening considered and what is the process for conducting these assessments. The counselor stated the assessment asks questions such as has the inmate had prior acts of sexual abuse in the past, prior convicts of sexual assault, and known to the agency as a prior HRSA.

The evidence collected for this provision shows that the agency has procedures in place to capture and ask the questions listed above surrounding potential aggressor behavior. Therefore, through document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 Provision (f)

VADOC Operating Procedure 810.1 states in part that; "Within 21 days from the inmate's arrival at the institution, staff will meet with the inmate and will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the institution since the intake screening. The PREA Reassessment must be completed no sooner than 14 days and no later than 21 days after the inmate's arrival at the institution. Completion of the Reassessment must be documented as a PREA Reassessment in the Facility Notes section of VACORIS. The PREA Reassessment must be scanned and uploaded as an external document to the corresponding PREA Reassessment note on the same day it is conducted."

During the pre-audit, the facility reported 748 inmates that entered the facility over the last twelve months and stayed more than 30 days. Out of those inmates, the agency reported all 748 inmates were reassessed 21 days after their arrival at the facility for risk of sexual victimization based upon any additional relevant information received since intake over the last twelve months.

The staff member responsible for performing risk-screening assessments was asked how long after arrival are inmates risk levels reassessed. The facility counselor stated between 14 and 21 days from additional arrival to the facility. When interviewing 30 inmates, they were asked if staff had ever asked PREA related questions again during their incarceration. 14 inmates stated that they had, 12 inmates stated that they had not, and 4 inmates could not recall. The facility performs the subsequent risk screening during the initial interview process and orientation after transfer to the facility. The facility has provided a reassessment screening form which includes questions concerning sexual safety and victimization.

The evidence collected for this provision shows that the agency has procedures in place to conduct 21-day risk screening reassessments based upon additional or relevant information received by the facility. They also have a tool to attempt to extract additional sexual safety information. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 Provision (g)

VADOC Operating Procedure 730.2 states in part that; "An inmate's risk level must be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness."

When interviewing the staff responsible for conducting risk screening the counselor stated that they do reassess when warranted due to additional information received about the inmate's sexual safety.

The Auditor interviewed 3 inmates that reported sexual abuse and reviewed the investigative file and the inmate records. All three inmates received a reassessment upon making the allegation of sexual abuse.

The evidence collected for this provision shows that the agency has procedures in place to reassess an inmate's risk of sexual victimization due to a referral, request, or additional information. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 Provision (h)

VADOC Operating Procedure 810.1 states in part that; "Inmates may not be disciplined for refusing to answer or for not disclosing complete information in response to questions asked in the Classification Assessment interview." In addition, the facility offered Operating Procedure 810.2, which states in part that; "Inmates will not be disciplined for refusing to answer or for not disclosing complete information in response to questions asked in the Classification Assessment interview."

When interviewing the staff responsible for conducting risk screening the counselor stated that the agency does not punish inmates if they chose not to answer the questions associated with the risk screening assessment.

The evidence collected for this provision shows that the agency has procedures in place to prevent inmates from being disciplined for refusing to answer or for not disclosing complete information in response to risk screening. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 (i)

VADOC Operating Procedure 810.1 states in part that; "In order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates, responses to Classification Assessment questions regarding an inmate's risk of sexual victimization and abusiveness will only be disseminated in accordance with this operating procedure."

When interviewing the PREA Coordinator, she was asked who has access to the inmates' risk screening information. The coordinator explained that the information is stored in the agency CORIS (jail management) system which has restricted access and is only authorized on a need-to-know basis. The PREA Compliance Manager echoed those same remarks and reiterated that permissions are limited to those who have a need to know. The staff member responsible for conducting risk screening (facility counselor) explained that only certain positions have access depending on their job description and permissions granted by the VACORIS system such as: counselors, watch commander, and mental health staff.

The evidence collected for this provision shows that the agency has procedures in place to control access to the risk screening information collected by the facility and that the information is not exploited. Therefore, through document review and interviews conducted, the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor

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|  | has determined that the facility is fully compliant with this standard requiring screening for risk of victimization and abusiveness. |
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| <b>115.42 Use of screening information</b> |  |
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|  | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 425.4 Management of Bed &amp; Cell Assignments</li> <li>c) VADOC Operating Procedure 730.2 Mental Health Services</li> <li>d) VADOC Operating Procedure 830.5 Transfers, Institutional Re-assignments</li> <li>e) VADOC Operating Procedure 810.1 Inmate Reception and Classification</li> <li>f) VADOC Operating Procedure 810.2 Transferred Inmate/Receiving and Orientation</li> <li>g) GROC HRSV-HRSA monthly Alert Reports</li> <li>h) Memorandum dated 04/28/2023 by the PREA Coordinator regarding Housing assignments for transgender and intersex inmates.</li> <li>i) Memorandum dated 01/08/2024 written by the GROC Warden regarding designating a specific Counselor responsible for approving inmate work assignments, programs, and education for inmates at Green Rock Correctional Center.</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Staff performing Risk Screening</li> <li>2. Interview with PREA Compliance Manager</li> <li>3. Interview with Transgender inmates</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.42 Provision (a)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “Utilizing the results of the Classification Assessment in VACORIS and available inmate records, all inmates</p> |

are screened for potential vulnerabilities or tendencies for acting out with sexually aggressive or other violent behavior at intake, transfer, and as needed. Staff will use information from the Classification Assessment in determining appropriate housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at considerable risk of being sexually victimized from those at high risk of being sexually abusive.” In addition, the facility provided Operating Procedure 810.1 which states in part that; “Information from the inmate’s Classification Assessment will be used by institutional staff in determining appropriate housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at elevated risk of being sexually victimized from those at high risk of being sexually abusive.”

The PREA Compliance Manager stated during the interview that risk screening is part of the classification process and that they try to make sure possible victims are kept separate from possible abusers. He further stated that because in this facility most inmates have a cellmate that some inmates deemed vulnerable would never be placed in the same cell as those deemed aggressors. He further indicated that they are about to separate A and B units from C and D units. The staff member responsible for conducting risk screening stated during her interview that the assessment is used to gather information to determine housing, education, work assignments, and programs.

The evidence collected for this provision shows that the agency uses the information gathered during the risk screening process to influence the decision on where an inmate may be housed, attend programs, and where an inmate works. Keeping separate those inmates at elevated risk of being sexually victimized. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.42 Provision (b)

VADOC PREA Operating Procedure 038.3 states in part that; “Staff will make individualized determinations about how to ensure the safety of each inmate.” In addition, the facility offered VADOC Operating Procedure 425.4, which states in part that; “Staff will make individualized determinations about how to ensure the safety of each inmate.”

During the interview process, the Auditor asked the staff member responsible for risk screening how the agency uses the information from the risk screening to keep inmates safe. The counselor stated that the information gathered during the screening is to identify who may be a potential inmate victim and who may be a possible inmate aggressor and house those inmates accordingly.

The evidence collected for this provision shows that the agency makes individualized determinations about how to ensure the safety of each inmate. Therefore, through document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.42 Provision (c)



VADOC PREA Coordinator authored a memorandum dated 04/28/2023 that states in part, "Since being transgender is a known risk factor for being sexually victimized in confinement settings, the Federal PREA Standard §115.42, requires that facility, housing, and programming assignments be made 'on a case-by-case basis to determine whether a placement in a male or female facility would ensure the inmate's health and safety and whether the placement would present management or security problems. The Virginia Department of Corrections gives serious consideration to transgender or intersex inmates' own views with respect to safety and allows for housing by gender identity when appropriate. We utilize a Classification Assessment, which is an individualized, objective risk assessment used to screen all inmates for potential vulnerabilities or tendencies to act out with sexually aggressive or other violent behavior. When determining the housing assignment for a transgender or intersex inmate, consideration is given to the inmate's security threat level, criminal and disciplinary history, current gender expression, medical and mental health information, vulnerability to sexual victimization, and likelihood of perpetrating abuse. Appropriate housing decisions include consultation by facility administration, classification and security staff, and medical and mental health professionals. Transgender and intersex inmate's housing and programming assignments are reassessed, at least twice each year, to ensure the assignments remain appropriate and no threats to the inmates has occurred."

The PREA Compliance Manager was interviewed and asked how the agency determines housing and programs for transgender or intersex inmates. The PREA Compliance Manager stated that the facility uses a multi-disciplinary team made up of medical/mental health staff, Assistant Warden, Major, and Unit Manager to conduct housing assignments and programs for transgender inmates. He also stated that the facility considers management or security problems. The PREA Compliance Manager also indicated that the inmate's request would be taken into consideration and that the inmate would have full access to all programs.

The facility reported six transgender inmates being housed at the GROC at the time of the on-site audit phase. The Auditor was able to conduct interviews with four transgenders and two inmates indicated that they were asked about their own concerns about their safety. Two inmates stated that their concerns were not considered. All four transgender inmates utilized the cross-gender search deviation forms when asked how they wanted to be searched.

The evidence collected for this provision shows that the facility does consider housing assignments involving transgender and intersex individual on a case-by-case basis. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.42 Provision (d)

VADOC PREA Operating Procedure 038.3 states in part that; "Facility housing and programming assignments for each transgender and intersex inmate must be reassessed at least twice each year to review any threats to safety experienced by the inmate." The VADOC PREA Coordinator's memo dated April 28, 2023, states in

part that, "Transgender and intersex inmate's housing and programming assignments are reassessed, at least twice each year, to ensure the assignments remain appropriate and no threats to the inmates has occurred."

When interviewing the staff member responsible for conducting risk screening assessments she explained that all inmates that identify as transgender or intersex have a re-assessment twice a year to make sure there is not a threat to their safety. The PREA Compliance Manager also stated that he was aware of the need to re-assess an inmate that identifies as transgender twice a year. The Auditor reviewed the inmate case files for four transgender inmates. Inside each file was documentation that a six-month re-assessment was conducted on the transgender inmates.

The evidence collected for this provision shows that the agency has procedures in place to address reassessing a transgender or intersex inmates programming assignment at least twice a year to review any threats or safety concerns. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.42 Provision (e)

VADOC PREA Operating Procedure 038.3, states in part that; "A transgender or intersex inmate's own views with respect to their own safety will be given serious consideration." In addition, the facility offered VADOC Operating Procedure 425.4, which states in part that; "A transgender or intersex inmate's views with respect to their own safety will be given earnest consideration."

When the PREA Compliance Manager was asked if the facility considers a transgender's own views with respect to their safety, he stated that, "Yes, they do consider the inmates own views when deciding appropriate housing." When the staff member responsible for conducting the risk-assessment was asked the same question, she also responded by stating that they do consider the transgender inmates own views when determining housing assignments.

The facility reported six transgender inmates being housed at the GROC at the time of the on-site audit phase. The Auditor was able to conduct interviews with four transgender inmates. Two inmates indicated that they were asked about their own concerns about their safety and two inmates stated that their concerns were not considered. All four transgender inmates utilized the cross-gender search deviation forms when asked how they wanted to be searched. Therefore, the evidence would suggest that all four transgender inmates were asked about their concerns while being incarcerated.

The evidence collected for this provision shows that the agency has procedures in place to consider a transgender or intersex inmate's own view with respect to his or her own safety shall be given serious consideration. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.42 Provision (f)

VADOC PREA Operating Procedure 038.3, states in part that; “Transgender and intersex inmates must be given the opportunity to shower separately from other inmates.”

The PREA Compliance Manager and the staff member responsible for conducting risk assessments were interviewed and asked if transgender and intersex inmates are afforded the opportunity to shower separately from other inmates, the counselor stated that, “Yes, they are allowed to shower separately.” The Compliance Manager stated, “Yes, during count and lockdown.” The Auditor interviewed four transgender inmates and they all indicated that they are allowed to shower separately, specifically stating they could shower during “lockdown/headcount.” One transgender inmate indicated that she does not take advantage of this accommodation and would rather shower at her own convenience.

The evidence collected for this provision shows that the agency has procedures in place to allow transgender and intersex inmates to shower separately from other inmates. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.42 Provision (g)

VADOC PREA Operating Procedure 038.3 states in part that; “Lesbian, gay, bisexual, transgender, or intersex inmates will not be placed in a dedicated facility, housing unit, or wing solely on the basis of such identification or status.” Also, the facility provided VADOC policy 425.4, which states in part that; “Lesbian, gay, bisexual, or intersex inmates will not be placed in a resolute housing unit or wing solely on the basis of such identification or status.”

During the interview process, the PREA Compliance Manager and Coordinator confirmed that the agency was not under any consent decree, legal settlement, or legal judgment requiring the facility to separate the LGBTQ community from everyone else. The PREA Coordinator stated during her interview that it is against policy and standards to segregate those inmates identified as LGBTQ solely on their sexuality. Finally, the Auditor interviewed four transgender inmates that confirmed they were not being housed in a unit solely based on their sexual orientation or status.

The evidence collected for this provision shows that the agency has procedures in place to address not placing LGBTQ inmates in designated housing blocks based solely on their sexual orientation. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the use of screening information.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) VADOC Operating Procedure 425.4 Management of Bed & Cell Assignments
- b) VADOC Operating Procedure 810.1 Inmate Reception & Classification
- c) VADOC Operating Procedure 810.2 Transferred Inmate Receiving & Orientation
- d) VADOC Operating Procedure 830.5 Transfers, Institution Re-assignments
- e) Alternative Assessment Form
- f) GROC Warden memorandum regarding no incidents of High-Risk Sexual Victims (HRSV) requiring involuntary placement in Restricted Housing

Interviews:

- 1. Interview with Assistant Warden
- 2. Interview with Staff who supervise inmates in segregated housing

Observations made during the on-site audit and document review.

115.43 Provision (a)

VADOC Operating Procedure 425.4 states in part that; "Inmates identified as HRSV or inmates alleged to have suffered sexual abuse or sexual harassment will not be placed in the restorative housing unit without their consent unless an assessment of all available alternatives has been made, and it has been determined by the Psychology Associate in consultation with the Shift Commander and Regional PREA Analyst that there are no available alternative means of separation from likely abusers." Additionally, VADOC Operating Procedure 810.1 states in part that; "Inmates identified as HRSV will not be placed in the Restorative Housing Unit without their consent unless an assessment of all available alternatives has been made, and it has been determined by the Psychology Associate, in consultation with the Shift Commander and Regional PREA Analyst, that there is no available alternative means of separation from likely abusers."

The Assistant Warden stated during her interview that the agency does have a policy prohibiting placing inmates at high risk of sexual victimization in involuntary segregated housing in lieu of other housing areas. She also stated and provided a memorandum confirming that the facility has not experienced a situation where an inmate at high risk of sexual victimization was housed in involuntary segregation over the last twelve months.

The evidence collected for this provision shows that the agency has procedures in place to address not using segregated housing for those inmates at high risk of victimization unless no alternative means of separation is available. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

115.43 Provision (b)

VADOC Operating Procedure 830.5 states in part that; “The ICA or MDT should clearly document on the Institutional Classification Authority Hearing report the basis for the institution’s concern for the inmate’s safety and the reason why no alternative means of separation can be arranged.” Also, in procedure 830.5 it states in part that, “Protective Custody Units should provide programs and services like those available to general population inmates, to the extent feasible. The Facility Unit Head at institutions operating Protective Custody Units should develop local operating procedures to specify the services and programs that will be available to protective custody inmates.” Procedures should generally address the following programs and services:

- a) Commissary purchases
- b) Correspondence
- c) Counseling
- d) Education
- e) Exercise / Recreation
- f) Legal Services / Law Library
- g) Medical Services
- h) Orientation
- i) Personal Property
- j) Telephone Calls
- k) Visitation
- l) Work Assignments

The facility reported no instances where an inmate was placed in segregation based on the high probability of sexual victimization. During the facility tour, the Auditor visited the Restorative Housing Unit. There was no evidence that suggested any inmate being housed in the RHU was there due to their risk for sexual victimization. The Auditor also reviewed the housing assignments to verify that no inmate was being housed involuntarily due to the risk of being sexually victimized.

During the interview with a staff member that supervises inmates in the RHU, he was

asked if inmates that are housed in segregation due to their risk of sexual abuse would have the same privileges and access to all other programs as any other inmate. The officer indicated that they would except for a work detail. The Auditor did not interview an inmate housed in a segregated housing unit due to possible victimization because the facility reported no instances of such a situation and the Auditor found no evidence of this circumstance.

The evidence collected for this provision shows that the agency has procedures in place to ensure that if an inmate is placed in segregation due to the high risk of being sexually victimized that the inmate would retain all the privileges and opportunities that all other inmates are afforded. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.43 Provision (c)

VADOC Operating Procedure 425.4 states in part that; "Inmates will remain in the restrictive housing unit only until an alternative means of separation from likely abuse can be arranged; this assignment will not ordinarily exceed 30 days." Furthermore, the facility provided VADOC Operating Procedure 830.5, which states in part that; "Involuntary assignment to a restrictive housing unit will only be made until an alternative means of separation from likely abusers can be arranged."

The facility reported no instances where an inmate was placed in segregation based on the high probability of sexual victimization.

The Assistant Warden was interviewed and stated that only if there were no alternatives would an inmate be involuntarily segregated because of the possibility of being sexually victimized. The Assistant Warden explained that at the most, an inmate would stay in segregation for no more than 30 days and then she would have the inmate transferred to another facility if necessary. The Officer assigned to the RSU stated that the facility investigator would have to investigate the situation and if an inmate was placed into Restorative Housing based on the potential of sexual victimization, then his situation would be reviewed every time the Disciplinary Team meets. He further stated that the team meets every 72 hours, 10 days, 30 days, 60 days, and 90 days.

The evidence collected for this provision shows that the agency has policies in place to ensure that if an inmate is placed in involuntary segregation, such assignment would not exceed 30 days. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.43 Provision (d)

VADOC Operating Procedure 425.4 states in part that; "The institution must clearly document the basis for the institutions concerns for the inmate's safety and the reason why no alternative means of separation can be arranged."

The GROG Assistant Warden provided a memorandum indicating that the facility did

not have an incident where an inmate at high risk of victimization was placed in segregated housing until an alternative could be found and this will not ordinarily exceed 30 days. The Assistant Warden indicated that the facility will clearly document the basis for their concern for the inmate's safety and the reason why no alternative could be found if they experienced such an event. There was no such event that occurred during this audit period.

The GROC has reported no instances of assigning any inmate to involuntary segregated housing for the purpose of separating that inmate due to the high risk for sexual victimization.

The evidence collected for this provision shows that the agency does have a written policy in place to address documenting the basis for the segregation and why no alternative means of separation could be arranged. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

115.43 Provision (e)

VADOC Operating Procedure 425.4 states in part that; "Every seven days of an inmate's first 60 days in RHU status and every 30 days thereafter, the MDT will perform a Restorative Housing Status Review in VACORIS of all the inmates assigned to the RHU to monitor the appropriateness of the inmate's status. Inmates will remain in the restrictive housing unit only until an alternative means of separation from likely abuse can be arranged; this assignment will not ordinarily exceed 30 days."

