

PREA Facility Audit Report: Final

Name of Facility: Western Tidewater Regional Jail

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 11/12/2025

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"/>
Auditor Full Name as Signed: Lori M. Fadorick	Date of Signature: 11/12/2025

AUDITOR INFORMATION	
Auditor name:	Fadorick, Lori
Email:	lfadorick@gmail.com
Start Date of On-Site Audit:	08/27/2025
End Date of On-Site Audit:	08/29/2025

FACILITY INFORMATION	
Facility name:	Western Tidewater Regional Jail
Facility physical address:	2402 Godwin Boulevard , Suffolk , Virginia - 23434
Facility mailing address:	

Primary Contact

Name:	Lt. James D. Buie
Email Address:	buiej@wtrj.org
Telephone Number:	757-942-0555

Warden/Jail Administrator/Sheriff/Director	
Name:	Col William C. Smith
Email Address:	smithw@wtrj.org
Telephone Number:	757-942-0525

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Letrisha Jones
Email Address:	jonesl@wtrj.org
Telephone Number:	757-942-0547

Facility Characteristics	
Designed facility capacity:	552
Current population of facility:	768
Average daily population for the past 12 months:	748
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys

In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	18-78
Facility security levels/inmate custody levels:	Minimum, Medium, Maximum and Restrictive Housing
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	173
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	43
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	22

AGENCY INFORMATION	
Name of agency:	Western Tidewater Regional Jail Authority
Governing authority or parent agency (if applicable):	
Physical Address:	2402 Godwin Boulevard, Suffolk , Virginia - 23434
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	James Buie	Email Address:	buiej@wtrj.org

Facility AUDIT FINDINGS	
Summary of Audit Findings	
<p>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.</p> <p>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.</p>	
Number of standards exceeded:	
0	
Number of standards met:	
45	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-08-27
2. End date of the onsite portion of the audit:	2025-08-29

Outreach

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 <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	YWCA

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	552
15. Average daily population for the past 12 months:	748
16. Number of inmate/resident/detainee housing units:	37
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input type="radio"/> No <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

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	768
24. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	0
25. 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:	6
26. 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:	16
27. 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:	3
28. 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:	1
29. 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:	1

<p>30. 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:</p>	<p>1</p>
<p>31. 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:</p>	<p>1</p>
<p>32. 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:</p>	<p>0</p>
<p>33. 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:</p>	<p>7</p>
<p>34. 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:</p>	<p>0</p>
<p>35. 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):</p>	<p>The facility holds both male and female inmates, both pre-trial and sentenced.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>36. 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:</p>	<p>173</p>

37. 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:	22
38. 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:	47
39. 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:	None

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	15
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None

<p>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Reviewed roster and selected based upon the above factors. Inmates were randomly selected by choosing inmates from each housing unit, as well as ensuring a representative sample based on race, ethnicity and length of time in the facility.</p>
<p>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>44. 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):</p>	<p>The auditor was provided a list of inmates, both alphabetical and by housing unit. The auditor selected inmates from each housing block, including segregation by using a random number generator. There was a total of 15 inmates selected. No inmates refused to be interviewed.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</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>46. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/detainees in this category:</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/detainees.</p> <p><input type="checkbox"/> The inmates/detainees in this targeted category declined to be interviewed.</p>
<p>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/detainees).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates.</p>
<p>47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>48. 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:</p>	<p>2</p>
<p>49. 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:</p>	<p>3</p>
<p>50. 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:</p>	<p>1</p>

<p>51. 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:</p>	<p>1</p>
<p>52. 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:</p>	<p>1</p>
<p>53. 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:</p>	<p>1</p>
<p>54. 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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</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. 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).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates.</p>

<p>55. 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:</p>	<p>6</p>
<p>56. 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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</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. 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).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates.</p>
<p>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>The auditor was provided a list of inmates in the specialized categories - LEP, Physically Disabled, Blind/Low Vision, Deaf/Hard of Hearing, Gay/Bisexual, Cognitively Impaired, Transgender, Previous Victimization. There was a total of 15 inmates selected. The inmates in the specialized categories were selected based upon housing location, length of time in the facility, race and age to ensure a representative sample across the facility. There were no barriers to completing the interviews.</p>

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

58. Enter the total number of RANDOM STAFF who were interviewed:	12
59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Random staff were selected from all shift assignments and various duty posts throughout the facility, including both males and females. There were no barriers to completing the random interviews.