During the interview with the officer assigned to the RHU, he was asked once an inmate is assigned to involuntary segregation, does the facility review the inmate's situation every 30 days to determine if the housing assignment is still appropriate. The officer stated that, "Yes, they do."

The evidence collected for this provision shows that the agency has procedures in place to reassess and review an inmate's housing assignment every 30 days to see if there is a continued need for separation. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence the PREA Auditor has determined that the facility is fully compliant with this standard requiring limitations on protective custody.

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| <b>115.51</b> | <b>Inmate reporting</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                |
|               | <b>Auditor Discussion</b>   |
|               | The PREA Auditor gathered, analyzed, and retained the following evidence related to |

this standard:

Documents:

- a) VADOC PREA Operating Procedure 038.3
- b) VADOC Operating Procedure 801.6 Inmate Services
- c) VADOC Operating Procedure 803.3 Inmate Telephone Services
- d) VADOC Operating Procedure 866.1 Inmate Grievance Procedure
- e) PREA Poster in both English and Spanish
- f) PREA Zero Tolerance Hotline Poster in English, Spanish, and Hearing Impaired
- g) Memorandum of Understanding between the VADOC and Action Alliance

Interviews:

1. Interviews with random staff
2. Interviews with various inmates
3. Interview with PREA Compliance Manager

Observations made during the on-site audit and document review.

115.51 Provision (a)

The facility has provided multiple ways to report a sexual abuse or sexual harassment allegations in a private setting. These reporting options are listed in written policy, confirmed through interviews, and observed through posters and handouts. VADOC PREA Operating Procedure 038.3 specifically addresses four ways to report an allegation of sexual abuse or harassment. Those include making a verbal or written report to any staff member or by submitting, in writing: a Facility Request, Informal Complaint, or Grievance Form. Also, having a 3rd party make a report for the alleged victim or calling the outside reporting authority promoted by the phone system and dialing (#55). The contact information and phone number are provided in the handbook. In addition, PREA posters are displayed throughout the facility both in English and in Spanish listing the ways an individual can report an allegation of sexual abuse. The staff training curricula consists of classroom instruction and an on-line training portal that provides staff ways to report. Those ways are verbally to any supervisor, PREA Coordinator / PREA Regional Analyst, submit a written report, or contact the outside reporting agency via hotline.

During the on-site audit, the Auditor performed 12 random staff interviews and 30 inmate interviews. Of the 12 random staff that were interviewed: 1 staff member could identify all four ways to report, 6 staff members could identify three ways, and 5 staff members could identify two ways to report. Of the 30 inmates that were interviewed: 1 inmate could offer four ways to report sexual abuse, 7 inmates could



offer three ways, 16 inmates identified two ways and 6 inmates provided at least one way to report. Every inmate interviewed could name at least one way to report an allegation of sexual abuse.

During the on-site review, the Auditor observed and documented PREA posters posted in both housing units and in public areas throughout the facility. The Auditor contacted Just Detention International and confirmed that they had not received any sexual abuse allegations during this rating period. The Auditor test called the outside reporting entity while conducting the on-site facility tour. The call was made on 4/09/2024 at approximately 1016 hours. The PREA Coordinator received an email confirming receipt of the call on that day at approximately 1021 hours and forwarded the email chain to the Auditor. Finally, the Auditor had multiple conversations with inmates during the facility tour asking them if they knew how to report sexual abuse. Those inmates indicated by utilizing the phone PREA hotline, verbally to staff, and/or writing it on a request form or grievance.

When reviewing the investigative files, the Auditor documented that allegations were made via the hotline four times, verbally to staff five times, and third-party reporting twice.

The evidence collected shows that the facility has provided multiple ways to report sexual abuse or sexual harassment. The evidence also shows that many staff and inmates are aware of those reporting procedures by confirming the information is being provided. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.51 Provision (b)

The agency has provided information regarding Action Alliance Sexual Assault Hotline to provide a phone number that an inmate or staff can call, anonymously, if they choose to report allegations of sexual abuse. The phone number is listed on the PREA posters and is automatically connected when the inmate dials #55. This fact was confirmed through the on-site observation. During the facility site review, the Auditor made a call to the outside agency as a test of the procedure. The Auditor followed the instructions and was prompted to dial 1 to make a PREA complaint. The Auditor left a message for the hotline advocate to respond back to the facility confirming the receipt of the Auditor's message. The message was sent to the PREA Regional Analyst who forwarded the confirmation to the Auditor's email providing the information gathered during the phone call to the hotline within minutes of initiating the call.

VADOC PREA Operating Procedure 038.3 states in part that; "Inmates can choose to report abuse and harassment to an advocate with the Action Alliance, a non-DOC organization, who is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to the DOC while allowing the inmate to remain anonymous upon request."

- a) An advocate with Action Alliance can be contacted verbally through the inmate's telephone system Sexual Assault Hotline Number #55, Option 1.

b) Inmates can also anonymously report sexual abuse and sexual harassment in writing directly to the Action Alliance at P.O. Box 17115, Richmond, Virginia 23226.

GROC does not detain inmates solely for civil immigration purposes. However, consular notification is the responsibility of the arresting officer as is the jailors responsibility to ensure notification has been made during the intake or detention process. The Virginia Department of Corrections only house those inmates that have been convicted of a crime under the Virginia Criminal Code.

When conducting interviews with 30 inmates, 21 inmates acknowledged being aware that a sexual abuse allegation can be made anonymously, while 9 stated that they did not know they could report anonymously. When interviewing the PREA Compliance Manager, he was asked how the facility provides a way for an inmate to report a sexual abuse to a public or private entity that is not part of the agency. The PREA Compliance Manager (PCM) confirmed the use of Action Alliance as their method of providing a hotline service. The PCM also confirmed that the calls can remain anonymous, and that the information is immediately emailed to the PCM, Assistant Warden, Facility Investigator, and PREA Regional Analyst. Finally, when reviewing the eleven investigative files the Auditor documented that four of the eleven investigations were initiated by contacting the PREA hotline to make the allegation.

The evidence collected for this provision shows that the agency has provided at least one way for an inmate to report abuse or harassment to a public or private entity not affiliated with the agency. Lastly, the GROC does not allow the detention of an inmate for the sole purpose of immigration status. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.51 Provision (c)

VADOC PREA Operating Procedure 038.3 states in part that; "Staff must accept all reports made verbally, in writing, anonymously and from third parties alleging sexual assault and must promptly document verbal reports as an Internal Incident Report with PREA checked in the description field in accordance with Operating Procedure 038.1, Reporting Serious or Unusual Incidents."

During staff interviews, the officers explained that their duties were to immediately write a report recording the verbal sexual allegation. When interviewing inmates, several explained that they would notify a supervisor or security officer. The officers also stated that the report would be immediate. When further questioned about the term "immediate" the officers stated no later than by the end of their shift. The PREA Compliance Manager was interviewed and asked to define what "immediately" meant according to the protocol. The PREA Compliance Manager explained that immediately is defined as at least before the end of the officer's tour of duty for that day. In addition, all the PREA posters displayed throughout the facility state that an allegation of sexual abuse can be reported verbally. When interviewing the inmates, all 30 acknowledged being able to report verbally and or in writing. During the investigative case file review, the Auditor documented four allegations being initiated

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|  | <p>verbally to staff.</p> <p>The evidence collected for this provision shows that the agency has demonstrated that they accept, and document sexual abuse reports verbally, in writing, and from third parties. It has also been determined that these reports have been handled in a timely fashion. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>115.51 Provision (d)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “Staff can privately report the sexual abuse and sexual harassment of inmates through the established reporting hotline at 855-602-7001.” The GROC staff can also privately report sexual abuse and sexual harassment of inmates to their supervisor or any other facility supervisor. In addition, the staff are encouraged to verbally report sexual abuse or harassment to the PREA Compliance Manager. Of the 12 random staff members interviewed: the hotline was mentioned nine times, the Facility Investigator was mentioned once, and the PREA Compliance Manager was also mentioned once.</p> <p>The evidence collected for this provision shows that the agency has demonstrated that they do provide staff with a private method of reporting sexual abuse or sexual harassment of inmates. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring the agency provide multiple internal ways for inmates to privately report sexual abuse or sexual harassment.</p> |
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| <b>115.52</b> | <b>Exhaustion of administrative remedies</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 866.1 Inmate Grievance Procedure</li> <li>b) VADOC PREA Operating Procedure 038.3</li> <li>c) Virginia Department of Corrections (VADOC) Inmate Orientation Manual (Facility Handbook) .</li> </ul> |

Interviews:

1. Interview with PREA Compliance Manager
2. Interview with Agency Head

Observations made during the on-site audit and document review.

The agency has a policy that places limitations on what allegations can be handled through the grievance process. The agency's procedure is that grievances received about sexual assault and sexual harassment will be accepted and reviewed regardless of when the incident took place. The agency protocol is if a PREA allegation through a grievance is received, it must immediately be directed to the Facility Head or PREA Compliance Manager. These individuals will further the investigation into the allegation. The grievance process is immediately stopped, and an administrative investigation is immediately initiated. The GROC reported one incident of an inmate utilizing the grievance procedure to report an alleged sexual abuse or harassment report during this audit period. The grievance process was immediately stopped, and the allegation was turned over for investigation as all other allegations of sexual abuse.

115.52 Provision (a)

VADOC PREA Operating Procedure 038.3 states in part that; "Inmates are not required to report only to the immediate point-of-contact line officer; an inmate may report such incidents to any staff member using any available manner to include: Written using an Inmate Request or Informal Complaint, Regular Grievance, or Emergency Grievance." In addition, VADOC Operating Procedure 866.1 states in part that; "Staff must accept all inmate allegations of sexual abuse or sexual harassment submitted on an emergency grievance and must immediately report knowledge, suspension, or information regarding an incident of sexual abuse or sexual harassment to the Facility Head and PREA Compliance Manager. The PREA Compliance Manager must notify the PREA Regional Analyst."

115.52 Provision (b)

VADOC Operating Procedure 866.1 states in part that; "There is no time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse or sexual harassment. Otherwise-applicable time limits apply to any portion of a grievance that does not allege an incident of sexual abuse. An inmate is not required to use the informal complaint process or otherwise attempt to resolve with staff any alleged incident of sexual abuse or sexual harassment." The GROC Inmate Handbook states in part that, "An inmate is not required to use the Written Complaint process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. There is no time limit on when an Inmate may submit a grievance regarding an allegation of sexual abuse. Nothing in this section shall restrict DOC ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired."

115.52 Provision (c)

VADOC Operating Procedure 866.1 states in part that; "Staff who are the subject of a complaint alleging staff misconduct, sexual abuse or sexual harassment of an inmate, or any possible violation of the Standards of Conduct must not be the respondent to the Written Complaint but may offer information during the investigation of the complaint." The GROC Inmate Handbook states in part that; "An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint."

115.52 Provision (d)

VADOC Operating Procedure 866.1 states in part that; "When a grievance has been forwarded to the PREA Compliance Manager, the grievance response will be 'This matter has been forwarded for investigation to the PREA Compliance Manager.' Within 30 days of issuance of the Grievance Receipt, each accepted grievance must be investigated, reviewed, completed, and the Inmate Grievance Response - Level I returned to the inmate unless a continuance is authorized. A grievance may be continued for up to a maximum of 30 days beyond the 30-day time limit for response. If a grievance is continued, the Institutional Ombudsman must document the continuance in VACORIS on the Grievance Continuance Receipt. The Grievance Continuance Receipt must include a justifiable reason for the continuance and a new date of completion. Justifiable reasons for a continuance include: (a) The principal(s) or key staff involved are unavailable to provide essential information due to escape, disturbance, or emergency. (b) Awaiting results of Special Investigation Unit or information from other facilities, divisions, or agencies."

The GROC has reported one instance of receiving an emergency grievance during this audit period alleging sexual abuse. The Auditor interviewed several inmates that reported sexual abuse that were present during the time of the on-site audit phase. All inmates interviewed confirmed that they had been notified in writing about decisions made regarding their allegation.

115.52 Provision (e)

VADOC Operating Procedure 038.3 states in part that; "Third Parties including other inmates, staff members, family members, attorneys, and outside advocates are permitted to assist an inmate in filing their request for an administrative remedy relating to allegations of sexual abuse. If a third-party file such a request on behalf of an inmate, the inmate must agree to have the request filed on their behalf, as a condition of processing the request. The alleged victim will also be required to personally pursue any subsequent steps in the administrative remedy process. If the inmate declines to have the request processed on their behalf, staff must document the decision. Any third party filing of a request related to allegations of sexual abuse or sexual harassment must be forwarded to the PREA Compliance Manager." The GROC Inmate Handbook informs the inmates that, "Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing inmate grievances relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates."

115.52 Provision (f)

VADOC Operating Procedure 866.1 states in part that; "Emergency Grievance Process. Any inmate who has a substantial risk of imminent sexual abuse or whose current situation or condition subjects them to an immediate risk of serious personal injury or irreparable harm should immediately notify staff for assistance. The inmate can access the emergency grievance process by submitting their issue on the Emergency Grievance, for an expedited response. Emergency grievances that are not resolved to the inmate's satisfaction may then be filed as a regular grievance. An inmate must exhaust this administrative remedy, prior to seeking Judicial Relief. Staff with appropriate training and the required authority to address inmate emergencies and staff designated by Implementation Memorandum to respond to Emergency Grievances must review the issue, determine a course of action, and provide an appropriate response with reasons for the decision. All Emergency Grievances on medical and dental care must be forwarded to the Medical Department for review and response. All Emergency Grievances alleging sexual abuse, sexual harassment or a substantial, imminent risk of sexual abuse must be forwarded to the Administrative Duty Officer or Shift Commander. If an emergency exists, the designated staff respondent must take necessary and timely action(s) to protect the inmate and resolve the emergency. The inmate must receive a response to an Emergency Grievance within eight hours of receipt, or less, to protect the inmate from serious personal injury or irreparable harm. This eight-hour response is used as the initial and final response to this emergency grievance." The GROC Inmate Handbook informs the inmates that, "Staff shall accept any report of PREA related issues made through an Emergency Grievance and immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to the Facility Unit Head and facility PREA Compliance Manager."

The Auditor observed the availability of these emergency grievances and mounted secure grievance boxes in all the housing units during the on-site facility tour.

#### 115.52 Provision (g)

VADOC Operating Procedure 866.1 states in part that; "An inmate's use of the grievance procedure to resolve their issues is not normally cause for disciplinary action, unless, the written grievance document or related inmate action are subject to disciplinary action as outlined in Operating Procedure 861.1, Inmate Discipline, Institutions. Disciplinary action may include but is not limited to Disciplinary Offense Code 212, 222, 141, or filing a grievance of alleged sexual abuse proven to be in bad faith."

#### Conclusion

The agency has a policy that places limitations on what allegations can be handled through the grievance process. The agency's procedure is that grievances received about sexual assault and sexual harassment will be accepted and reviewed regardless of when the incident took place. The agency protocol is if the Facility Head or PREA Compliance Manager receives a grievance alleging sexual abuse or sexual harassment by staff or sexual abuse by an inmate, the grievance is immediately handled as a PREA complaint and investigated as such, to include assigning it to a PREA Investigator for further investigation. The grievance process is immediately

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|  | <p>stopped, and an administrative investigation is immediately initiated. Therefore, this standard is not applicable in the meaning and purpose for which it is intended. The grievance process is to serve as a vehicle to provide due process in certain situational incidents in a confinement setting and not the purpose of reporting or investigating a sexual abuse allegation in this facility. However, an inmate can use the “emergency grievance” process as a means of reporting sexual abuse allegations. The inmates can also use the grievance process to oppose the finding of a sexual abuse investigation as part of their due process and administrative remedies.</p> |
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| <b>115.53</b> | <b>Inmate access to outside confidential support services</b>  |
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|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) Memorandum of Understanding between VADOC and Action Alliance</li> <li>c) PREA Poster in both English and Spanish. The poster is labeled “Zero-Tolerance” and provides the contact information either by phone or mailing address to the Rape Crisis Center Advocate.</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Inmates who reported a Sexual Abuse</li> <li>2. Interviews with Random Inmates</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.53 Provision (a)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “Inmates should contact their facility PREA Compliance Manager, Unit Manager, or Mental Health staff for information on accessing outside victim advocates for free emotional support services related to sexual abuse or may utilize the Sexual Abuse Hotline (#55), Option 2. The facility will enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.”</p> <p>The agency has entered into a Memorandum of Agreement (MOU) with “Action Alliance” of Virginia to provide outside victim advocacy related to sexual abuse. Stated in the MOU, the VADOC has agreed to provide telephone numbers and mailing addresses to incarcerated victims who request sexual violence crisis intervention</p> |

services, emotional support, and/or supportive counseling. The Action Alliance services are provided by mail, a phone hotline, and in person upon request. Action Alliance also provides sexual assault educational materials in areas accessible to inmates. The contact information for Action Alliance is located on the posters displayed in the housing units. The Auditor observed these posters during the facility tour. In addition, every inmate that is transferred to the GROC receives a Sexual Abuse Training Orientation. During this orientation, the inmate is once again provided contact information for the rape crisis center. This procedure is documented and acknowledged by signature from the inmate. The hotline phone call is free of charge to the inmate. Outgoing facility mail is not scanned, opened, or read. The crisis intervention services are confidential, and Action Alliance has no duty to report unless involving a juvenile or vulnerable adult or if the inmate chooses to report.

During the on-site audit, the Auditor performed 30 inmate interviews. 18 inmates were aware that services are available outside the facility for dealing with sexual abuse and 12 inmates stated that they were not sure or unaware of such services. Those inmates that were aware of the services also knew how to contact the crisis center. They were also cognizant that the communication with the crisis advocate is confidential. When asked if they could tell me about the kind of services there are; the inmates identified a rape crisis center, one inmate mentioned the Piedmont Community Services, and one inmate indicated through the Veterans Affairs. The inmates that reported sexual abuse stated that the facility did not provide them with phone numbers or mailing addresses of outside services because they declined those services. The Auditor reviewed these investigative files and observed documentation that the inmates were offered both medical and mental health services.

The evidence collected for this provision shows that the agency has procedures in place to provide crisis intervention services from an outside advocacy group free of charge that is confidential. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.53 Provision (b)

VADOC PREA Operating Procedure 038.3 states in part that; "The facility will inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws."