Specialized Staff, Volunteers, and Contractor Interviews

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.

62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	18
63. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No

64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
65. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
66. Were you able to interview the PREA Compliance Manager?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

67. 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

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Training, Disciplinary, Mailroom
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	3
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

70. Provide any additional comments regarding selecting or interviewing specialized staff.	None
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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.

71. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Was the site review an active, inquiring process that included the following:

72. 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)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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73. 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)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<p>75. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>The Auditor had full, unimpeded access to all areas of the facility. During the review of the physical plant, the Auditor observed the facility layout, staff supervision of offenders, security rounds, interaction between staff and offenders, shower and toilet areas, placement of PREA posters, observation of availability of PREA information located adjacent to and in the inmate housing areas, observation of communication in general population housing areas, as well as restrictive housing cells, search procedures, and availability and access of medical and mental health services. The Auditor observed and made note of the video monitoring system and camera placement throughout the facility, including reviewing the monitors in the control room.</p>
<p>Documentation Sampling</p>	
<p>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.</p>	
<p>77. 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?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

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

The Auditor conducted a document review of employee and inmate files, and a spot check of documents that were previously provided to the auditor along with the PAQ, including logbooks and other institutional forms. The Auditor reviewed a random sampling of personnel files to determine compliance related to standards on hiring and promotion and background check procedures for officers and contract staff. The auditor reviewed the annual PREA training rosters maintained by the training staff and cross referenced the staff files with the training rosters to ensure training was verified. The training coordinator explained the process for relaying the mandated PREA information to new hires, as well as the procedure for annual refresher training. Random offender case files were reviewed to evaluate intake procedures, including screening and subsequent housing decisions, and verify offender PREA education. In addition, the intake and receiving procedures were observed and intake screenings are conducted in private. The Auditor requested additional supporting documentation to include: training records, randomly chosen inmate medical records, randomly chosen inmate classification records, volunteer records, contractor records, and staff personnel files including PREA disclosure forms for hiring and promotions. Investigative files for the previous 12 months were reviewed for compliance to applicable standards.

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.

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	2	0	2	0
Staff-on-inmate sexual abuse	3	0	3	0
Total	5	0	5	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	2	0	2	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	2	0	2	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.

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	2	0
Staff-on-inmate sexual abuse	0	3	0	0
Total	0	3	2	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.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	1	1	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	1	1	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

5

<p>86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</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 sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>2</p>
<p>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</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 abuse investigation files)</p>
<p>89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</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>Staff-on-inmate sexual abuse investigation files</p>	
<p>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>3</p>
<p>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</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>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</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>Sexual Harassment Investigation Files Selected for Review</p>	
<p>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>2</p>
<p>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</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 sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>2</p>
<p>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</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>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</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>

Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	Reviewed all allegations for the previous 12 months
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
102. 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.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

103. 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

108. 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

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 PREA 3. WTRJ Organizational Chart 4. Interviews with Staff including the following: <ol style="list-style-type: none"> a. PREA Coordinator b. PREA Compliance Manager 5. Interviews with Inmates 6. Observations during on-site review <p>Findings:</p> <p>The Auditor reviewed the Western Tidewater Regional Jail Policy. The WTRJ has a comprehensive PREA policy which clearly mandates a zero-tolerance policy on all forms of sexual abuse and harassment. The language in the policy provides definitions of prohibited behaviors in accordance with the standard and includes</p>