The GROC informs inmates through a pre-recorded phone message that their calls may be monitored before making every call. The inmate sexual abuse information orientation also informs the inmates that their calls are subject to monitoring and may be referred out for investigation. The MOU between the VADOC and Action Alliance states that; "The statewide hotline shall provide confidential crisis intervention and emotional support services related to all sexual abuse or assault victims." The PREA Regional Analyst confirmed to the Auditor that the phone number provided to inmates for private advocate counseling to Action Alliance is not monitored or recorded. Therefore, the communication between inmates and Action Alliance remains confidential when the inmate calls the toll-free number and not #55



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|  | <p>to report an allegation of sexual abuse. In addition, confidentiality and recording privacy notification in posted on every Zero-Tolerance poster in every block.</p> <p>The Auditor performed 30 inmate interviews. In those interviews, the 22 inmates that were aware of these services assumed that the information would remain confidential.</p> <p>The evidence collected for this provision shows that the facility does inform inmates the extent to which their communications are being monitored. Therefore, through agency procedures, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>115.53 Provision (c)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “The DOC maintains a Memorandum of Understanding (MOU) with a community service provider who can provide inmates with access to free confidential emotional support services related to sexual abuse. A copy of this agreement is available from the PREA/ADA Supervisor.”</p> <p>The facility has provided a copy of a MOU Contract Renewal between the VADOC and The Action Alliance Center of Virginia dated 09/01/2023 through 08/31/24, and the previous MOU extension date of 05/01/2023, through 08/31/23 as proof that confidential emotional support services are being provided to the inmates at the GROC during the entire rating period.</p> <p>The evidence collected for this provision shows that the agency has entered into a Memorandum of Understanding Contract Renewal with an outside advocacy group to provide the inmates emotional support as it relates to sexual abuse. Therefore, through the signed MOU and personal observation the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring the facility provide inmate access to outside confidential support services.</p> |
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| <b>115.54</b> | <b>Third-party reporting</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> |

- a) VADOC PREA Operating Procedure 038.3
- b) Third-Party Reporting form in English and Spanish
- c) VADOC Public Website
- d) Visitation Posters

Observations made during the on-site audit and document review.

115.54 Provision (a)

VADOC PREA Operating Procedure 038.3 states in part that; “Contact information on how to report sexual abuse and sexual harassment on behalf of an inmate is provided on the DOC public web site.”

The GROC has the following information published on their VADOC agency website explaining how someone would report a sexual abuse on behalf of an inmate housed in the GROC.

REPORT ABUSE

If you or someone you know has been sexually abused or sexual harassed while in the custody or under supervision of the Virginia Department of Corrections, safely report the incident:

- Call the 24/7 confidential reporting hotline at 1-855-602-7001
- File a complaint by completing the Third-Party Reporting form. The form is also available in Spanish.
- Send an email to [PREAGrievance@vadoc.virginia.gov](mailto:PREAGrievance@vadoc.virginia.gov)

The evidence collected for this provision shows that the agency has procedures in place to address third-party reports of sexual abuse or harassment both formally and publicly. Therefore, through document review and personal observations, the facility has demonstrated that it meets this provision.

Conclusion

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring a method to receive third-party reports alleging sexual abuse and distribute that information publicly.

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| <b>115.61</b> | <b>Staff and agency reporting duties</b>             |
|               | <b>Auditor Overall Determination:</b> Meets Standard |
|               | <b>Auditor Discussion</b>                            |

The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) VADOC PREA Operating Procedure 038.3
- b) VADOC Operating Procedure 730.2 Mental Health Services
- c) VADOC Operating Procedure 801.6 Inmate Services
- d) VADOC Operating Procedure 030.4 Special Investigative Unit
- e) VADOC Operating Procedure 720.2 Medical Screening
- f) VADOC Operating Procedure 720.7 Emergency Equipment & Care
- g) VADOC Operating Procedure 038.1 Reporting Serious or Unusual Incidents
- h) Virginia Department of Social Services Abuse & Neglect Mandatory Reporters Portal
- i) GROC Warden Memorandum regarding no reports of sexual abuse or harassment via medical, mental health, or anonymously during this audit period.

Interviews:

1. Interviews with Random staff
2. Interview with Assistant Warden
3. Interview with Medical and Mental Health Staff
4. Interview with PREA Coordinator

Observations made during the on-site audit and document review.

115.61 Provision (a)

VADOC PREA Operating Procedure 038.1 states in part that; "Any employee, volunteer, or contractor shall immediately report to their supervisor or the officer in charge any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the DOC; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation." In addition, Policy 038.3 also states in part that; "Staff, volunteers, and contractors must immediately report to their supervisor, or the Officer in Charge (OIC) any knowledge, suspicion, or information on the following incidents.

a. Staff, volunteers, and contractors must immediately report the following:

- i. Any incident of sexual abuse or sexual harassment that occurred in a facility, whether or not the facility is part of the DOC.

ii. Any incident of retaliation against staff or inmates who reported sexual abuse or sexual harassment.

iii. Any incident of staff neglect or violation of responsibilities that may have contributed to the sexual abuse or sexual harassment and/or retaliation.”

During the interview process, the Auditor interviewed 12 random staff. All 12 staff members stated that they must immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to their supervisor. In addition, the facility provided multiple examples of a verbal report of sexual abuse or harassment that was reported and investigated.

The evidence collected for this provision shows that the agency has procedures in place to address immediately reporting any knowledge, suspicion, or information regarding sexual abuse or sexual harassment. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.61 Provision (b)

VADOC PREA Operating Procedure 038.3 states in part that; “Apart from reporting to designated supervisors or officials, any information related to a sexual abuse report shall not be revealed to anyone other than to the extent necessary, as specified in operating procedures, to make treatment, investigation, and other security and management decisions.” Operating Procedure 801.6 states in part that; “Staff must not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in operating procedures, to make treatment, investigation, and other security and management decisions.”

During the interview process, the Auditor interviewed 12 random staff. All 12 staff members stated that they must immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to their supervisor and must only relay information on a ‘need to know’ basis.

The evidence collected for this provision shows that the agency has procedures in place to address not revealing information related to a sexual abuse report to anyone other than to the extent necessary. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.61 Provision (c)

VADOC Operating Procedure 720.2 states in part that; “All inmates must be informed of the medical and mental health practitioner’s duty to report any knowledge, suspicion, or information regarding an incident of sexual abuse and the limitations of confidentiality prior to conducting a medical or mental health screening, appraisal, or examination.” In addition, Operating Procedure 730.2 states in part that; “Before beginning the Sexual Assault Assessment, the Psychology Associate will advise the inmate of the practitioner’s duty to report, and the limitations of confidentiality and that such information may be available to the facility administration in the context of an investigation in accordance with Operating Procedure 730.6, Mental Health

Services: Confidentiality.”

The Auditor interviewed the Health Services Administrator. The HSA stated that they do notify the inmate of the duty to report sexual abuse allegations and the limitations surrounding confidentiality. She also stated that they have a duty to report all suspicions, knowledge, or information regarding sexual abuse. In addition, the Administrator stated that she had not experienced a situation where an inmate reported to her about an alleged sexual abuse. When interviewing the Mental Health professional, she confirmed the same practices and informed the Auditor that she had experienced a situation where an alleged sexual abuse allegation was made to her but involved a reported incident from a prior institution and she immediately notified the facility investigator. It should be noted that this question is broad and may expand to one’s entire career and experiences. Therefore, the incident indicated by staff may not have occurred at the GROC and did not occur within this audit period. The question does show a level of knowledge and experience as to how to react in these circumstances.

The evidence collected for this provision shows that the agency has procedures in place to require medical and mental health practitioners to report any incidents they have been made aware of involving the knowledge, suspicion, or information regarding sexual abuse. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.61 Provision (d)

VADOC PREA Operating Procedure 038.3 states in part that; “If the alleged victim is under the age of 18, or inmates who are receiving services from a Licensed DOC Mental Health Program, the Organizational Unit Head, or Administrative Duty Officer in their absence, is required to immediately report any alleged abuse to the local Department of Social Services.”

When the Assistant Warden was interviewed, she stated that the GROC does not house any juveniles. However, they do house vulnerable adults. The Assistant Warden indicated that when notified of such a situation where a vulnerable adult alleges being sexually abused, she would immediately make notification to the local social services department in the jurisdiction of which the incident occurred. When interviewing the PREA Coordinator he also confirmed this practice and stated that it’s the Unit Head’s responsibility to contact Social Services.

The evidence collected for this provision shows that the agency has procedures in place to require staff to report sexual abuse involving individuals under the age of 18 and vulnerable adults to the designated state or local services in accordance with applicable mandatory reporting laws. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.61 Provision (e)

VADOC Operating Procedure 030.4 states in part that; “All allegations of sexual abuse and sexual harassment, including third-party and anonymous reports must be

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|  | <p>immediately reported to the facility designated investigator who will conduct an initial investigation and will immediately notify the PREA Analyst of the allegation.”</p> <p>During the document review, the Auditor reviewed 11 investigations. The investigation review revealed that the source of the allegations was: four PREA hotline calls, five verbal allegations reported to staff, and two third-party reports. In all 11 cases, to including criminal investigations, a PREA investigator (Facility Investigator) or (Special Agent) was assigned to conduct the investigation. The Assistant Warden was also interviewed and explained that all allegations of sexual abuse and sexual harassment (including third-party reports) are assigned to a PREA trained investigator.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that all allegations of sexual abuse are turned over to a PREA designated investigator to initiate an inquiry. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring staff and agency reporting duties.</p> |
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| <b>115.62</b> | <b>Agency protection duties</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 730.2 Mental Health Services</li> <li>c) VADOC Operating Procedure 830.6 Inmate Keep Separate Management</li> <li>d) GROC Warden Memorandum indicating no instances of immediate action taken to protect an inmate.</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interviews with Random Staff</li> <li>2. Interview with Assistant Warden</li> </ul> |

### 3. Interview with Agency Head

Observations made during the on-site audit and document review.

#### 115.62 Provision (a)

VADOC PREA Operating Procedure 038.3 states in part that; "When a staff member, volunteer, or contractor learns that an inmate is subject to a substantial risk of imminent sexual abuse, the individual must notify their supervisor, or Commander so that immediate action can be taken to protect the inmate." Also, Operating Procedure 730.2 states in part that; "The Psychology Associate will immediately consult with the Facility Unit Head or designee and recommend housing interventions or other immediate action to protect an inmate when it is determined that the inmate is subject to a substantial risk of imminent sexual abuse or is considered at risk for additional sexual victimization."

Interviews were conducted with 12 random staff. Of those staff interviewed, all 12 staff members stated that they would immediately remove the inmate from the situation, block, or housing unit. In addition, they stated that they would conduct an initial inquiry and notify a supervisor. The Assistant Warden was also interviewed. In that interview, it was stated that the individual must be kept separate, safe, and a report be made. She also stated that the alleged abuser would be moved to another location, and she would initiate an investigation to collect the facts. The inmate would be re-evaluated and then the information obtained would be considered to determine the best and safest housing assignment moving forward. The Agency Head stated that his agency has options when they learn that an inmate is subject to the risk of imminent sexual abuse. He stated that they can place the inmate in an easily observable unit. Also, they can make sure the inmate knows their rights and how to report. Finally, if the inmate agrees, they can be transferred to a different facility where the threat does not exist.

The facility provided a memo indicating no instances requiring immediate action be taken to protect an inmate from sexual abuse occurred during this rating period.

The evidence collected for this provision shows that the agency has procedures in place to address when an inmate is subject to a substantial risk of sexual abuse and immediate action is taken to protect that inmate. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.

#### Conclusion

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring agency protection duties.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) VADOC PREA Operating Procedure 038.3
- b) VADOC Operating Procedure 030.4 Special Investigation Unit
- c) Notification email written by the GROC Warden notifying another facility about receiving a sexual abuse allegation.
- d) Notification email written by a Sheriff's Office notifying the GROC Warden about a sexual abuse allegation that allegedly occurred at GROC.

Interviews:

- 1. Interview with Assistant Warden
- 2. Interview with Agency Head

Observations made during the on-site audit and document review.

115.63 Provision (a), (b), and (c)

VADOC PREA Operating Procedure 038.3 states in part that; "Any staff member, volunteer, or contractor, who receives an allegation that an inmate was sexually abused while confined at another facility, must notify the Facility Unit Head. The Facility Unit Head will notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. The Facility Unit Head must notify the head of the facility as soon as possible, but no later than 72 hours after receiving the allegation and will document that the notification was provided."

The GROC reported one instance over the last twelve months where notification was made to another confinement facility about an allegation of sexual abuse. The facility provided an email written by the Warden along with the email chain making the appropriate notifications.

The evidence collected for these provisions shows that the agency has procedures in place to address when an allegation of sexual abuse is received from an inmate, but the incident occurred at a different confinement facility. Therefore, through written policy and document review the facility has demonstrated that it meets these provisions.

115.63 Provision (d)

VADOC PREA Operating Procedure 038.3 states in part that; "The facility head or



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|  | <p>agency office that receives the notification is responsible for ensuring that the allegation is investigated in accordance with the requirements of the Prison Rape Elimination Act.” In addition, VADOC Operating Procedure 030.4 states in part that; “When the Facility Unit Head receives notification from another facility that an inmate was sexually abused while confined at that facility, they shall ensure that the allegation is investigated in accordance with the PREA Standards.”</p> <p>The GROC reported one instance where they received a sexual abuse allegation from another confinement facility within the last twelve months. The Auditor reviewed 11 sexual abuse and harassment investigations files and one case file reviewed was the incident involving the Sheriff’s Office making notification to GROC regarding the alleged sexual abuse. An investigation was initiated and completed in regard to the investigative file the Auditor reviewed. When the Assistant Warden was interviewed, she stated that all notifications of alleged sexual abuse that occurred at her facility are immediately assigned to an investigator to investigate. If it appears to be criminal in nature, then the VADOC Special Investigative Unit is contacted to investigate. The Agency Head stated that the point of contact for all sexual abuse allegations are directed through the PREA Coordinator or they can contact the Administrator of that facility who would assign a PREA Investigator to conduct a thorough investigation into the allegation.</p> <p>The evidence collected for this provision shows that the agency does have a policy in place to address when an allegation of sexual abuse is received from another agency. Also, they have policy in place to govern when and how to handle allegations received by their agency regarding sexual abuse allegations made that occurred at another outside confinement facility. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it does meet this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the reporting to other confinement facilities and investigating reports from other confinement facilities.</p> |
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| <b>115.64</b> | <b>Staff first responder duties</b>  |
|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> |

- a) VADOC PREA Operating Procedure 038.3
- b) VADOC Operating Procedure 030.4 Special Investigation Unit
- c) Eleven completed Sexual Assault Response Checklists

Interviews:

- 1. Interview with Security Staff First Responders
- 2. Interview with Inmates that reported Sexual Abuse
- 3. Interviews Non-Security Staff
- 4. Interviews with Random Staff

Observations made during the on-site audit and document review.

115.64 Provision (a)

VADOC Operating Procedure 030.4 states in part that; "The Organizational Unit Head or the individual in charge at the scene of a serious incident must take appropriate action necessary to protect physical evidence and crime scenes until released to the responding Special Agent."

- 1. All staff in the immediate area at the time of a serious incident will be identified and directed to record their observations in Internal Incident Reports.
- 2. All inmates in the area will be identified, separated, and secured.
- 3. Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to:
  - a. Separate the alleged victim and abuser.
  - b. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
  - c. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including as appropriate: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
  - d. If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including as appropriate: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- 4. The scene will not be disturbed until released by the responding Special Agent.

The facility reported 11 allegations of alleged sexual abuse. Of those 11 cases, security staff were first responders in 5 incidents. An interview with a security staff

first responder was conducted. The first responder was asked to describe the actions taken when first on the scene of an alleged inmate sexual abuse allegation. The first responder stated that he would make sure the scene was safe, separate the victim and alleged abuser, report to a supervisor, preserve the evidence, notify medical, write a report, and protect the possible crime scene. The Auditor interviewed three alleged inmate victims that reported sexual abuse. One inmate reported that he called the PREA hotline, and an investigator came to speak with him within 24 hours of reporting the incident. The second inmate reported using the intercom system in her room and staff immediately responded and removed her roommate. Finally, the third inmate reported pulling an officer into an office and verbally reported. The inmate indicated that he was immediately separated from the situation. None of these inmates required a medical forensic examination.

The evidence collected for this provision shows that the agency has procedures in place to address the responsibilities of staff first responders when confronted with an allegation of an inmate sexual abuse. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.64 Provision (b)

VADOC PREA Operating Procedure 038.3 states in part that; “If the first staff responder is not a security staff member, the non-security responder will notify the Shift Commander, ensure the victims safety, request that the alleged victim not take any actions that could destroy physical evidence such as showering, eating, brushing teeth, or drinking until after evidence collection.”

The facility reported no instances of alleged sexual abuse where the first responder was not a security staff member. When conducting interviews, 12 random staff were questioned about their responsibilities when confronted with an allegation of inmate sexual abuse. The responses were broken down into the following ways. As a side note, the Auditor has incorporated the staff’s multiple responses into the listed general topics.

- 12 staff members stated they would separate the victim and abuser
- 4 staff members would also contact a supervisor
- 4 staff members mentioned contacting medical personnel
- 8 staff members cited preserving evidence
- 6 staff members said they would secure the scene
- 1 staff member stated they would write a report

In addition, the Auditor interviewed 2 contractors/volunteers during this audit and both non-security staff stated that they would immediately notify a security staff member.