	<p>notice of sanctions for those who have been found to have participated in prohibited behaviors. The definitions contained in the policy are consistent and in compliance with PREA definitions. The policy details the facility’s overall approach to preventing, detecting, and responding to sexual abuse and harassment. The policy provides for employee, volunteer, contractor, inmate worker, and inmate training regarding zero tolerance for sexual abuse and sexual harassment. This policy also informs the staff how to fulfill their responsibilities toward prevention, detection, reporting, and response. The zero-tolerance mandate is clearly communicated to the staff at the facility, and this is reflected in the staff interviews.</p> <p>The WTRJ has designated an upper-level PREA Coordinator. The PREA Coordinator’s position is Lieutenant and reports to the Office of the Superintendent/Deputy Superintendent. The PREA Coordinator stated that he keeps the Superintendent and Deputy Superintendent informed with respect to PREA related issues. A review of the organizational chart reflects this position in the organizational structure. The PREA Coordinator reports that he has sufficient time and by virtue of his position, the authority to develop, implement and oversee the facility’s efforts to comply with PREA standards. There appears to be an open line of communication between all levels of staff at the facility and the PREA Coordinator stated he is involved in the implementation efforts, as well as handling and reviewing individual offender issues.</p> <p>Interviews with all levels of staff indicated that they were trained in and understood the zero-tolerance policy established by the WTRJ. They understand their role regarding prevention, detection, and response procedures.</p> <p>The WTRJ has only one facility and is not required to designate a PREA Compliance Manager.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.12	<p>Contracting with other entities for the confinement of inmates</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. Interviews with Staff including the following: <ol style="list-style-type: none"> a. Facility Administrator b. PREA Coordinator <p>Findings:</p>
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	<p>The Western Tidewater Regional Jail has not entered into any agreement or contract for the confinement of inmates housed at the facility. This was verified by information on the PAQ, as well as interviews with staff.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.13 Supervision and monitoring	
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	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Staffing Plan Methodology 4. Staffing Plan Review 2025 5. Interviews with Staff 6. Interviews with Inmates 7. Supervisory Walk-thru Inspection Reports 8. Observations during on-site review <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator (Superintendent) • Random Staff • Supervisors Responsible for Conducting Unannounced Rounds <p>Observation of the following:</p> <ul style="list-style-type: none"> • Observation of unannounced rounds by supervisors as well as auditors during the site review • Observation of supervisors documenting rounds in the daily logbooks on the duty post during the site review <p>Findings:</p> <p>The WTRJ has a comprehensive staffing plan that addresses all required elements of the standard. The staffing plan addresses staffing in each area, staffing ratios, programming, facility layout, composition of the inmate population, video monitoring and other relevant factors. The Auditor reviewed the WTRJ’s most current staffing plan for adherence to the standard and found it to be sufficient. The facility staffing is based upon the formula dictated by the Virginia Compensation Board to determine</p>
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the number of staff needed for essential positions. The formula is based upon the number of beds the facility is rated for and provides for administrative, civilian, and sworn staff in all areas of the jail, and on all shifts.

The jail's staffing plan has not required any major revisions since the last PREA Audit. The average daily population since the last PREA Audit is 748. The staffing plan is predicated on an average daily population of 748. The auditor reviewed the facility's current staffing plan, as well as the most recent staffing plan review. In that review, dated June 16, 2025, they have documented that they have considered all of the elements from standard 115.13 (a) (1-15) as part of the review. During the interview with the PREA Coordinator, the auditor verified that the Jail Administrator reviews and approves the annual staffing plan. In addition, the facility considers the use of CCTV and told the auditor that the facility was always looking for ways to upgrade and enhance the camera system and placement within the facility. If there were an instance where the facility did not comply with their staffing plan, that instance would be reported to the command staff. Voluntary and mandated overtime and/or personnel from support positions would be used to ensure the facility meets minimum staffing requirements for operation. However, according to the PREA Coordinator and the PAQ, there were no instances where they were out of compliance with the staffing plan. During the on-site portion of the audit and review of the on-duty personnel, the auditor found them to be following the staffing plan. The staffing plan provides adequate supervisory coverage in correlation with the inmate and staff compositions. The staffing plan is discussed throughout the year, and changes are necessitated as required.

The auditor reviewed the most recent annual review, and the jail's review was in compliance with the elements of 115.13(a). In addition, during the on-site review, the auditor reviewed the deployment of CCTV monitoring. The facility has a camera surveillance system comprised of multiple monitors located in the control room. These screens are monitored by staff at all times. The most recent review of the staffing plan indicted the video monitoring system and placement of cameras were reviewed. The current video monitoring system was found to be adequate for the supervision of the inmate population. No blind spots were identified. There are cameras covering all areas of the facility.

Per the staffing plan, there have been no additions or changes to State or Local laws, standards or regulations that require additional staffing. Currently the Virginia Compensation Board partially funds 152 jail staff positions and some additional emergency positions due to the inmate population increase. The WTRJ Authority currently fully funds up to 30 jail staff positions.

The staffing plan requires any deviations be documented and justified. Notations and daily deviations from the regular staffing plan are notated on the shift roster by the shift supervisor. The shift supervisor ensures that staffing does not fall below the minimum required. According to the PAQ and verified through staff interviews, there have been no instances of non-compliance with the staffing plan.

The staffing plan appears satisfactory in the agency's efforts to provide protection against sexual abuse and harassment. The Auditor observed cameras in all areas of

	<p>the facility. There appeared to be open communication between staff and inmates. Inmates seemed to comfortable approaching staff with questions and Auditor observed formal and informal interactions between staff and inmates.</p> <p>In the PAQ, the agency reports that they conduct unannounced rounds on all shifts. A review of the WTRJ policies indicated that policy requires that supervisors will conduct and document unannounced rounds each shift, and that there is a prohibition against staff altering other staff of the rounds. During the pre-audit phase, the jail provided the auditor a sample of log books with record of unannounced rounds. This documentation sampling verified that unannounced rounds were conducted during all shifts and documented appropriately. During the on-site portion of the audit, the auditor reviewed logbooks that verified that unannounced rounds were recorded on the officers' duty posts. It is clear through observation that supervisors and administrators are conducting unannounced rounds. Inmate interviews revealed that the offenders are comfortable approaching and speaking with staff during rounds. Interviews with shift supervisors, facility administrators, as well as line staff and inmates indicate that the rounds are unannounced and random and that there's no way for the staff to alert each other when the supervisors are coming through because there is no pattern or routine to the rounds.</p> <p>During the site review, the auditor informally spoke with staff and asked about unannounced rounds.</p> <p>All of the staff informally interviewed told the auditor that supervisors came on the duty post frequently during their shifts and reviewed their logs and they never knew when they were going to show up.</p> <p>After a review, the Auditor determined that the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.14	Youthful inmates
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Review of population report on the day of the audit as well as population reports from the previous 12 months 4. Interviews with Staff <p>Interviews with the following:</p>

	<ul style="list-style-type: none"> • PREA Coordinator <p>Observation of the following:</p> <ul style="list-style-type: none"> • Site Review <p>Findings:</p> <p>According to the submitted PAQ, and according to Policy 5.15, page 5, the WTRJ prohibits placing youthful offenders in any housing unit that allows any sight or sound or physical contact with adult inmates through any shared dayroom, commons, shower or sleeping quarters. The WTRJ has not housed any youthful inmates in the past 12 months. The population report from the first day of the audit revealed that no youthful inmates were present during the on-site portion of the audit. During the site review, the auditor reviewed the housing areas and no youthful inmates were identified.</p> <p>WTRJ policy 5.15, page 5 prohibits restricting large muscle exercises, lawful education services or other programs. In addition, during the past 12 months, there have been no instances where youthful offenders have been placed in restrictive housing in order to separate them from adult inmates. The only lawful education requirements for inmates in Virginia are those under the age of 21 who have a valid Individualized Education Plan (IEP), spend more than 10 days in jail. The Superintendent verified that if they housed a youthful inmate that met that criteria, they would accommodate that lawful requirement.</p> <p>The PAQ, documentation submitted, a review of the population analysis for the previous year and interviews with staff confirm that there have been no youthful offenders housed at the WTRJ within the audit period.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Lesson Plan for Searches 4. Academy Schedule 5. Search Handout 6. Interviews with Staff

7. Interviews with Inmates

Interviews with the following:

- PREA Compliance Manager
- Random Staff
- Medical Staff
- Random Inmates

Observation of the following:

- Observation of inmate housing area with individual showers with modesty curtains
- Observation of CCTV coverage of housing areas and individual protective cells
- Observation of staff announcing the presence of opposite gender staff during site review

Findings:

The WTRJ does not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. Interviews with staff, including medical personnel indicate operational practice is consistent with this policy. The facility reports in the PAQ and verified through staff interviews that no cross-gender strip searches or visual body cavity exams have occurred.