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|  | <p>The evidence collected for this provision shows that the agency has procedures in place to address the responsibilities of non-security staff first responders when confronted with an allegation of an inmate sexual abuse. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring Staff first responder duties.</p> |
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| <b>115.65 Coordinated response</b> |  |
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|                                    | <b>Auditor Overall Determination:</b> Meets Standard   |
|                                    | <b>Auditor Discussion</b>  |
|                                    | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 075.1 Emergency Operations Plan</li> <li>c) VADOC Sexual Assault Response Checklist</li> <li>d) GROC PREA Response Plan</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Assistant Warden</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.65 Provision (a)</p> <p>The VADOC Operating Procedure 038.3 states in part that; “Each Facility Unit Head or designee will develop a written plan to coordinate the actions taken by staff first responders, medical and mental health practitioners, Psychology Associates, investigators, and facility leadership in response to a sexual abuse incident.”</p> <p>The GROC provided an outlined coordinated response plan in the form of a five-page institutional plan for the facility to follow when confronted with an inmate sexual abuse incident. The document outlines the procedures/steps to follow and includes the actions of the security first responders, Supervisor’s responsibility, Security Search/Evidence Collection, Medical &amp; Mental Health practitioners, PREA</p> |

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|  | <p>Investigators, and Facility Leadership/Administrative Responsibilities. In an interview with the Assistant Warden, it was confirmed that the facility uses a coordinated response plan to follow when dealing with incidents of alleged inmate sexual abuse.</p> <p>The evidence collected for this provision shows that the facility has a coordinated response plan to follow during incidents of alleged inmate sexual abuse. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring a coordinated response.</p> |
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| <b>115.66</b> | <b>Preservation of ability to protect inmates from contact with abusers</b>  |
|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents</p> <ul style="list-style-type: none"> <li>a) Code of Virginia 40.1-57.2 (Prohibition against Collective Bargaining)</li> <li>b) VADOC PREA Coordinator Memorandum to all Wardens and Superintendents dated 08/24/2022 stating how the agency does not participate in collective bargaining and providing Code of Virginia regarding such.</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Agency Head</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.66 Provision (a)</p> <p>Employees in the Commonwealth of Virginia do not have collective bargaining rights per the Code of Virginia 40.1-57.2. There has been no collective bargaining agreement entered into since August 2012.. In addition, the facility directed the Auditor to the Virginia State code that states; “No state, county, city, town, or like governmental officer, agent, or governing body is vested with or possesses any authority to recognize any labor union or other employee association as a bargaining agent of any public officers or employees, or to collectively bargain or enter into any</p> |

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|  | <p>collective bargaining contract with any such union or association or its agents with respect to any matter relating to them or their employment or service unless, in the case of a county, city, or town, such authority is provided for or permitted by a local ordinance or by a resolution.”</p> <p>The Auditor confirmed this during the interview with the Agency Head. In addition, the agency provided a memorandum from the agency’s PREA Coordinator which confirms that GROC has not entered into or renewed any collective bargaining agreements nor is it a part of a union.</p> <p>The evidence collected for this provision shows that this standard is not applicable to this facility or any confinement facility in the Commonwealth of Virginia if it chooses not to engage in collective bargaining. Therefore, through state law and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that this standard is not applicable to this facility.</p> |
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| <b>115.67</b> | <b>Agency protection against retaliation</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 135.2 Rules of Conduct</li> <li>c) VADOC Operating Procedure 135.1 Standards of Conduct</li> <li>d) VADOC Operating Procedure 075.7 Critical Incident Peer Support Team</li> <li>e) PREA Retaliation Monitoring Form</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Agency Head</li> <li>2. Interview with Assistant Warden</li> <li>3. Interview with Staff Member charged with Monitoring Retaliation</li> </ul> <p>Observations made during the on-site audit and document review.</p> |

115.67 Provision (a)

VADOC PREA Operating Procedure 038.3 states in part that; "All staff and inmates who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations will be protected from retaliation by other inmates or staff. Allegations of retaliation will be reported through the same methods as available for reporting sexual abuse or sexual harassment. Such allegations must be investigated in the same manner as allegations of sexual abuse." VADOC Operating Procedure 135.2 states in part that; "All inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations will be protected from retaliation by other inmates or staff."

The designated staff member charged with monitoring possible retaliation at the GROC is the PREA Compliance Manager. The facility provided copies of retaliation monitoring forms as evidence in the PAQ, and the Auditor observed these forms when conducting document review while on-site.

The evidence collected for this provision shows that the facility has procedures in place and staff to monitor retaliation associated with reports of sexual abuse. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

115.67 Provision (b)

VADOC PREA Operating Procedure 038.3 states in part that; "Multiple measures are available to protect staff and inmates from retaliation; such measures include housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates and staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations."

When interviewing the Assistant Warden, she explained that they could use multiple ways to protect inmates or staff from retaliation. The Assistant Warden spoke of having the PREA Compliance Manager monitor possible retaliation along with changing housing assignments, transfers, providing mental health treatment, and discipline. The Agency Head spoke of the written policy prohibiting retaliation and how his agency would investigate all reports of retaliation, and if found to be substantiated, that the agency would not tolerate that behavior and take corrective action. The staff member charged with monitoring retaliation stated that he remains in touch with the inmate for 90 days. He indicated that he monitors housing placement, disciplinary infractions, changes in jobs or programs, and looks for any filed grievances. The staff member charged with monitoring retaliation was asked how often they speak with the individuals being monitored. The staff member charged with monitoring retaliation stated every 30, 60, and 90 days. Finally, the staff member charged with monitoring retaliation stated that they would encourage the individuals involved to contact them if they experienced what they believe to be retaliation.

The evidence collected for this provision shows that the facility employs multiple

protection measures for those inmates and staff who fear retaliation. Therefore, through document review, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.67 Provision (c)

VADOC PREA Operating Procedure 038.3 states in part that; “For at least 90 days following a report of sexual abuse, the PREA Compliance Manager or other designated facility staff will monitor the conduct and treatment of inmates and staff who reported sexual abuse or cooperated with a sexual abuse investigation, and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and will act promptly to remedy any such retaliation. Items to be monitored include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The PREA Compliance Manager must continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.”

The Assistant Warden indicated that when she suspects retaliation she would make sure the victim and abusers were separated and refer the incident to the SIU. The Assistant Warden stated that disciplinary action would result if the investigation findings were substantiated in cases involving staff. Based on the findings of that investigation, staff may be reassigned or receive discipline up to termination. Inmates can be charged both with in-house charges and criminal prosecution or transferred to a different confinement facility. The staff member charged with retaliation monitoring stated that they monitor individuals for at least 90 days, or longer if she feels it necessary. The PREA Compliance Manager (PCM) stated that retaliation monitoring would discontinue if the case was unfounded.

The evidence collected for this provision shows that the facility monitors both staff and inmates who have alleged sexual abuse or assisted in the investigation for a minimum of 90 days. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.67 Provision (d)

VADOC PREA Operating Procedure 038.3 states in part that; “In the case of inmates, such monitoring will also include periodic status checks.”

When conducting the interview with the staff member responsible for monitoring retaliation he stated that he monitors the situation by checking disciplinary reports, changes in housing, and changes in job positions. He also stated that he would meet with the individuals involved face-to-face a couple of times in a 90-day period.

The evidence collected for this provision shows that the facility monitors inmates for retaliation periodically. Therefore, through policy and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.67 Provision (e)

VADOC PREA Operating Procedure 038.3 states in part that; “If any other individual



who cooperates with an investigation expresses a fear of retaliation, the Facility Unit Head must take appropriate measures to protect that individual against retaliation.”

When conducting the interview with the Agency Head, he stated that they have policies posted to protect those individuals. The names of those involved are not released and if it is an inmate and they wish to transfer to a different wing, institution, or moved into protective custody, then that would be an option. The Assistant Warden stated that the PCM monitors those situations and that an inmate engaging in retaliation may be moved to a different housing assignment or to an entirely different facility. The Assistant Warden also stated that if staff were engaged in retaliation, then the staff member would be dealt with using the disciplinary process.

The evidence collected for this provision shows that the facility has procedures in place to address protection for other individuals who cooperate with PREA investigations from retaliation. Therefore, through written policy the facility has demonstrated that it meets this provision.

#### 115.67 Provision (f)

VADOC PREA Operating Procedure 038.3 states in part that; “The obligation to monitor for retaliation terminates if the investigation determines that the allegation is unfounded.”

During the interview with the PCM, he indicated that the retaliation monitoring would terminate if the investigation determined the incident allegation was unfounded.

The evidence collected for this provision shows that the facility has procedures in place to address the agency’s obligation to continue monitoring for retaliation if the agency determines the allegation is unfounded. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.

#### Conclusion

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring agency protection from retaliation.

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| <b>115.68</b> | <b>Post-allegation protective custody</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:<br><br>Documents: |

- a) VADOC Operating Procedure 830.5 Transfers, Institution Reassignments
- b) VADOC Operating Procedure 425.4 Management of Bed and Cell Assignments
- c) VADOC Sexual Abuse/Sexual Harassment Available Alternatives Assessment
- d) GROC Warden memorandum regarding not receiving any allegations of sexual abuse that warranted immediate action using restorative housing to protect inmates who alleged to have suffered sexual abuse.
- e) Sexual Abuse/Sexual Harassment Available Alternatives Assessment

Interviews:

1. Interview with Assistant Warden

Observations made during the on-site audit and document review.

115.68 Provision (a)

VADOC Operating Procedure 425.4 states in part that; "Inmates identified as HRSV, or inmates alleged to have suffered sexual abuse or sexual harassment will not be placed in the restorative housing unit without their consent unless an assessment of all available alternatives has been made, and it has been determined by the Psychology Associate in consultation with the Shift Commander and Regional PREA Analyst that there are no available alternative means of separation from likely abusers. The institution must clearly document the basis for the institution's concern for the inmate's safety and the reason why no alternative means of separation can be arranged. A Sexual Abuse/Sexual Harassment Available Alternatives Assessment must be completed by the Shift Commander prior to placing the inmate in a restrictive housing unit. If the Sexual Abuse/Sexual Harassment Available Alternatives Assessment cannot be conducted immediately, the Shift Commander may place the inmate in a restorative housing unit on general detention for up to two hours while completing the assessment. A copy of the completed Sexual Abuse/Sexual Harassment Available Alternatives Assessment must be sent to the Regional PREA Analyst immediately upon completion with a copy maintained in the PREA Investigation file. Inmates will remain in the restorative housing unit only until an alternative means of separation from likely abuse can be arranged; this assignment will not ordinarily exceed 30 days."

During this audit period, the facility reported that they had not assigned any inmate who alleged to have suffered sexual abuse to involuntary segregated housing for the purpose of separating that inmate due to no other housing alternatives. During the facility tour, the Auditor visited the restorative housing cells that were being utilized and reviewed the cell assignments to verify that no inmate was being housed involuntarily due to sexual abuse.

The Assistant Warden stated during her interview that only in a situation where there were no alternatives would an inmate be placed in restorative housing due to alleged sexual abuse victimization. She stated that if necessary the alleged perpetrator would

be placed in restorative housing. The Assistant Warden further indicated if that were the case, the correctional facility would transfer the inmate to another Correctional Facility located in the state of Virginia.

The staff member working in a segregated housing unit was interviewed and indicated that if an inmate was transferred to RHU due to either being a possible alleged victim, or protection from possible sexual abuse, they would still have access to all the privileges and programs as those inmates assigned to general population. The only exception would be a work detail. If they limited access to these programs they would have to document and explain why the opportunities were limited, the duration, and the reason. Finally, the staff member that supervises inmates in segregation was asked if the facility reviews the inmate’s situation every thirty days to determine if the housing assignment is still needed. The staff member that supervises inmates in segregation stated “Yes, and it could be more often.”

The facility provided a memorandum authored by the Warden indicating the facility had no instances during this rating period where an inmate was placed in restorative housing due to being a victim of sexual abuse.

The evidence collected for this provision shows that the agency has procedures in place to ensure that if an inmate is placed in segregation due to alleging sexual abuse that inmate would retain all the privileges and opportunities that all other inmates are afforded. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring limitation on protective custody.

| 115.71 | Criminal and administrative agency investigations   |
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|        | <b>Auditor Overall Determination:</b> Meets Standard  |
|        | <b>Auditor Discussion</b>   |
|        | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 030.4 Special Investigations Unit</li> <li>c) Investigations Matrix</li> </ul> |

- d) Ten sexual abuse and sexual harassment case files
- e) Code of Virginia 53.1-10 Powers and Duties of VADOC Director

Interviews:

1. Interview with Assistant Warden
2. Interview with Investigative Staff
3. Interview with PREA Coordinator
4. Interview with PREA Compliance Manager

Observations made during the on-site audit and document review.

115.71 Provision (a)

VADOC Operating Procedure 030.4 states in part that; "All investigations into allegations of sexual abuse and sexual harassment will be done promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports."

The Auditor reviewed 11 investigative files during the document review. The average time it took to initiate an investigation across the 11 cases was approximately 26 days. It should be noted that the one case that was criminally investigated by the SIU took 125 days to complete. The files contained both physical and circumstantial evidence, witness, victim, and alleged abuser interviews amongst other factual documents. During the interview with the investigative staff, the investigator stated that an administrative investigation is immediately initiated once notification is made. The investigator suggested that an investigation would begin immediately once the allegation has been made. The investigator stated that anonymous and third-party reports are handled exactly in the same manner as all other sexual abuse allegations.

The evidence collected for this provision shows that the agency has procedures in place to ensure that it investigates sexual abuse allegations promptly, thoroughly, and objectively. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

115.71 Provision (b)

VADOC Operating Procedure 030.4 states in part that; "SIU investigators will receive special training in sexual abuse investigations before conducting PREA investigations. In addition, to the general PREA training provided to all employees, investigators shall receive specialized training in conducting sexual abuse investigations in confinement settings. Specialized training shall include:

- i. Interviewing sexual abuse victims
- ii. Proper use of Miranda and Garrity warnings

- iii. Sexual abuse evidence collection in confinement settings
- iv. Criteria and evidence required to substantiate a case for administrative action or prosecution referral.”

The GROC reported that the facility has 3 PREA certified facility investigators and VADOC has 19 Special Agents. During the pre-audit phase, the Auditor requested training records for the PREA investigators. The facility provided that information and the Auditor verified that those investigators had received special sexual abuse training in a confinement setting. During the interview process, the SIU investigator confirmed that he had received the initial training in 2022. The PREA Coordinator provided certificates of completion for both the SIU Special agents and Facility Investigators in the Pre-Audit Questionnaire. The Facility Investigator was also interviewed and indicated that he had attended an investigator class at the Academy and took the online course from NIC.

The evidence collected for this provision shows that the agency has procedures in place to ensure that only specially trained sexual abuse investigators conduct investigations into sexual abuse allegations. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (c)

VADOC PREA Operating Procedure 030.4 states in part that; “Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Investigators will interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.”

The Auditor reviewed 11 administrative investigation files. Of those investigations, eight investigations contained physical or circumstantial evidence, witness statements, video footage, victim, and perpetrator interviews. All files contained victim and perpetrator interviews and witness statements.

When conducting the interview with the SIU investigator, he stated that usually the facility investigator determines if there is probable cause and notifies the SIU Agent. If the allegation looked as if it were criminal in nature, an investigative plan would be created and witnesses located. He would then begin answering the questions of who, what, when, where, and how. He would also collect evidence both physical and circumstantial. The SIU investigator stated that he would collect forensic evidence, crime scene sketches, photographs, Perk Kit, Buccal swab, and interview all witnesses.

The evidence collected for this provision shows that the agency has procedures in place to ensure that VADOC investigators collect circumstantial evidence and direct evidence. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (d)

VADOC Operating Procedure 030.4 states in part that; “When the quality of evidence that appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.”

There are no examples of investigative reports supporting compelled statements. When asked about compelling staff to answer questions, the SIU Investigator explained that he would first complete the criminal investigation then consult with the Commonwealth Attorney before conducting compelled interviews in order to follow the Garrity Rule. The Facility Investigator indicated that he would not conduct compelled interviews and that would be the SIU Agent’s decision.

The evidence collected for this provision shows that the agency has procedures in place governing compelled interviews. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (e)

VADOC Operating Procedure 030.4 states in part that; “The credibility of an alleged victim, suspect, or witness will be assessed on an individual basis and will not be determined by the persons status as an inmate or staff.” The policy goes on to state that; “The inmate who alleged that he or she was sexually abused will not be required to submit to a polygraph examination or other truth-telling devise as a condition for proceeding with the investigation of alleged allegation.”

The SIU Investigator was interviewed and stated that he treats every allegation the same and handles them in a serious manner. The Investigator also stated that polygraphs are not used to determine truthfulness in allegations of sexual abuse. The Auditor’s interview with three inmates that reported sexual abuse responded that they were not required to submit to a polygraph as a condition in continuing with the investigation.

The evidence collected for this provision shows that the agency has procedures in place ensuring that an individual’s credibility shall not be determined by the person’s status as an inmate or staff. Furthermore, polygraph examinations will not be used as a condition for proceeding with the investigation of a sexual abuse allegation. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (f)

VADOC Operating Procedure 030.4 states in part that; “Administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.”

The investigative files examined during the document review phase did contain language as to if VADOC policies and procedures were followed in the incident.

When interviewing both the SIU Investigator and Facility Investigator, they indicated that they would try to determine during the administrative investigation whether staff actions or failure to act contributed to the sexual abuse. The investigators also stated that all administrative investigations are documented and that witness statements, incident reports, circumstantial evidence, audio, and video evidence would be found in an administrative investigation file.

The evidence collected for this provision shows that the agency has procedures in place to ensure efforts are made to determine if staff actions or failures contributed to sexual abuse. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (g)

VADOC Operating Procedure 030.4 states in part that; "Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible."

The SIU Investigator confirmed that all criminal investigations shall be documented and that the evidence located in the file would be the same as what is placed in the administrative file. The Auditor reviewed five criminal cases and observed the documentation mentioned above in the criminal file.

The evidence collected for this provision shows that the agency conducts all criminal investigations. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (h)

VADOC Operating Procedure 030.4 states in part that; "Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution."

The SIU Investigator indicated that all criminal cases are referred to the Commonwealth Attorney's Office for a decision regarding prosecution. The Auditor reviewed five pending criminal cases showing evidence that the Commonwealth Attorney's Office declined prosecution. The SIU Investigator stated that he would refer the case for prosecution at the conclusion of the investigation.

The evidence collected for this provision shows that the agency does conduct criminal investigations and will refer substantiated cases for criminal prosecution. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (i)

VADOC PREA Operating Procedure 038.3 states in part that; "The Facility Unit Head

must ensure that all case records associated with claims of sexual abuse or sexual harassment, including Incident Reports, investigative reports, inmate information, case disposition, medical and counseling evaluation findings, and recommendation for post-release treatment or counseling are retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.”

The evidence collected for this provision shows that the agency has procedures in place to ensure written investigative reports are retained for as long as the alleged abuser is incarcerated or employed by the agency plus five years. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

#### 115.71 Provision (j)

VADOC Operating Procedure 030.4 states in part that; “The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.”

The SIU Agent was asked how he would proceed when a staff member alleged to have committed sexual abuse terminates employment prior to a completed investigation. The investigator explained that he would still follow through with the investigation regardless of if the staff member left employment or if the alleged victim was released from VADOC custody. He stated that he would attempt to provide an outcome to the investigation. The Facility Investigator indicated that he would still continue the investigation, and if necessary, make arrangements with the receiving facility to continue the investigation.

The evidence collected for this provision shows that the agency has procedures in place to ensure that an administrative investigation continues regardless of whether the abuser or victim is no longer employed or under the agency’s control. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.71 Provision (l)

VADOC Operating Procedure 030.4 states in part that; “During the investigation staff will cooperate with SIU and the Facility Investigator must endeavor to remain informed about the progress of the investigation.”

Interviews were conducted with the Assistant Warden, PREA Coordinator, PREA Compliance Manager, and Investigative Staff about this provision. The PREA Coordinator, PREA Compliance Manager, and Assistant Warden were asked who investigates criminal allegations of sexual abuse and how would the agency remain informed of the progress of a criminal sexual abuse case. The PREA Coordinator and Assistant Warden responded by stating that the agency’s Special Investigations Unit conducts all criminal investigations. The PREA Compliance Manager stated that the DOC will turn the case over to the Special Investigations Unit. Finally, the SIU Agent was asked what role he plays in a criminal investigation from an outside agency. The investigator explained that no outside agency would investigate sexual abuse



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|  | <p>allegations in the VADOC. If for some reason State Police assistance was requested, then he would act in a supportive role and accommodate their requests.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to try and stay informed about ongoing criminal sexual abuse investigations amongst their own facilities. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring criminal and administrative agency investigations.</p> |
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| <b>115.72</b> | <b>Evidentiary standard for administrative investigations</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 135.2 Rules of conduct</li> <li>b) VADOC Operating Procedure 861.1 Inmate Discipline</li> <li>c) GROC Warden Memorandum regarding no standard higher than a preponderance of the evidence.</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Investigative Staff</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.72 Provision (a)</p> <p>VADOC Operating Procedure 135.2 states in part that; “A preponderance of the evidence will be adequate in determining whether allegations of sexual abuse or sexual harassment are substantiated.”</p> <p>The SIU Agent was asked what evidence is required to substantiate allegations of sexual abuse. He stated that for a criminal case probable cause must be present. In an administrative investigation, the preponderance of the evidence or 51% of the evidence suggests one way or the other. When interviewing the Facility Investigator, he indicated that in determining if an allegation of sexual abuse or sexual harassment</p> |

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|  | <p>is substantiated one must use the preponderance of the evidence standard.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual assault is substantiated. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>The Auditor reviewed 11 administrative investigative files and believes that the documentation of the administrative findings were the proper standard of proof.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring evidentiary administrative investigations.</p> |
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| <b>115.73</b> | <b>Reporting to inmates</b>  |
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|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 030.4 Special Investigations Unit</li> <li>c) Two examples of SIU Notifications</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Assistant Warden</li> <li>2. Interview with Investigative Staff</li> <li>3. Interview with Inmates that reported sexual abuse</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.73 Provision (a)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “Following an investigation into an inmate’s allegation that they suffered sexual abuse or sexual harassment in a DOC facility, the inmate must be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.”</p> |

In addition, VADOC Operating Procedure 030.4 states in part that; "Upon completion of the investigation, SIU should report to the Facility Unit Head to inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded."

The facility reported 11 investigations of alleged sexual abuse and 17 investigations of alleged sexual harassment during the last twelve months that were completed by the agency. The Auditor reviewed 11 administrative cases where evidence of notification was made and documented in 10 of those cases. The one notification that was missing was due to the inmate being released prior to the conclusion of the investigation.

During the interview with the Facility Investigative staff, the investigator stated that once the investigation has been reviewed a letter with the investigative findings is given to the inmate in all administrative cases and retrieves a signed copy acknowledging receipt of the notification. When a PREA case is investigated by the SIU, the Facility Investigator stated that SIU sends the notification in the mail to the facility and the Facility Investigator makes the notification to the inmate. When interviewing the Special Agent, he stated that a written notice with the findings is sent to the facility that is attached to the file so that the facility can provide notification to the inmate. He further explained that the SIU Supervisor will send the notification to the appropriate Warden. During the Assistant Warden interview, she stated that, "Yes; notification is made to the inmate as to the findings of the allegation." The investigator or PREA Compliance Manager usually does the notification. Lastly, of the three inmates that reported sexual abuse, one inmate stated that she never received a letter of notification informing her of the investigative findings. Therefore, the Auditor requested a copy of the investigative file and notification be provided with the inmate's signature acknowledging the receipt of the findings. The Auditor received the file from the PCM after the on-site visit with evidence that notification of the findings was provided to the inmate. The other two inmates acknowledged receipt of their finding's notification.

The evidence collected for this provision shows that the agency has procedures in place to inform the inmates who allege sexual abuse of the findings of the investigation. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.73 Provision (b)

The GROC is a correctional facility within the Virginia Department of Corrections. The agency conducts their own criminal and administrative investigations. Therefore, the provision of this particular standard is not applicable to this facility.

The evidence collected for this provision shows that the agency conducts their own investigations. Therefore, this provision of the standard is not applicable to this facility.

#### 115.73 Provision (c)

VADOC PREA Operating Procedure 038.3 states in part that; “Following the allegation that a staff member committed sexual abuse, the PREA Compliance Manager or investigator must subsequently inform the inmate whenever:

- i. The allegation has been determined to be unfounded
- ii. The allegation has been determined to be unsubstantiated
- iii. The staff member is no longer posted within the inmate’s unit
- iv. The staff member is no longer employed at the facility
- v. The DOC learns that the staff member has been indicted on a charge related to sexual abuse within the facility
- vi. The DOC learns that the staff member has been convicted on a charge related to sexual abuse within the facility.”

The three inmates that alleged sexual abuse, that were present at the time of the on-site facility audit all alleged an inmate-on-inmate sexual abuse and the other allegation was sexual harassment against contracted staff. The staff allegation involved a sexual harassment and fraternization. Once the contractor was confronted with these issues the contractor immediately resigned. Therefore, there was no inmate to interview regarding staff-on-inmate sexual abuse. Thus, the Auditor cannot provide an alleged inmate victims perspective regarding this provision.

The evidence collected for this provision shows that the agency has procedures in place to inform alleged inmate victims when the alleged staff perpetrator’s criminal circumstances change due to the sexual abuse allegation. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.73 Provision (d)

VADOC Operating Procedure 038.3 states in part that; “Following the allegation that another inmate committed sexual abuse, the PREA Compliance Manager or investigator must subsequently inform the alleged victim whenever:

- i. The allegation has been determined to be unfounded
- ii. The allegation has been determined to be unsubstantiated
- iii. The DOC learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility
- iv. The DOC learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.”

The Auditor conducted interviews with three inmates that reported sexual abuse by another inmate. These allegations were investigated and determined to be unsubstantiated. However, in each incident the alleged aggressor was separated, and

housing assignments changed. None of these incidents rose to the level of a criminal charge being pursued for the alleged inmate aggressor.

The evidence collected for this provision shows that the agency has procedures in place to inform alleged inmate victims when the alleged inmate sexual perpetrator's criminal circumstances change due to the sexual abuse allegation. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

115.73 Provision (e)

VADOC PREA Operating Procedure 038.3 states in part that; "The PREA Compliance Manager or Investigator must document all such notifications and attempted notifications and will send the notifications to the inmate in the same manner as legal mail."

The Auditor reviewed 11 administrative investigative files. Of those files, 10 cases contained documentation of the investigative findings' notification being made to the alleged inmate victim.

The evidence collected for this provision shows that the agency has procedures in place to ensure all notifications and attempted notifications are documented. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring reporting to inmates.

| <b>115.76 Disciplinary sanctions for staff</b> |   |
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|  | <b>Auditor Overall Determination:</b> Meets Standard  |
|  | <b>Auditor Discussion</b>   |
|  | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"><li>a) VADOC Operating Procedure 135.2 Rules of Conduct</li><li>b) VADOC Operating Procedure 135.1 Standard of Conduct</li><li>c) GROC Warden Memorandum dated 01/08/2024 regarding (no staff has been disciplined or terminated based on PREA policy violations or notifications made to law enforcement and/or relevant licensing bodies). However, one contractor did resign</li></ul> |

based on fraternizing with an inmate.

Observations made during the on-site audit and document review.

#### 115.76 Provision (a)

VADOC Operating Procedure 135.2 states in part that; “Any behavior of a sexual nature between employees, contract employees, or volunteers and inmates, inmate's immediate family, or a close friend of the inmate is prohibited. Behavior of a sexual nature includes sexual abuse, sexual assault, sexual harassment, physical conduct of a sexual nature, sexual obscenity, and conversations or correspondence of an emotional, romantic, or intimate nature. Sexual misconduct will be treated as a Group III offense subject to disciplinary sanctions up to and including termination under Operating Procedure, Standards of Conduct.”

The facility provided a memo from the Warden regarding no instances where staff was disciplined for violating agency sexual abuse or sexual harassment policies during the audit period. However, one contractor did resign based on fraternizing with an inmate.

The evidence collected for this provision shows that the agency has procedures in place to ensure staff will be subject to disciplinary actions for violating the agency's sexual abuse and sexual harassment policies. Therefore, through written policy the facility has demonstrated that it meets this provision.

#### 115.76 Provision (b)

VADOC Operating Procedure 135.2 states in part that; “Any behavior of a sexual nature between employees, contract employees, or volunteers and inmates, inmate's immediate family, or a close friend of the inmate is prohibited. Behavior of a sexual nature includes sexual abuse, sexual assault, sexual harassment, physical conduct of a sexual nature, sexual obscenity, and conversations or correspondence of an emotional, romantic, or intimate nature. Termination will be the presumptive disciplinary sanction for employees who have engaged in sexual abuse.”

The GROC provided a written memorandum authored by the Warden stating that the facility has not had any staff terminated due to violating the agency's PREA policy during this audit period. There have been no substantiated cases involving staff violating the agency's sexual abuse or sexual harassment policies and no staff has been terminated based on PREA violations during this audit period.

The Auditor reviewed 11 administrative investigative files during the document review. There was no evidence of substantiated allegations involving staff, contractors, volunteers, or any disciplinary sanction associated with employee termination. However, one contractor did resign based on fraternizing with an inmate.

The evidence collected for this provision shows that the agency has procedures in place to ensure that termination should be the presumptive disciplinary action for staff who have engaged in sexual abuse. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

115.76 Provision (c)

VADOC Operating Procedure 135.2 states in part that; “Disciplinary sanctions for violations of DOC policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) will 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 other staff with similar histories.”

The facility reported that there have been no staff disciplined for any PREA related allegations associated with sexual abuse or sexual harassment during this rating period. The document review of the administrative files conducted by the Auditor confirmed this statement.

The evidence collected for this provision shows that the agency has procedures in place to discipline staff who violate sexual abuse or sexual harassment policies, but do not engage in sexual abuse. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

115.76 Provision (d)

VADOC Operating Procedure 135.2 states in part that; “All terminations for violations of DOC sexual abuse or sexual harassment policies, or resignations by staff that would have been terminated if not for their resignation, must be reported to any relevant licensing bodies by the DOC PREA Coordinator, and to law enforcement agencies, unless the activity was clearly not criminal.” In addition, the facility offered Operating Procedure 135.1, which states in part that; “Staff who are terminated, or who choose to resign in lieu of termination, for violation of the DOC sexual abuse or sexual harassment policies shall be informed of the DOC’s responsibility for reporting the employment action to any relevant licensing bodies and to law enforcement agencies, unless the activity was clearly not criminal.”

The GROC reported that no staff member has been terminated for PREA policy violations and therefore, no law enforcement agency or licensing bodies were contacted during this audit period. The review of the administrative files by the Auditor confirmed this statement.

The evidence collected for this provision shows that the agency has procedures to contact law enforcement and licensing bodies when a staff member is terminated or resigns due to an alleged violation of the agency’s sexual abuse or sexual harassment policies. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring disciplinary sanctions for staff.

| 115.77 | Corrective action for contractors and volunteers   |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 135.2 Rules of Conduct</li> <li>b) VADOC Operating Procedure 027.1 Volunteer and Internship</li> <li>c) GROC Warden Memorandum dated 01/08/2024 regarding (no staff has been disciplined or terminated based on PREA policy violations or notifications made to law enforcement and/or relevant licensing bodies). However, one contractor did resign based on fraternizing with an inmate.</li> </ul> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Interview with the Assistant Warden</li> </ol> <p>Observations made during the on-site audit and document review.</p> <p>115.77 Provision (a)</p> <p>VADOC Operating Procedure 135.2 states in part that; “Any behavior of a sexual nature between employees, contract employees, or volunteers and inmates, inmate's immediate family, or a close friend of the inmate is prohibited. Behavior of a sexual nature includes sexual abuse, sexual assault, sexual harassment, physical conduct of a sexual nature, sexual obscenity, and conversations or correspondence of an emotional, romantic, or intimate nature. Any contractor or volunteer who engages in sexual abuse of inmates must be prohibited from contact with inmates and must be reported to any relevant licensing bodies by the DOC PREA Coordinator, and to law enforcement agencies, unless the activity was clearly not criminal.”</p> <p>The facility provided a memorandum authored by the GROC Warden stating that there have been no PREA allegations involving contractors or volunteers violating the agency’s sexual abuse or sexual harassment policies during this audit period. During the file review, the Auditor examined the administrative investigation files and confirmed this statement. However, one contractor did resign based on fraternizing with an inmate.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure volunteers or contractors who engage in sexual abuse do not have contact with inmates. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.</p> <p>115.77 Provision (b)</p> |



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|  | <p>VADOC Operating procedure 135.2 states in part that; “The DOC will take appropriate remedial measures and will consider whether to prohibit further contact with inmates, in the case of any other violation of DOC sexual abuse or sexual harassment policies by a contractor or volunteer.” In addition, the facility offered VADOC Operating procedure 027.1 which states in part, “Possible grounds for intern dismissal include failure to comply with DOC procedures, federal or state laws, or unit rules. Every effort should be made to provide appropriate internship training and supervision to help avoid violations and possible termination.”</p> <p>The facility provided a memorandum from the GROC Warden stating that there have been no substantiated cases involving contractors or volunteers violating the agency’s sexual abuse or sexual harassment policies. Also, no volunteer or contractor has been restricted from contact with inmates based on PREA violations during this audit period. However, one contractor did resign based on fraternizing with an inmate.</p> <p>The Auditor interviewed the Assistant Warden, and she indicated that if a contractor or volunteer were accused of violating the agency’s sexual abuse or sexual harassment policy then that individual would be banned from coming to the facility until the investigation was complete. If it were determined that the allegation was substantiated, the contractor or volunteer would no longer have access to the facility and the agency would present the case to the Commonwealth Attorney for prosecution.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to address actions to be taken when a contractor or volunteer violates the agency’s PREA policies but does not engage in sexual abuse of an inmate. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard.</p> |
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| <b>115.78</b> | <b>Disciplinary sanctions for inmates</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <p>a) VADOC Operating Procedure 861.1 Inmate Discipline</p> |

- b) VADOC PREA Operating Procedure 038.3
- c) VADOC Operating Procedure 820.1
- d) VADOC Operating Procedure 830.3
- e) VADOC Operating Procedure 861.1 Attachment 2 Category I Code of Offenses
- f) Two examples of disciplinary offense report regarding incidents of disciplinary sanctions pursuant to a disciplinary violation of inmate-on-inmate sexual abuse at the GROC.

Interviews:

1. Interview with the Assistant Warden
2. Medical & Mental Health Staff

Observations made during the on-site audit and document review.

115.78 Provision (a)

VADOC Operating Procedure 861.1 states in part that; "Inmates will be subject to disciplinary sanctions through a formal disciplinary process following:

An administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse."

The facility has reported that there have been two inmate-on-inmate sexual abuse incidents at the facility that was substantiated during this audit period. Examples of both disciplinary hearings were made available to the Auditor for review in the PAQ.

The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates are subject to disciplinary sanctions following a finding that the inmate engaged in inmate-on-inmate sexual abuse. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

115.78 Provision (b) & (c)

VADOC Operating Procedure 861.1 states in part that; "In determining the appropriate penalty, consideration shall be given to the nature and circumstances of the offense committed, the inmate's disciplinary history, and the penalty imposed for comparable offenses committed by other inmates with similar histories." In addition, Operating Procedure 861.1 states in part that; "Before a Disciplinary Offense Report is served on an inmate assigned to a Mental Health Unit, housed in Restrictive Housing for a mental health reason (e.g. suicide watch), or against an inmate with a Mental Health Code of MH-2S, MH-3, or MH-4 or an inmate who may be cognitively or mentally impaired in general population, the Officer in Charge (OIC) will contact a Psychology Associate to assess the following:

- a. Clinical impressions related to the disciplinary offense
- b. Likelihood of understanding the acceptance of a Penalty Offer
- c. Likelihood of effectively participating in the hearing
- d. Potential impact of Restrictive Housing on inmate's cognitive/ mental condition
- e. Provide relevant comments and/ or recommendations
- f. The OIC will ensure that an 'Inmate Mental Health Assessment' is completed and forwarded to the Hearings Officer along with the Disciplinary Offense Report."

When conducting the interview with the Assistant Warden, she was asked what disciplinary sanctions inmates are subject to following an investigation that found the inmate had engaged in inmate-on-inmate sexual abuse. In addition, is mental illness considered when determining sanctions? The Assistant Warden stated that the inmate would be institutionally charged, to include street charges, but the punishment would be determined on the severity of the violation. The institutional charge could consist of loss of good time, phone, and commissary privileges. The Assistant Warden also stated that the mental illness part would be considered on the front in deciding if the inmate should be charged in the first-place due to his disability.

The evidence collected for these provisions shows that the agency has procedures in place to discipline those inmates who have been found responsible for engaging in inmate-on-inmate sexual abuse. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets these provisions.

#### 115.78 Provision (d)

VADOC Operating Procedure 820.1 states in part that; "At institutions that offer therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for sexually abusive behavior a Psychology Associate should determine if an inmate found guilty of a disciplinary or criminal offense for sexual abuse is required to participate in such interventions as a condition of access to programming or other benefits. Inmates that do not comply with therapy, counseling, or other interventions should be charged with offense code 200 in accordance with Operating Procedure 861.1, Inmate Discipline."

The GROC reported in the Pre-Audit Questionnaire that the facility does provide therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for sexual abuse.

When conducting the interviews with the Medical & Mental Health practitioners, they were asked if the facility offers therapy, counseling, or other intervention services designed to address and correct the underlying reasons for sexual abuse. The HSA stated that it is available through the mental health services. The mental health professional stated that, "Yes, they provide a sexual inmate treatment program as part of the inmate's treatment program called 'Sex Offender Awareness Program

(SOAP).” Both health professionals were asked if these services require an inmate’s participation as a condition of accessing programming and other benefits. The HSA stated that she did not know because that issue would be handled by the mental health professionals. The mental health professional indicated that it would be strongly suggested but could not force any inmate to participate.

The evidence collected for this provision shows that the agency has procedures in place to provide therapy or counseling designed to address and correct reasons or motivations for sexual abuse. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.78 Provision (e)

The GROC provided the Inmate Disciplinary Code as proof of compliance with this provision. VADOC Operating Procedure 861.1, offense code 106, states in part that; “Sexual assault upon or making forcible sexual advances toward a non-inmate and making sexual advances, either physical, verbal in nature, or in writing toward a non-inmate without their consent.” The facility reported no incidents of this nature during this audit period.