WTRJ policy prohibits the pat down search of female inmates by male staff members absent exigent circumstances and any such search shall be documented through an incident report. The facility does not restrict female inmates' access to programming or other out-of-cell opportunities. During the on-site review, the auditor observed female inmate movement in the facility. Female staff are available and on post in the female housing units. Facility staff confirmed no pat-down searches of female inmates had been performed by male staff to include exigent circumstances during the audit period.

WTRJ policy states the facility shall document all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat down searches of female inmates. The facility does not conduct cross-gender pat down searches. There is not a prohibition against female officers patting down male offenders, however, this does not occur on a regular basis. The facility holds both male and female inmates, but predominately male offenders. Female inmates are typically held for shorter periods of time for pre-trial detention, or while awaiting transfer for long term pre- and post-trial detention. In the case where female inmates are detained in the jail, they are searched and supervised by female correctional officers. The facility administrators ensure there is always at least once female officer assigned and on duty for each shift. During the regular, daytime hours, there are also daylight female officers and supervisory staff available if needed. Female offenders' access to programming and out of cell opportunities are not limited due to a lack of female staff. Interviews with staff and offenders confirm that there have been no instances of cross-gender strip searches, cross-gender visual body cavity searches, or cross-gender pat down searches of female inmates. During the on-site portion of the audit, logs maintained

verified that during the audit period, there were no instances where female inmates were pat searched by male staff.

The WTRJ policies prohibit cross-gender strip searches and cross-gender visual body cavity searches except when performed by medical personnel. The facility reports on the PAQ and verified through interviews that no cross-gender strip searches, or cross-gender visual body cavity searches have occurred.

WTRJ policy states that inmates are able to shower, change clothes and perform bodily functions without nonmedical staff of the opposite gender viewing their breasts, buttocks or genitalia, except in exigent circumstances or incidental to routine cell checks. The auditor, during the site review, noted that each housing unit had shower stalls with modesty curtains. The toilet areas also had modesty curtains or other modesty shielding. The auditor also reviewed a sample of CCTV placements in housing area and verified that there was not CCTV coverage of the interior of general population cells where prisoners would be changing clothes. A review of CCTV coverage in common areas and individual protective cells revealed that the cameras were pointed away from toilet areas or covered.

Interviews with staff and inmates did not indicate viewing of this nature or any issues in this area.

The WTRJ policy states that staff of the opposite gender shall announce their presence when entering an inmate housing unit. Female officers can supervise the male housing units. Inmate interviews indicated that there is not an issue with them being able to change clothes, shower or perform bodily functions without officers of the opposite gender seeing them undressed. Most offenders indicated that announcements are being made when opposite gender staff enter the housing units. However, despite not all inmates reporting that announcements were made, all the inmates interviewed stated there were no issues with privacy. Staff interviews also indicate the offenders' privacy from being viewed by opposite gender staff is protected. Shower curtains and partitions afford offenders appropriate privacy while still affording staff the ability to appropriately monitor safety and security. Cameras are placed appropriately so that shower and toilet areas are not in view.

WTRJ policy prohibits searching or physically examining a transgender or intersex offender for the sole purpose of determining the offender's genital status. According to targeted interviews with medical staff and review of logs during the on-site portion of the audit, no inmate has been examined for the purpose of determining gender status. During staff interviews, when asked what they would do if they were unable determine an offender's gender or genital status, all the staff were able to articulate that they could determine this information other ways, including asking the offender. The auditor interviewed 6 transgender inmates at the facility during the on-site portion of the audit. The inmates stated there were no issues with being searched in a respectful manner.