The evidence collected for this provision shows that the agency has procedures in place to discipline those inmates who have engaged in sexual abuse against staff members. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

#### 115.78 Provision (f)

VADOC PREA Operating Procedure 038.3 states in part that; “Any inmate who makes a report of inmate-on-inmate sexual violence or staff sexual misconduct or harassment that is determined to be false may be charged with a disciplinary offense if it is determined in consultation with the Regional PREA Analyst that the report was made in bad faith. Staff will not charge inmates for reports of sexual abuse made in good faith, based upon a reasonable belief that the alleged conduct occurred. Even if an investigation does not establish sufficient evidence to substantiate the allegation, reports of sexual abuse made in good faith will not constitute falsely reporting an incident or lying.”

The GROC has reported no instances of inmates making false sexual abuse or sexual harassment allegations where they were disciplined for such action.

The evidence collected for this provision shows that the agency has procedures in place to prohibit those inmates that report sexual abuse or sexual harassment in good faith be disciplined regardless of the investigative findings. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

#### 115.78 Provision (g)

VADOC PREA Operating Procedure 038.3 states in part that; “Consensual sexual activity among inmates is prohibited. Inmates who engage in this type of activity will

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|  | <p>be subject to disciplinary action in accordance with Operating Procedure 861.1, Inmate Discipline.”</p> <p>The evidence collected for this provision shows that the agency has procedures in place to prohibit any type of sexual activity between inmates and will discipline inmates for those activities. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>Recommendation:</p> <p>The Auditor is recommending that the agency add language to their PREA Operating Procedure 038.3 that would address when disciplining an inmate for engaging in consensual sexual activity, the agency may not deem such activity to constitute sexual abuse.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring disciplinary sanction for inmates.</p> |
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| <b>115.81</b> | <b>Medical and mental health screenings; history of sexual abuse</b>   |
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|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 730.2 Mental Health Services</li> <li>b) VADOC Operating Procedure 425.4 Management of Bed &amp; Cell Assignments</li> <li>c) VADOC Operating Procedure 701.3 Health Records</li> <li>d) VADOC Operating Procedure 810.1 Inmate Reception &amp; Classification</li> <li>e) GROC examples of email notifications to mental health</li> <li>f) PREA Mental Health Clinician Follow-up notes and Classification Assessment forms</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Staff Responsible for Risk Screening</li> <li>2. Interviews with Medical &amp; Mental Health Staff</li> </ul> |

3. Interviews with Inmates who disclose Sexual Victimization during Risk Screening

Observations made during the on-site audit and document review.

115.81 Provision (a)

VADOC Operating Procedure 730.2 states in part that; "In institutions, within 14 days of completion of the Classification Assessment, the Psychology Associate will notify those inmates, identified as High-Risk Sexual Aggressor (HRSA) or High-Risk Sexual Victim (HRSV), of the availability for a follow-up meeting with a mental health practitioner and inform the inmate of available relevant treatment and programming. Notification will be documented on the Prison Rape Elimination Act (PREA) Psychology Associate Follow-Up." In addition, VADOC Operating Procedure 810.1 states in part that; "When an inmate indicates they experienced prior sexual victimization or previously perpetrated sexual abuse during the Classification Assessment, whether it occurred in an institutional setting or in the community, the staff member completing the Classification Assessment must offer the inmate a follow up meeting with medical or mental health staff. This information will be communicated to Psychology Associates, health care staff and other staff, only as necessary, to develop treatment plans and make security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. The staff member will place a note in the Comments section of the Classification Assessment documenting that they offered the inmate a meeting along with the inmate's decision to accept or decline the meeting. The staff member will notify the Senior Psychology Associate and appropriate health care staff by email that the inmate's Classification Assessment indicates prior sexual victimization or abuse, that a meeting was offered and the inmate's decision to accept or decline the meeting. If the inmate accepts the meeting, the inmate must be seen within 14 days of the intake screening. Victims of a recent sexual assault will be referred for medical and mental health care and treatment as necessary in accordance with Operating Procedure 038.3, Prison Rape Elimination Act (PREA)."

The facility reported that 100% of the inmates that disclosed prior sexual victimization during this audit period while being interviewed during the screening process were provided a follow up meeting with a mental health professional. The Auditor interviewed three inmates that reported prior sexual victimization. All three inmates reported that mental health services were offered within 14 days of reporting the victimization and two inmates stated that they see mental health professionals on a regular basis. The facility did provide risk screening forms where the inmate reported prior sexual abuse, the email chain notifying mental health, and follow-up meeting documentation by the mental health professional well within the 14-day period. Finally, evidence where the information had been notated in the CORIS system. During the file review, the Auditor was able to observe where the inmates had reported and were referred to mental health services for their 14-day follow-up meeting.

When conducting the interview with the staff member who is responsible for risk

screening, she stated that if an inmate discloses prior sexual victimization during the risk screening process, then a 14-day follow-up meeting would occur.

The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates that report prior sexual victimization are offered a follow-up meeting with medical or mental health professionals within 14 days of intake. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it does meet this provision.

#### 115.81 Provision (b)

VADOC Operating Procedure 730.2 states in part that; "In institutions, within 14 days of completion of the Classification Assessment, the Psychology Associate will notify those inmates, identified as High-Risk Sexual Aggressor (HRSA) or High-Risk Sexual Victim (HRSV), of the availability for a follow-up meeting with a mental health practitioner and inform the inmate of available relevant treatment and programming. Notification will be documented on the Prison Rape Elimination Act (PREA) Psychology Associate Follow-Up."

When conducting the interview with the staff member who is responsible for risk screening, she stated that if an inmate reports perpetrating prior sexual abuse during the risk screening process, a 14-day follow-up meeting with mental health services would occur, but the meetings usually take place within 36 to 48 hours. The facility reported no instances during this audit period where any inmate disclosed perpetrating prior sexual abuse during the screening process. The mental health professional was also asked if during a risk screening an inmate indicates that he has previously perpetrated sexual abuse then is a follow-up meeting offered. The mental health professional confirmed that it is and usually happens within two days.

The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates that have perpetrated sexual abuse are offered a follow-up meeting with mental health professionals within 14 days of intake. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it does meet this provision.

#### 115.81 Provision (d)

VADOC Operating Procedure 425.4 states in part that; "Any information related to an inmate's sexual victimization or abusiveness that occurred in an institutional setting will be strictly limited to health care practitioners and other staff, as necessary, to make appropriate housing and bed assignments, or as otherwise required by Federal, State, or local law." In addition, VADOC Operating Procedure 730.2 states in part that; "Any information related to sexual victimization or abusiveness that occurred in an institutional setting will be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law."

The evidence collected for this provision shows that the agency has procedures in

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|  | <p>place to ensure that reported sexual victimization that occurred in a confinement setting is strictly limited to selected professionals. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>115.81 Provision (e)</p> <p>VADOC Operating Procedure 701.3 states in part that; “Medical and mental health practitioners must obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.”</p> <p>The medical and mental health professionals were asked if they obtain informed consent from inmates before reporting about prior sexual victimization. In addition, both were asked how they would handle inmates under the age of 18 years old. The HSA stated that they would ask for consent and document that on the agency’s Consent for Release of Confidential Health and Mental Health Information form. The HSA also stated that the GROC doesn’t house juveniles and therefore never experienced that situation. However, the HSA knew that if the situation involved a vulnerable adult, then she would notify the authorities. The mental health professional also stated that no juveniles are housed in GROC but did mention that she has a duty to report because of the Virginia mandatory reporting laws.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure informed consent is obtained from inmates before medical and mental health staff can report those incidents if the sexual victimization does not occur in a confinement setting. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring a medical and mental health screening, history of sexual abuse.</p> |
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| <b>115.82</b> | <b>Access to emergency medical and mental health services</b>   |
|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 720.7 Emergency Medical Equipment &amp; Care</li> <li>b) VADOC Operating Procedure 730.2 Mental Health Services</li> </ul> |



- c) VADOC Operating Procedure 720.4 Co-Payment for Health Care Services
- d) Six GROC Sexual Assault Check Lists
- e) One GROC Sexual Assault Assessment
- f) Two Health Services Complaint & Treatment Forms

Interviews:

1. Interview with Staff Responsible for Risk Screening
2. Interviews with Medical & Mental Health Staff
3. Interview with Staff First Responder

Observations made during the on-site audit and document review.

115.82 Provision (a)

VADOC Operating Procedure 720.7 states in part that; "Inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment."

The medical and mental health professionals were interviewed and asked if inmate victims of sexual abuse receive immediate and unimpeded emergency medical care and both professionals answered that they do. In addition, the HSA stated that the nature and scope of the treatment is at the discretion of the attending physician at the emergency room. However, the HSA's responsibility is the continuity of care and follow all the physician's orders. The mental health professional stated that she determines the level of care required and that there is always mental health staff on call. Therefore, mental health services are available if needed in emergency situations.

The three inmates interviewed that reported sexual abuse was asked if medical or mental health services were offered at the time of the sexual abuse allegation. All three inmates indicated that they were offered medical and mental health services.

The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates that report prior sexual victimization receive timely unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

115.82 Provision (b)

VADOC Operating Procedure 720.7 states in part that; "If no qualified medical and mental health practitioners are on duty at the time a report of recent abuse is made,

security staff first responders will take preliminary steps to protect the inmate victim and will immediately notify the appropriate medical and mental health practitioners.”

When the Auditor spoke with the PCM, he advised the Auditor that nursing staff is assigned to the facility 24-hours a day/seven days a week. Therefore, medical attention is always available at the GROC.

Interviews were conducted with 12 random staff and of those staff interviewed; all 12 staff members stated that they would immediately remove the inmate from the situation, block, or housing unit. When interviewing a first responder he explained that he would make the scene safe, report to a supervisor, preserve evidence, contact medical personnel, write a report, and protect the crime scene.

The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates that report sexual abuse are offered immediate medical and mental health services when no qualified medical and mental health personnel is available. Therefore, through policy and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.82 Provision (c)

VADOC Operating Procedure 720.7 states in part that; “Inmate victims of sexual abuse while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.”

The GROC utilizes the services provided by the Gretna Medical Center Forensics Unit to provide these services. The interview with the SANE Nurse specifically outlined that the Gretna Medical Center will offer information, timely access to emergency contraception, and sexually transmitted infections prophylaxis.

When conducting interviews with medical and mental health staff it was indicated that, “Yes, the SANE Nurse at the Gretna Medical Center would offer those services.”

During the interviews with the three inmates that reported sexual abuse, none were taken to the hospital to receive any testing or medication given their allegations. However, the GROC did have an incident that required a medical forensic examination and provided a copy of the Sexual Assault Assessment as evidence of the examination being completed.

The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates are offered information and access to emergency contraception and sexually transmitted infections prophylaxis after allegations of sexual abuse. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.82 Provision (d)

VADOC Operating Procedure 720.7 states in part that; “Treatment services will be

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|  | <p>provided to the victim without financial cost and regardless of whether the inmate victim names the abuser or cooperates with any investigation arising out of the incident.”</p> <p>The inmates interviewed who reported sexual abuse were not taken outside the facility for any treatment and therefore did not incur any financial cost associated with their allegations.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates that report sexual abuse do not incur any financial responsibility due to a sexual abuse allegation. Therefore, through written policy the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring access to emergency medical and mental health services.</p> |
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| <b>115.83</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>   |
|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 720.7 Emergency Medical Equipment and Care</li> <li>b) VADOC Operating Procedure 730.2 Mental Health Services</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interviews with Medical &amp; Mental Health Staff</li> <li>2. Interview with Inmate who reported a Sexual Abuse</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.83 Provision (a) &amp; (b)</p> <p>VADOC Operating Procedure 720.7 states in part that; “The facility will offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The evaluation and treatment of such inmate victims will include, as appropriate, follow-</p> |

up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. The facility will provide such inmate victims with medical and mental health services consistent with the community level of care.”

The interviews conducted revealed that medical staff would not take the lead on treatment and would consult with the SANE Nurse or an attending physician. The HSA stated that the treatment should be individualized based on the type of injury and that the nurse and attending doctor would determine that and their job is the continuity of care. The mental health professional stated that appointments would be made with the VADOC mental health services, and if the inmate was released, arrangements could be made with the local Community Service Board (CSB) to provide mental health services if the inmate requested.

When interviewing those inmates that reported sexual abuse, they were not asked about follow-up services, treatment plans, or referrals for continued care because it was deemed their allegations of sexual abuse did not rise to that level of services.

The evidence collected for this provision shows that the agency has procedures in place to ensure the facility offer medical and mental health evaluation and treatment to all inmates who have been sexually victimized. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets these provisions.

#### 115.83 Provision (c)

VADOC employs medical professionals that must be licensed and registered to practice in the state of Virginia. These licenses must be maintained to continue employment. The mental health professionals are employed by the Virginia Department of Corrections. For the purpose of this standard, the agency mental health professional also stated that, “Yes, the services offered are consistent with those in the community.” Both the medical and mental health services provided by the GROC are consistent with the community level of care.

An interview was conducted with both the medical & mental health staff. Both interviews revealed that they believe that the medical service is consistent with those of the community.

The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates receive medical and mental health services consistent with the community level of care. Therefore, through interviews conducted the facility has demonstrated that it meets this provision.

#### 115.83 Provision (d) & (e)

VADOC Operating Procedure 720.7 states in part that; “Inmate victims of sexually abusive vaginal penetration while incarcerated will be offered pregnancy tests. If pregnancy results from the conduct described in paragraph (d) of this section, such inmate victims will receive timely and comprehensive information about and timely

access to all lawful pregnancy-related medical services.”

When conducting an interview with the HSA, she replied that the GROC is an all-male facility. In addition, the HSA indicated that, “Yes, a positive pregnancy result from an inmate female victim would receive timely information about access to all lawful pregnancy related services and those services would be provided as soon as possible.”

The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates that are victims of vaginal penetration are offered pregnancy tests along with timely information about access to all lawful pregnancy-related medical services. However, the GROC is an all-male facility. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that this provision is not applicable.

#### 115.83 Provisions (f) & (g)

VADOC Operating Procedure 720.7 states in part that; “Inmate victims of sexual abuse while incarcerated will be offered tests for sexually transmitted infections as medically appropriate. Treatment services will be provided to the inmate victim without financial cost and regardless of whether the inmate victim names the abuser or cooperates with any investigation arising out of the incident.”

The Auditor interviewed three inmates that reported sexual abuse. All inmates reported that they were not transported to a hospital where they would have received testing for sexually transmitted infections due to the alleged incident. All three inmates indicated that there was no financial cost to them related to any services provided.

The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates that are victims of sexual abuse are offered tests for sexually transmitted infections as appropriate. Therefore, through written policy, the facility has demonstrated that it meets this provision.

#### 115.83 Provision (h)

VADOC Operating Procedure 730.2 states in part that; “Psychology Associates will attempt to conduct a mental health evaluation of all known inmate -on- inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate. Other than routine monitoring (e.g., in Restorative Housing Unit), mental health and wellness services are not automatically offered to the alleged/founded perpetrator of the sexual assault. If mental health services are provided, e.g., if the alleged/founded perpetrator requests such services, a Psychology Associate other than the Psychology Associate who assessed and/or provided services to the alleged/founded victim of the assault should follow up.”

During the interview with the mental health professional, she was asked if they would conduct an interview with all inmate-on-inmate abusers and offer treatment if appropriate and when would these interviews be conducted. The mental health

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|  | <p>professional indicated that, “Yes, interviews would be conducted, and they would more than likely occur as soon as possible. However, if the inmate was transferred to a different facility then the interview would occur within 14 working days.” The HSA was interviewed and stated that this responsibility would fall on the mental health staff.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning such abuse history. Therefore, through written policy the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring ongoing medical and mental health care for sexual abuse victims and abusers.</p> |
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| <b>115.86</b> | <b>Sexual abuse incident reviews</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 038.1 Reporting Serious Incidents</li> <li>c) PREA Incident Review Reports</li> <li>d) Memorandum from PREA Coordinator regarding Corrective Action</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with the Assistant Warden</li> <li>2. Interview with the PREA Coordinator</li> <li>3. Interview with the Incident Review Team Member</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.86 Provision (a) &amp; (b)</p> <p>VADOC Operating Procedure 038.1 states in part that; “A sexual abuse incident review (PREA Report of Incident Review) shall be conducted at the conclusion of every sexual</p> |

abuse investigation including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. The review for sexual abuse and sexual harassment shall be conducted within 14 days of completion of the investigation on a PREA Report of Incident Review. The PREA Compliance Manager will forward the PREA Report of Incident Review to the Regional PREA Analyst for review and approval, prior to submission to the Regional Office.”

The GROC has reported 8 incidents of inmate sexual abuse requiring an Incident Review at the time of completing the PAQ. The facility has provided copies of those PREA Report of Incident Review forms. The forms list who was in attendance, the date the review took place, summary of the incident, review of the considerations and factors, and any proposed action plan. In addition, the Auditor reviewed eleven investigative files, and of those files that were reviewed, seven contained evidence of the incident reviews being completed. Out of those seven files, five files showed the review occurred outside the 30-day time period. The most recent two incident reviews occurred within the 30-day timeframe in accordance with this standard.

The facility provided a memorandum dated 01/30/2024, written by the PREA Coordinator regarding a self-initiated corrective action plan. During the preparation and review for the upcoming PREA audit the PREA Coordinator recognized that several Incident Reviews were missing or late in accordance with the VADOC PREA Policy 038.3. The VADOC policy requires all Incident Reviews be conducted within 14 days of the completion of the investigation. The policy also requires all substantiated sexual harassment cases receive an Incident Review. The facility was immediately required to complete the outstanding Incident Reviews and a corrective action plan was installed to help prevent any further future incidents. Because this issue was immediately addressed and dealt with by the PREA Coordinator in a satisfactory manner, the PREA Auditor is confident that this issue has been corrected and resolved to the Auditor’s satisfaction.

The evidence collected for these provisions shows that the agency has procedures in place to ensure that an incident review is conducted after every sexual abuse investigation excluding those that are unfounded. In addition, the incident review shall occur within 30 days of the conclusion of the investigation. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

#### 115.86 Provision (c)

VADOC Operating Procedure 038.1 states in part that; “The Incident Review Team shall consist of at least one Administrative Duty Officer who will solicit input from the PREA Compliance Manager, line supervisors, investigators, and medical or mental health practitioners for all sexual abuse and harassment incident reviews.”

The 7 PREA Incident Review documents examined by the Auditor listed multiple occupational authorities such as the Assistant Warden, PCM, Facility Investigator, Lieutenant, and mental health staff.

In the interview with the Assistant Warden, she was asked who is part of the sexual

abuse incident review team? The Assistant Warden stated that the team is made up of the Warden, Assistant Warden, PCM, medical staff, mental health staff, and the investigator.

The evidence collected for this provision shows that the agency has procedures in place to ensure that the review team is made up of upper-level management, supervisors, investigators, and medical/mental health staff. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.86 Provision (d) & (e)

VADOC Operating Procedure 038.1 states in part that; "The review must provide a summary of the incident; clarify the original Incident Report or Internal Incident Report, as needed. Provide an analysis of the causal factors and contributing circumstances.

- i. Was the incident or allegation motivated by race, ethnicity, gender identity; lesbian, gay, bisexual, transgender or intersex identification, status, or perceived status; or gang affiliation, or was it motivated or otherwise caused by other group dynamics at the facility.
- ii. Assess the adequacy of staffing in that area during different shifts.
- iii. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.
- iv. Determine what can be done to limit the occurrence or reduce the severity of future incidents; consider whether there was a proper application of current procedure, practice, staffing and/ or training; or whether there is a need to revise the current procedure, practice, staffing, and/ or training.
- v. Examine the area where the incident allegedly occurred to assess whether physical barriers in the area may have contributed to the incident.

Determine what can be done to limit the occurrence or reduce the severity of future incidents; consider whether there was a proper application of current procedure, practice, staffing and/or training; or whether there is a need to revise the current procedure, practice, staffing, and/or training. Develop an Action Plan to limit or mitigate similar future incidents. The unit shall implement the recommendations for improvement or shall document its reasons for not doing so."

The Sexual Abuse Incident Review documents that were reviewed by the Auditor has those factors listed on the form to specifically discuss. In addition, the files reviewed by the Auditor contained recommendations to continue to stress the VADOC policy of Zero-Tolerance, security staff reminded daily in muster to make rounds and be observant of possible PREA violations and limit the number of inmates allowed in the restroom that is located in the Department of Education wing.

Interviews with the Assistant Warden, Incident Review Team Member, and PREA



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|  | <p>Compliance Manager all revealed that these topics are considered and discussed during the review. The facility forwards all incident review documentation to the PREA Regional Analyst for review.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that the incident review team considers all the above-listed criteria when convening their meetings. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring sexual abuse incident reviews.</p> |
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| <b>115.87</b> | <b>Data collection</b>   |
|               | <b>Auditor Overall Determination:</b> Meets Standard   |
|               | <b>Auditor Discussion</b>  |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC PREA Annual Reports 2020-2022</li> <li>c) Bureau of Justice Statistics Survey 2020-2022</li> </ul> <p>Interviews:</p> <p>Observations made during the on-site audit and document review.</p> <p>115.87 Provision (a)</p> <p>VADOC Operating Procedure 038.3 states in part that; “The DOC collects accurate, uniform data on every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.”</p> <p>The facility has provided the last three years’ worth of PREA aggregated data in their PREA annual reports and three years’ worth of Bureau of Justice Statistics surveys. The 2022 PREA annual report contains comparisons of the current year’s data and corrective actions from the previous years’ assessment of the agency’s progress.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to collect accurate uniform data for every allegation of sexual abuse. The data</p> |

collected is used to complete the federal mandated Survey of Sexual Violence questionnaire. Therefore, through written policy and document review, the facility has demonstrated that it meets these provisions.

#### 115.87 Provision (b)

VADOC Operating Procedure 038.3 states in part that; “The agency aggregates the incident-based sexual abuse data at least annually.”

The facility has provided the last three years’ worth of PREA aggregated data in their annual reports. The 2022 PREA annual report contains comparisons of the current year’s data and corrective actions from the previous years’ assessment of the agency’s progress.

The evidence collected for this provision shows that the agency has procedures in place to ensure that the facility will aggregate the incident based sexual abuse data annually. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

#### 115.87 Provision (c)

VADOC Operating Procedure 038.3 states in part that; “The incident-based data collected includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.”

The facility has provided the last three years’ worth of PREA aggregated data in their BJS Survey of Sexual Victimization forms provided to the Department of Justice.

The evidence collected for this provision shows that the agency has procedures in place to collect accurate uniform data for every allegation of sexual abuse. The data collected is used to complete the federal mandated Survey of Sexual Violence questionnaire. Therefore, through written policy and document review, the facility has demonstrated that it meets these provisions.

#### 115.87 Provision (d)

VADOC Operating Procedure 038.3 states in part that; “The DOC maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.”

The evidence collected for this provision shows that the agency has procedures in place to maintain, review, and collect data needed from all incident-based documents. The agency then collects all the data from each correctional facility in order to develop the agency’s annual report. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

#### 115.87 Provision (e)

VADOC Operating Procedure 038.3 states in part that; “Incident-based and aggregated data is collected from every private facility with which with the DOC

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|  | <p>contracts for the confinement of inmates.”</p> <p>The facility has provided the last three years’ worth of PREA aggregated data in their annual reports. The 2022 PREA annual report contains comparisons of the current year’s data and corrective actions from the previous years’ assessment of the agency’s progress. In addition, the facility has provided copies of their agency’s last three years’ worth of BJS Survey of Sexual Victimization forms provided to the Department of Justice. The agency collects all the data from each correctional facility in order to develop the agency’s annual report. This includes the Lawrenceville Correctional Center which is the only correctional facility that is privately contracted to hold DOC inmates in the state of Virginia.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>115.87 Provision (f)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “Upon request, all such data from the previous calendar year will be provided to the Department of Justice no later than June 30.”</p> <p>The facility has provided copies of their agency’s last three years’ worth of BJS Survey of Sexual Victimization forms provided to the Department of Justice.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to submit their annual SSV report to the Department of Justice. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring Data Collection.</p> |
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| <b>115.88</b> | <b>Data review for corrective action</b>  |
|               | <b>Auditor Overall Determination:</b> Meets Standard  |
|               | <b>Auditor Discussion</b>   |
|               | <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> |

- a) VADOC PREA Operating Procedure 038.3
- b) Copies of the VADOC 2020 thru 2022 PREA Annual Reports
- c) The VADOC Official Website

Interviews:

- 1. Interview with Agency Head
- 2. Interview with PREA Coordinator
- 3. Interview with PREA Compliance Manager

Observations made during the on-site audit and document review.

115.88 Provision (a)

VADOC PREA Operating Procedure 038.3 states in part that; “The DOC reviews collected and aggregated data in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, by:

- a. Identifying problem areas.
- b. Taking corrective action on an ongoing basis.
- c. Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.”

The facility has provided the last three years of their PREA Annual Reports as evidence to support compliance with this provision. The reports include all the above elements outlined in this provision, specifically, under the corrective action and summary comparison portions of the annual reports.

Interviews conducted with the Agency Head and PREA Coordinator confirmed that an annual report is generated to assess and improve the effectiveness of the agency’s prevention, detection, and response to sexual abuse. The PREA Compliance Manager stated that the report is used for recommendations and corrective action. That is so if you see a trend, it can be addressed by the agency such as where are the incidents occurring, when the allegations occur, and what are the needs of the facility.

The evidence collected for this provision shows that the agency has procedures in place to review data collected to better assess and improve the effectiveness of its sexual abuse policies. Therefore, through written reports, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

115.88 Provision (b)

VADOC PREA Operating Procedure 038.3 states in part that; “The annual report will include a comparison of the current year’s data and corrective actions with those from prior years and must provide an assessment of the DOC’s progress in addressing

sexual abuse.”

The VADOC PREA Annual reports are compared by institution and region. This includes a comparison of the current year’s data and corrective actions with those from prior years and provides an assessment of the agency’s progress in addressing sexual abuse. The 2022 VADOC PREA Annual Report makes comparisons for Inmate-on-Inmate Allegations of Sexual Abuse from 2021 to 2020 and Staff Sexual Misconduct from 2021 to 2022.

The facility has provided the last three years’ worth of PREA annual reports containing comparisons of the current year’s data and corrective actions from the previous year’s assessment of the agency’s progress.

The evidence collected for this provision shows that the agency has procedures in place to ensure that the facilities provide prior year comparisons in its yearly PREA annual report. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

#### 115.88 Provision (c)

VADOC PREA Operating Procedure 038.3 states in part that; “The report must be made readily available to the public through the DOC Public website. The PREA/ADA Supervisor and the Director must review and approve the annual report before publicly posting it.”

The facility has posted the last nine years of sexual safety statistics in their PREA Annual Reports located on their website. This is a public website that provides access to those reports. When interviewing the Agency Head, he stated that, “Yes, he the Director approves all PREA Annual Reports before being published on the agency website.” The annual reports are signed by both the PREA/ADA Coordinator and the Director of VADOC.

The evidence collected for this provision shows that the agency has procedures in place to make the PREA Annual Report public by posting it to their website and that the Director must have final approval. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.88 Provision (d)

VADOC PREA Operating Procedure 038.3 states in part that; “Staff may redact specific material from the annual reports, when publication of the material would present a clear and specific threat to the safety and security of a facility. If material is redacted, staff must indicate the nature of the redacted material.”

The facility reported that the only information redacted from the annual reports are the names of the individuals involved and that there has been no material redacted. The PREA Coordinator stated during her interview that only personal identifiers and threats to safety and security would be the only reasons to redact information from the PREA Annual Report.

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|  | <p>The evidence collected for this provision shows that the agency has procedures in place to redact only specific information from the PREA Annual Report. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring Data Review for corrective action.</p> |
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| <b>115.89</b> | <b>Data storage, publication, and destruction</b>   |
|               | <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC 2020 -2022 PREA Annual Report</li> <li>c) The VADOC Official Website</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with PREA Coordinator</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.89 Provision (a)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “Staff must securely retain all data collected on allegations of sexual abuse at DOC facilities.”</p> <p>The PREA Coordinator was interviewed and asked how the agency ensures that the data collected is securely retained. The PREA Coordinator stated that all PREA-related information is stored in a secure database called VACORIS. Access to this information is on a need-to-know basis. She also stated that the permissions are limited to your job description.</p> <p>The evidence collected for this provision shows that the agency has a procedure in place to secure collected data regarding sexual abuse allegations. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.</p> |

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|  | <p>115.89 Provision (b) &amp;(c)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “Staff will make sexual abuse aggregated data, from DOC facilities and contract facilities readily available to the public at least annually through the DOC Public website. Before making aggregated sexual abuse data publicly available, all personal identifiers must be removed.”</p> <p>The agency has posted the 2014 through 2022 PREA Annual Reports on their website. This is a public website that provides access to this report. This report can be viewed by going to the agency’s website.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to make the PREA Annual Report public by posting it to their website and that all personal identifiers are redacted prior to publication. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>115.89 Provision (d)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “Staff must maintain all sexual abuse data for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.”</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure sexual abuse data is retained for at least 10 years after the date of the initial collection. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring data storage, publication, and destruction.</p> |
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| <b>115.401</b> | <b>Frequency and scope of audits</b>   |
|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>PREA Standard 115.401 Frequency and Scope of Audits</p> <p>Provisions (a)(b)(h)(i)(m)(n)</p> <p>This is Green Rock Correctional Center’s fourth PREA Audit. The initial audit was conducted on December 20, 2014. In FY 2021, the facility met 44 PREA standards, exceeded 1 standard, and 0 standards were not applicable. Each facility under the</p> |

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|  | <p>direct control of the Virginia Department of Corrections has been audited at least once during the previous three-year audit cycle. During the previous three-year audit cycle, the Virginia Department of Corrections ensured that at least one-third of its facilities were audited each year. This is the fourth year of an audit cycle. During the first year of this cycle, the Virginia Department of Corrections ensured at least one third of its facilities were audited. Green Rock Correctional Center was last audited on May 3, 2021.</p> <p>The Auditor was given full access to and observed all areas of the facility without obstruction. The Auditor received all requested documents or copies of relevant materials. The Auditor was also permitted to conduct all interviews in a private setting with both inmates and staff. Finally, the inmates were permitted to send the Auditor confidential correspondence in the same manner that legal mail would be handled. This topic was discussed and documented prior to the audit. The Auditor did receive two inmate correspondences during this PREA audit and the Auditor interviewed both inmates while conducting the on-site portion of the audit.</p> |
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| <b>115.403</b> | <b>Audit contents and findings</b>   |
|                | <b>Auditor Overall Determination:</b> Meets Standard   |
|                | <b>Auditor Discussion</b>  |
|                | <p>PREA Standard 115.403 Audit Contents and Findings</p> <p>Provision (f)</p> <p>The Green Rock Correctional Center, which is a correctional facility, operated by the Virginia Department of Corrections has posted the facility's 2021 PREA Auditor's Summary report on their agency website. The agency publishes all facility PREA audits on their website and schedules one-third of their facilities be PREA audited every three years. Therefore, evidence would suggest that this would happen once again after receiving the 2024 PREA audit final report for the Green Rock Correctional Center.</p> |



| <b>Appendix: Provision Findings</b> |   |     |
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| <b>115.11 (a)</b>                   | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>   |     |
|                                     | Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?  | yes |
|                                     | Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?   | yes |
| <b>115.11 (b)</b>                   | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>   |     |
|                                     | Has the agency employed or designated an agency-wide PREA Coordinator?  | yes |
|                                     | Is the PREA Coordinator position in the upper-level of the agency hierarchy?  | yes |
|                                     | Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?  | yes |
| <b>115.11 (c)</b>                   | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>   |     |
|                                     | If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)   | yes |
|                                     | Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)   | yes |
| <b>115.12 (a)</b>                   | <b>Contracting with other entities for the confinement of inmates</b>   |     |
|                                     | If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | yes |
| <b>115.12 (b)</b>                   | <b>Contracting with other entities for the confinement of inmates</b>   |     |
|                                     | Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure   | yes |

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|                   | that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)   |     |
| <b>115.13 (a)</b> | <b>Supervision and monitoring</b>   |     |
|                   | Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?  | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)? | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?  | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?  | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into   | yes |

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|                   | consideration: Any applicable State or local laws, regulations, or standards?   |     |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?   | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?  | yes |
| <b>115.13 (b)</b> | <b>Supervision and monitoring</b>   |     |
|                   | In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)  | yes |
| <b>115.13 (c)</b> | <b>Supervision and monitoring</b>   |     |
|                   | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?                     | yes |
|                   | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?     | yes |
|                   | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? | yes |
| <b>115.13 (d)</b> | <b>Supervision and monitoring</b>   |     |
|                   | Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?                                      | yes |
|                   | Is this policy and practice implemented for night shifts as well as day shifts?   | yes |
|                   | Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?                            | yes |

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| <b>115.14 (a)</b> | <b>Youthful inmates</b>   |     |
|                   | Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na  |
| <b>115.14 (b)</b> | <b>Youthful inmates</b>   |     |
|                   | In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)   | na  |
|                   | In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)  | na  |
| <b>115.14 (c)</b> | <b>Youthful inmates</b>   |     |
|                   | Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)   | na  |
|                   | Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)  | na  |
|                   | Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)  | na  |
| <b>115.15 (a)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?   | yes |
| <b>115.15 (b)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)   | yes |
|                   | Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the  | yes |

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|                   | facility does not have female inmates.)   |     |
| <b>115.15 (c)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  | yes |
|                   | Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?   | na  |
| <b>115.15 (d)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?   | yes |
|                   | Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? | yes |
|                   | Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?   | yes |
| <b>115.15 (e)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?  | yes |
|                   | If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?          | yes |
| <b>115.15 (f)</b> | <b>Limits to cross-gender viewing and searches</b>  |     |
|                   | Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?   | yes |
|                   | Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?   | yes |

| <b>115.16 (a)</b> | <b>Inmates with disabilities and inmates who are limited English proficient</b>  |     |
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|                   | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?                           | yes |
|                   | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?                          | yes |
|                   | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?                        | yes |
|                   | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?                         | yes |
|                   | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?                              | yes |
|                   | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.) | yes |
|                   | Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?  | yes |
|                   | Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?   | yes |
|                   | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication   | yes |

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|                   | with inmates with disabilities including inmates who: Have intellectual disabilities?   |     |
|                   | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?   | yes |
|                   | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?  | yes |
| <b>115.16 (b)</b> | <b>Inmates with disabilities and inmates who are limited English proficient</b>   |     |
|                   | Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?   | yes |
|                   | Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?  | yes |
| <b>115.16 (c)</b> | <b>Inmates with disabilities and inmates who are limited English proficient</b>   |     |
|                   | Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? | yes |
| <b>115.17 (a)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?   | yes |
|                   | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?                                | yes |
|                   | Does the agency prohibit the hiring or promotion of anyone who  | yes |

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|                   | may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?   |     |
|                   | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?   | yes |
|                   | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?  | yes |
|                   | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?   | yes |
| <b>115.17 (b)</b> | <b>Hiring and promotion decisions</b>  |     |
|                   | Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?  | yes |
|                   | Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?   | yes |
| <b>115.17 (c)</b> | <b>Hiring and promotion decisions</b>  |     |
|                   | Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?  | yes |
|                   | Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? | yes |
| <b>115.17 (d)</b> | <b>Hiring and promotion decisions</b>  |     |
|                   | Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?   | yes |



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| <b>115.17 (e)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?  | yes |
| <b>115.17 (f)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?  | yes |
|                   | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?   | yes |
|                   | Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?  | yes |
| <b>115.17 (g)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?   | yes |
| <b>115.17 (h)</b> | <b>Hiring and promotion decisions</b>   |     |
|                   | Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)  | yes |
| <b>115.18 (a)</b> | <b>Upgrades to facilities and technologies</b>  |     |
|                   | If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.) | na  |
| <b>115.18 (b)</b> | <b>Upgrades to facilities and technologies</b>  |     |

|                   |  |     |
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|                   | If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)                  | na  |
| <b>115.21 (a)</b> | <b>Evidence protocol and forensic medical examinations</b>   |     |
|                   | If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  | yes |
| <b>115.21 (b)</b> | <b>Evidence protocol and forensic medical examinations</b>   |     |
|                   | Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  | yes |
|                   | Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |
| <b>115.21 (c)</b> | <b>Evidence protocol and forensic medical examinations</b>   |     |
|                   | Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?  | yes |
|                   | Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?   | yes |
|                   | If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?   | yes |

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|                   | Has the agency documented its efforts to provide SAFEs or SANEs?  | yes |
| <b>115.21 (d)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  | yes |
|                   | If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)   | yes |
|                   | Has the agency documented its efforts to secure services from rape crisis centers?  | yes |
| <b>115.21 (e)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?   | yes |
|                   | As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?  | yes |
| <b>115.21 (f)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)  | na  |
| <b>115.21 (h)</b> | <b>Evidence protocol and forensic medical examinations</b>  |     |
|                   | If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.) | na  |
| <b>115.22 (a)</b> | <b>Policies to ensure referrals of allegations for investigations</b>   |     |

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|                   | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?   | yes |
|                   | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?  | yes |
| <b>115.22 (b)</b> | <b>Policies to ensure referrals of allegations for investigations</b>  |     |
|                   | Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? | yes |
|                   | Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  | yes |
|                   | Does the agency document all such referrals?   | yes |
| <b>115.22 (c)</b> | <b>Policies to ensure referrals of allegations for investigations</b>  |     |
|                   | If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)                                 | na  |
| <b>115.31 (a)</b> | <b>Employee training</b>   |     |
|                   | Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?   | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?   | yes |
|                   | Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?  | yes |
|                   | Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?  | yes |
|                   | Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  | yes |