The WTRJ policy states all sworn staff are trained to conduct proper pat down searches on inmates to include cross-gender searches. During the pre-audit portion of the audit, the auditor reviewed the training presentation that is provided to all

	<p>employees regarding how to conduct cross-gender pat down searches as well as how to properly search transgendered and intersex inmates in accordance with this standard. According to the PAQ, 100% of all employees hired in the last 12 months received the required training. During the on-site document review of employee files, the auditor verified the documents in the employee files provided during the pre-audit phase. Staff indicated that they are trained to do cross-gender searches and were generally able to articulate to the Auditor how they would accomplish a search of a transgender inmate. Interviews with training staff indicate that officers are instructed on how to do searches of transgender and intersex offenders. The Auditor reviewed the training outline, as well as reviewed training rosters showing all staff had been trained. During the random staff interviews, all employees interviewed recalled being provided training on how to perform cross-gender pat down searches as well as how to search transgendered or intersex inmates.</p> <p>While interviews indicate that the officers have a basic understanding of how to conduct cross-gender searches and searches of transgender and intersex offenders, the staff could benefit from regular refresher training in this area. The auditor recommended additional training in this area be provided to all staff.</p> <p>After a review, the Auditor determined the facility substantially meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Forms and pamphlets in English and Spanish 4. Review of PREA training curriculum with section on effective communications 5. Employee training rosters for the past 12 months 6. PREA Training Video in English and Spanish and with subtitles 7. Information regarding commercial interpreter service <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Compliance Manager • Random Staff • Classification Staff • Intake Staff • Inmates who have cognitive and physical disabilities

Observation of the following:

- Observation of Interpretive Service access posters

Findings:

The WTRJ takes appropriate steps to ensure that offenders with disabilities, including those who are deaf, blind or have intellectual limitations have an equal opportunity to participate and benefit from all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and harassment. WTRJ policy is written in accordance with the standard and indicates that the agency has established procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The policy includes language associated with deaf or hard of hearing inmates, blind or having low vision, inmates who have intellectual disabilities, psychiatric disabilities, speech disabilities, and limited English proficient. During intake, offenders determined to have disabilities will have accommodations made to ensure that materials are received in a format or through a method that ensures effective communication.

Interviews with the PREA Compliance Manager and Intake staff indicate that the WTRJ has not received any offenders with significant disabilities that required any special accommodations in the past year.

Staff stated that if the WTRJ were to receive an offender with a disability that required any accommodations in order ensure they were able to fully participate and benefit from all aspects of the facility's efforts to prevent and/or respond to sexual abuse and harassment, Intake would make alert the PREA Compliance Manager and she would ensure all necessary accommodations and notification to the other staff.

Interviews with staff, including supervisory staff and intake officers confirm that they have a process in place to ensure that all inmates, regardless of disability would have equal access to PREA information. Multiple staff interviews indicated that they did not currently have any offenders with disabilities or special needs that would require accommodations to have access to the PREA information and protections. The Auditor observed PREA informational posters throughout the facility in both English and Spanish. Spanish is the prevalent non-English language in the area. During interviews with staff responsible for intake and classification, when asked how they ensured that inmates with disabilities were provided access to the PREA program, staff indicated that they have options on a case-by-case basis. Some staff suggested using the telephone based interpretive service for LEP inmates. When asked how they would respond to the needs of an individual with a cognitive disorder or severe mental illness, staff told the auditor that it would depend on the level of impairment and the specific communication needs of the inmate and they would consult with mental health as needed.

WTRJ policy indicates that offenders who are limited English proficient have access all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and harassment, including providing interpreters. The Auditor determined through staff interviews that the WTRJ has interpreters available for limited English proficient offenders through the use of a telephone-based interpreter service. Interviews with

	<p>multiple staff indicate that on the rare occasion they have an offender that doesn't speak English, they also have several staff members that can speak Spanish.</p> <p>A PREA hotline number is available on the inmate phone lines and this service is available for inmates with limited reading skills.</p> <p>During the on-site portion of the audit, the Auditor was able to speak with two inmates who had been identified as having a cognitive disability, three inmates identified as blind or visually impaired, two inmates with a physical disability, as well as one inmate that was identified as hearing impaired. During the targeted interviews, the inmates were able to answer the auditor's questions and were aware of PREA. Their disabilities are not severe enough that they need any special accommodations to participate in the PREA program at WTRJ. The interviews did not reveal any cause for concern with this standard.</p> <p>The Auditor interviewed one limited English proficient inmates identified by the facility. The inmate was able to speak English well enough to participate in the interview and did not require the use of an interpreter. According to the submitted PAQ, the agency used an interpretive service zero times during the last 12 months for a PREA related purpose. While several staff indicated they were not aware of the interpreter service, all staff interviewed stated there was Spanish speaking staff available or they would check with their supervisor if they needed interpreter services.</p> <p>The WTRJ policy prohibits the use of inmate interpreters except in instances where a significant delay could compromise the offender's safety. Interviews with staff indicate that offenders are not and would not be used as interpreters. During the random staff interviews, no staff member said it was appropriate to use an inmate interpreter when responding to allegations of inmate sexual abuse. According to a targeted interview with the PREA Coordinator, there were no instances of the use of an inmate interpreter even in exigent circumstances.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 PREA