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|                   | Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?   | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?   | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?  | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?   | yes |
| <b>115.31 (b)</b> | <b>Employee training</b>   |     |
|                   | Is such training tailored to the gender of the inmates at the employee's facility?   | yes |
|                   | Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?  | yes |
| <b>115.31 (c)</b> | <b>Employee training</b>   |     |
|                   | Have all current employees who may have contact with inmates received such training?   | yes |
|                   | Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?                                   | yes |
|                   | In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?   | yes |
| <b>115.31 (d)</b> | <b>Employee training</b>   |     |
|                   | Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?  | yes |
| <b>115.32 (a)</b> | <b>Volunteer and contractor training</b>   |     |

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|                   | Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?   | yes |
| <b>115.32 (b)</b> | <b>Volunteer and contractor training</b>  |     |
|                   | Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? | yes |
| <b>115.32 (c)</b> | <b>Volunteer and contractor training</b>  |     |
|                   | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?   | yes |
| <b>115.33 (a)</b> | <b>Inmate education</b>   |     |
|                   | During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?   | yes |
|                   | During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?  | yes |
| <b>115.33 (b)</b> | <b>Inmate education</b>   |     |
|                   | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?  | yes |
|                   | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?  | yes |
|                   | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?  | yes |
| <b>115.33 (c)</b> | <b>Inmate education</b>   |     |
|                   | Have all inmates received the comprehensive education referenced in 115.33(b)?  | yes |

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|                   | Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?  | yes |
| <b>115.33 (d)</b> | <b>Inmate education</b>   |     |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?   | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?   | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?  | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?   | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?  | yes |
| <b>115.33 (e)</b> | <b>Inmate education</b>   |     |
|                   | Does the agency maintain documentation of inmate participation in these education sessions?   | yes |
| <b>115.33 (f)</b> | <b>Inmate education</b>   |     |
|                   | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?   | yes |
| <b>115.34 (a)</b> | <b>Specialized training: Investigations</b>   |     |
|                   | In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |
| <b>115.34 (b)</b> | <b>Specialized training: Investigations</b>   |     |
|                   | Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  | yes |
|                   | Does this specialized training include proper use of Miranda and  | yes |

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|                   | Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)   |     |
|                   | Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  | yes |
|                   | Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)   | yes |
| <b>115.34 (c)</b> | <b>Specialized training: Investigations</b>   |     |
|                   | Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  | yes |
| <b>115.35 (a)</b> | <b>Specialized training: Medical and mental health care</b>   |     |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)                           | yes |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  | yes |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or   | yes |



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|                   | suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)   |     |
| <b>115.35 (b)</b> | <b>Specialized training: Medical and mental health care</b>  |     |
|                   | If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)   | na  |
| <b>115.35 (c)</b> | <b>Specialized training: Medical and mental health care</b>  |     |
|                   | Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
| <b>115.35 (d)</b> | <b>Specialized training: Medical and mental health care</b>  |     |
|                   | Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)   | yes |
|                   | Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)  | yes |
| <b>115.41 (a)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?   | yes |
|                   | Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?  | yes |
| <b>115.41 (b)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Do intake screenings ordinarily take place within 72 hours of arrival at the facility?   | yes |
| <b>115.41 (c)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Are all PREA screening assessments conducted using an objective  | yes |

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|                   | screening instrument?  |     |
| <b>115.41 (d)</b> | <b>Screening for risk of victimization and abusiveness</b>   |     |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)  | yes |

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|                   | Whether the inmate is detained solely for civil immigration purposes?   |     |
| <b>115.41 (e)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?   | yes |
|                   | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?   | yes |
|                   | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?  | yes |
| <b>115.41 (f)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? | yes |
| <b>115.41 (g)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | Does the facility reassess an inmate's risk level when warranted due to a referral?   | yes |
|                   | Does the facility reassess an inmate's risk level when warranted due to a request?  | yes |
|                   | Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?  | yes |
|                   | Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?   | yes |
| <b>115.41 (h)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?   | yes |
| <b>115.41 (i)</b> | <b>Screening for risk of victimization and abusiveness</b>  |     |
|                   | Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive  | yes |

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|  | information is not exploited to the inmate's detriment by staff or other inmates?  |     |
| <b>115.42 (a) Use of screening information</b> |  |     |
|  | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?   | yes |
|  | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?   | yes |
|  | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?  | yes |
|  | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?   | yes |
|  | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?   | yes |
| <b>115.42 (b) Use of screening information</b> |  |     |
|  | Does the agency make individualized determinations about how to ensure the safety of each inmate?  | yes |
| <b>115.42 (c) Use of screening information</b> |  |     |
|  | When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? | yes |
|  | When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would  | yes |

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|                   | present management or security problems?   |     |
| <b>115.42 (d)</b> | <b>Use of screening information</b>  |     |
|                   | Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?   | yes |
| <b>115.42 (e)</b> | <b>Use of screening information</b>  |     |
|                   | Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?  | yes |
| <b>115.42 (f)</b> | <b>Use of screening information</b>  |     |
|                   | Are transgender and intersex inmates given the opportunity to shower separately from other inmates?  | yes |
| <b>115.42 (g)</b> | <b>Use of screening information</b>  |     |
|                   | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) | yes |
|                   | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)                | yes |
|                   | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing  | yes |

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|                   | solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)  |     |
| <b>115.43 (a)</b> | <b>Protective Custody</b>   |     |
|                   | Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? | yes |
|                   | If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?  | yes |
| <b>115.43 (b)</b> | <b>Protective Custody</b>   |     |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?  | yes |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?  | yes |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?   | yes |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?  | yes |
|                   | If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)                                      | yes |
|                   | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)  | yes |
|                   | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)  | yes |
| <b>115.43 (c)</b> | <b>Protective Custody</b>   |     |

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|                                      | Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?  | yes |
|                                      | Does such an assignment not ordinarily exceed a period of 30 days?  | yes |
| <b>115.43 (d) Protective Custody</b> |   |     |
|                                      | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?  | yes |
|                                      | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?   | yes |
| <b>115.43 (e) Protective Custody</b> |   |     |
|                                      | In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? | yes |
| <b>115.51 (a) Inmate reporting</b>   |   |     |
|                                      | Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?   | yes |
|                                      | Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?   | yes |
|                                      | Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?   | yes |
| <b>115.51 (b) Inmate reporting</b>   |   |     |
|                                      | Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?   | yes |
|                                      | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  | yes |
|                                      | Does that private entity or office allow the inmate to remain   | yes |

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|                   | anonymous upon request?   |     |
|                   | Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)   | na  |
| <b>115.51 (c)</b> | <b>Inmate reporting</b>   |     |
|                   | Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?   | yes |
|                   | Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  | yes |
| <b>115.51 (d)</b> | <b>Inmate reporting</b>   |     |
|                   | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?   | yes |
| <b>115.52 (a)</b> | <b>Exhaustion of administrative remedies</b>  |     |
|                   | Is the agency exempt from this standard?<br>NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. | no  |
| <b>115.52 (b)</b> | <b>Exhaustion of administrative remedies</b>  |     |
|                   | Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)   | yes |
|                   | Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)  | yes |
| <b>115.52 (c)</b> | <b>Exhaustion of administrative remedies</b>  |     |
|                   | Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from   | yes |



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|                   | this standard.)  |     |
|                   | Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)   | yes |
| <b>115.52 (d)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                   | Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)   | yes |
|                   | If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)  | yes |
|                   | At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)  | yes |
| <b>115.52 (e)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                   | Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)  | yes |
|                   | Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) | yes |
|                   | If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)   | yes |
| <b>115.52 (f)</b> | <b>Exhaustion of administrative remedies</b>   |     |

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|                   | Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  | yes |
|                   | After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.) | yes |
|                   | After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)   | yes |
|                   | After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)  | yes |
|                   | Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  | yes |
|                   | Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  | yes |
|                   | Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)   | yes |
| <b>115.52 (g)</b> | <b>Exhaustion of administrative remedies</b>   |     |
|                   | If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)   | yes |
| <b>115.53 (a)</b> | <b>Inmate access to outside confidential support services</b>  |     |
|                   | Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?  | yes |
|                   | Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,  | na  |

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|                   | including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)  |     |
|                   | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?   | yes |
| <b>115.53 (b)</b> | <b>Inmate access to outside confidential support services</b>  |     |
|                   | Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?               | yes |
| <b>115.53 (c)</b> | <b>Inmate access to outside confidential support services</b>  |     |
|                   | Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?                         | yes |
|                   | Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?   | yes |
| <b>115.54 (a)</b> | <b>Third-party reporting</b>   |     |
|                   | Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?  | yes |
|                   | Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?  | yes |
| <b>115.61 (a)</b> | <b>Staff and agency reporting duties</b>   |     |
|                   | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? | yes |
|                   | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?                    | yes |
|                   | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual                  | yes |

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|                   | abuse or sexual harassment or retaliation?   |     |
| <b>115.61 (b)</b> | <b>Staff and agency reporting duties</b>   |     |
|                   | Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? | yes |
| <b>115.61 (c)</b> | <b>Staff and agency reporting duties</b>   |     |
|                   | Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?   | yes |
|                   | Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?  | yes |
| <b>115.61 (d)</b> | <b>Staff and agency reporting duties</b>   |     |
|                   | If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?   | yes |
| <b>115.61 (e)</b> | <b>Staff and agency reporting duties</b>   |     |
|                   | Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?   | yes |
| <b>115.62 (a)</b> | <b>Agency protection duties</b>  |     |
|                   | When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?  | yes |
| <b>115.63 (a)</b> | <b>Reporting to other confinement facilities</b>   |     |
|                   | Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?   | yes |
| <b>115.63 (b)</b> | <b>Reporting to other confinement facilities</b>   |     |
|                   | Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?  | yes |

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| <b>115.63 (c)</b> | <b>Reporting to other confinement facilities</b>  |     |
|                   | Does the agency document that it has provided such notification?  | yes |
| <b>115.63 (d)</b> | <b>Reporting to other confinement facilities</b>  |     |
|                   | Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?  | yes |
| <b>115.64 (a)</b> | <b>Staff first responder duties</b>   |     |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?   | yes |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?  | yes |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?     | yes |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? | yes |
| <b>115.64 (b)</b> | <b>Staff first responder duties</b>   |     |
|                   | If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?  | yes |
| <b>115.65 (a)</b> | <b>Coordinated response</b>   |     |
|                   | Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in  | yes |

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|                   | response to an incident of sexual abuse?  |     |
| <b>115.66 (a)</b> | <b>Preservation of ability to protect inmates from contact with abusers</b>   |     |
|                   | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? | yes |
| <b>115.67 (a)</b> | <b>Agency protection against retaliation</b>  |     |
|                   | Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?  | yes |
|                   | Has the agency designated which staff members or departments are charged with monitoring retaliation?   | yes |
| <b>115.67 (b)</b> | <b>Agency protection against retaliation</b>  |     |
|                   | Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?   | yes |
| <b>115.67 (c)</b> | <b>Agency protection against retaliation</b>  |     |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?  | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?   | yes |
|                   | Except in instances where the agency determines that a report of  | yes |

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|                   | sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?  |     |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?       | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?                | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?                | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?                | yes |
|                   | Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?   | yes |
| <b>115.67 (d)</b> | <b>Agency protection against retaliation</b>   |     |
|                   | In the case of inmates, does such monitoring also include periodic status checks?  | yes |
| <b>115.67 (e)</b> | <b>Agency protection against retaliation</b>   |     |
|                   | If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?                              | yes |
| <b>115.68 (a)</b> | <b>Post-allegation protective custody</b>  |     |
|                   | Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?  | yes |
| <b>115.71 (a)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | When the agency conducts its own investigations into allegations   | yes |

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|                   | of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)                   |     |
|                   | Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | yes |
| <b>115.71 (b)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                   | Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?   | yes |
| <b>115.71 (c)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                   | Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?  | yes |
|                   | Do investigators interview alleged victims, suspected perpetrators, and witnesses?  | yes |
|                   | Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?   | yes |
| <b>115.71 (d)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                   | When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?            | yes |
| <b>115.71 (e)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                   | Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?  | yes |
|                   | Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?  | yes |
| <b>115.71 (f)</b> | <b>Criminal and administrative agency investigations</b>  |     |
|                   | Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?  | yes |



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|                   | Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?  | yes |
| <b>115.71 (g)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?   | yes |
| <b>115.71 (h)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?   | yes |
| <b>115.71 (i)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?   | yes |
| <b>115.71 (j)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?   | yes |
| <b>115.71 (l)</b> | <b>Criminal and administrative agency investigations</b>   |     |
|                   | When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) | na  |
| <b>115.72 (a)</b> | <b>Evidentiary standard for administrative investigations</b>  |     |
|                   | Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?   | yes |
| <b>115.73 (a)</b> | <b>Reporting to inmates</b>  |     |
|                   | Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?  | yes |

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| <b>115.73 (b) Reporting to inmates</b> |  |     |
|  | If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  | na  |
| <b>115.73 (c) Reporting to inmates</b> |  |     |
|  | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?  | yes |
|  | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?   | yes |
|  | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?      | yes |
|  | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? | yes |
| <b>115.73 (d) Reporting to inmates</b> |  |     |
|  | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?  | yes |
|  | Following an inmate's allegation that he or she has been sexually  | yes |

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|                   | abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?  |     |
| <b>115.73 (e)</b> | <b>Reporting to inmates</b>   |     |
|                   | Does the agency document all such notifications or attempted notifications?   | yes |
| <b>115.76 (a)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                   | Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?  | yes |
| <b>115.76 (b)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                   | Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?  | yes |
| <b>115.76 (c)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                   | Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? | yes |
| <b>115.76 (d)</b> | <b>Disciplinary sanctions for staff</b>   |     |
|                   | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?   | yes |
|                   | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?   | yes |
| <b>115.77 (a)</b> | <b>Corrective action for contractors and volunteers</b>   |     |
|                   | Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?  | yes |
|                   | Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  | yes |

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|                   | Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?  | yes |
| <b>115.77 (b)</b> | <b>Corrective action for contractors and volunteers</b>   |     |
|                   | In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?  | yes |
| <b>115.78 (a)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?   | yes |
| <b>115.78 (b)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?  | yes |
| <b>115.78 (c)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?  | yes |
| <b>115.78 (d)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? | yes |
| <b>115.78 (e)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?   | yes |
| <b>115.78 (f)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish   | yes |

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|                   | evidence sufficient to substantiate the allegation?   |     |
| <b>115.78 (g)</b> | <b>Disciplinary sanctions for inmates</b>   |     |
|                   | If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)  | yes |
| <b>115.81 (a)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).              | yes |
| <b>115.81 (b)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)                            | yes |
| <b>115.81 (c)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).                  | na  |
| <b>115.81 (d)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? | yes |
| <b>115.81 (e)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>  |     |
|                   | Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior  | yes |

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|                   | sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?  |     |
| <b>115.82 (a)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                   | Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? | yes |
| <b>115.82 (b)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                   | If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?   | yes |
|                   | Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  | yes |
| <b>115.82 (c)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                   | Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?          | yes |
| <b>115.82 (d)</b> | <b>Access to emergency medical and mental health services</b>   |     |
|                   | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  | yes |
| <b>115.83 (a)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?  | yes |
| <b>115.83 (b)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?      | yes |
| <b>115.83 (c)</b> | <b>Ongoing medical and mental health care for sexual abuse</b>  |     |

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|                   | <b>victims and abusers</b>  |     |
|                   | Does the facility provide such victims with medical and mental health services consistent with the community level of care?   | yes |
| <b>115.83 (d)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)   | na  |
| <b>115.83 (e)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | na  |
| <b>115.83 (f)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?   | yes |
| <b>115.83 (g)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  | yes |
| <b>115.83 (h)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>  |     |
|                   | If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)   | yes |

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| <b>115.86 (a)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?   | yes |
| <b>115.86 (b)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does such review ordinarily occur within 30 days of the conclusion of the investigation?  | yes |
| <b>115.86 (c)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?   | yes |
| <b>115.86 (d)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?   | yes |
|                   | Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? | yes |
|                   | Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?  | yes |
|                   | Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  | yes |
|                   | Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  | yes |
|                   | Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?     | yes |
| <b>115.86 (e)</b> | <b>Sexual abuse incident reviews</b>  |     |
|                   | Does the facility implement the recommendations for improvement, or document its reasons for not doing so?  | yes |



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| <b>115.87 (a)</b> | <b>Data collection</b>  |     |
|                   | Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?  | yes |
| <b>115.87 (b)</b> | <b>Data collection</b>  |     |
|                   | Does the agency aggregate the incident-based sexual abuse data at least annually?   | yes |
| <b>115.87 (c)</b> | <b>Data collection</b>  |     |
|                   | Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?  | yes |
| <b>115.87 (d)</b> | <b>Data collection</b>  |     |
|                   | Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?  | yes |
| <b>115.87 (e)</b> | <b>Data collection</b>  |     |
|                   | Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)  | yes |
| <b>115.87 (f)</b> | <b>Data collection</b>  |     |
|                   | Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)  | yes |
| <b>115.88 (a)</b> | <b>Data review for corrective action</b>  |     |
|                   | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?                    | yes |
|                   | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? | yes |
|                   | Does the agency review data collected and aggregated pursuant   | yes |

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|                    | to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? |     |
| <b>115.88 (b)</b>  | <b>Data review for corrective action</b>   |     |
|                    | Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?  | yes |
| <b>115.88 (c)</b>  | <b>Data review for corrective action</b>   |     |
|                    | Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?   | yes |
| <b>115.88 (d)</b>  | <b>Data review for corrective action</b>   |     |
|                    | Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?  | yes |
| <b>115.89 (a)</b>  | <b>Data storage, publication, and destruction</b>  |     |
|                    | Does the agency ensure that data collected pursuant to § 115.87 are securely retained?   | yes |
| <b>115.89 (b)</b>  | <b>Data storage, publication, and destruction</b>  |     |
|                    | Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?                      | yes |
| <b>115.89 (c)</b>  | <b>Data storage, publication, and destruction</b>  |     |
|                    | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?   | yes |
| <b>115.89 (d)</b>  | <b>Data storage, publication, and destruction</b>  |     |
|                    | Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?  | yes |
| <b>115.401 (a)</b> | <b>Frequency and scope of audits</b>   |     |

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|                    | During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)                        | yes |
| <b>115.401 (b)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)  | yes |
|                    | If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)      | yes |
|                    | If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.) | yes |
| <b>115.401 (h)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Did the auditor have access to, and the ability to observe, all areas of the audited facility?   | yes |
| <b>115.401 (i)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?   | yes |
| <b>115.401 (m)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  | yes |
| <b>115.401 (n)</b> | <b>Frequency and scope of audits</b>   |     |
|                    | Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?  | yes |
| <b>115.403</b>     | <b>Audit contents and findings</b>   |     |

| <b>(f)</b> |   |     |
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|            | The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.) | yes |