3. WTRJ Hiring Background Packet
4. Criminal History Record Check on All Employees
5. Review of employee, contractor and volunteer files
6. Background Information on Contract Employees hired within the last 12 months
7. Interviews with PREA Coordinator and Human Resources

Findings:

The WTRJ does not hire any sworn staff that has engaged in sexual abuse or harassment as stipulated in the standard. The language in the policy is written consistently with that in the standard. The Auditor reviewed the background process used by the WTRJ and found that they are asking these questions during the interview process to determine if they are hiring anyone who has engaged in prohibited conduct. Interviews with staff confirm that they are asking these questions during the interview process for applicants for sworn positions. Staff indicated that the background investigation thoroughly vets any prospective employee and asks directly about previous misconduct as required by the standard. The document review on-site and interviews with the PREA Coordinator and Human Resources confirmed that they have complied with this policy and no employee with such a history has been hired during the audit period. During the audit period, 136 criminal background records checks were completed for sworn staff.

These record checks were done through the Virginia Criminal Information Network and are performed prior to employment. In addition, background checks were completed for staff covered under two contracts for services that may have contact with inmates.

The policy indicates that the WTRJ will consider any instances of sexual harassment in determining whether to hire or promote anyone or enlist the services of contractors who may have contact with inmates. A targeted interview with Human Resources stated that instances of sexual harassment would be a factor when making decisions about hiring and promotion, however there had been no incidents. Every employee and contractor undergo a background check and is not offered employment if there is disqualifying information discovered.

There is a written policy that requires inquiry into a promotional candidate's history of sexual abuse or harassment. Documentation reviewed supports compliance with the standard in accordance with facility policy. During the on-site portion of the audit, the Auditor reviewed files of employees that were hired in the last 12 months. All the employees' files contained background checks and pre-employment questionnaires where employees were asked the questions regarding past conduct, and their answers were verified by a background investigation.

WTRJ policy requires inquiry into the background of potential contract employees regarding previous incidents of sexual assault or harassment. Consistent with WTRJ policy, all employees and contractors must have a criminal background records check prior to employment. Staff at the WTRJ complete criminal background checks for all prospective applicants and contractors, prior to being offered employment.

Staff verified this information in interviews discussing the background process. In addition, the WTRJ uses a checklist for the background process, which verifies all steps have been completed, including the criminal history check. Staff stated that if a prospective applicant previously worked at another correctional institutional, they make every effort to contact the facility for information on the employee's work history and any potential issues, including allegations of sexual assault or harassment, including resignation during a pending investigation.

WTRJ policy requires background checks be conducted on facility staff and contract staff a minimum of every five years. Documentation of background checks was provided by the facility and reviewed by the auditor. The auditor reviewed criminal records check logs as well as targeted interviews with Human Resources personnel and the PREA Coordinator. Interviews with the HR Director and the PREA Coordinator confirmed that each employee hired during this audit period was subjected to a criminal records check. In addition, Policy 5.15 includes an affirmative requirement that employees have a duty to report any conduct in violation of PREA. Staff was very clear about the fact that an employee engaging in any type of misconduct such as listed in the standard would not be retained.

The WTRJ asks applicants for sworn positions and contractors directly about misconduct as described in the standard using a Self-Declaration form during the application process. The Auditor reviewed random files and verified this was being completed. Interviews with staff indicated that the forms are being completed as required by the standard and WTRJ policy. WTRJ policy stipulates a continuing affirmative duty to disclose any PREA related misconduct. All current and new staff are trained on the PREA policy, as well as annual refresher training. Training records verifying that employees acknowledge that they have read and understand the policy were reviewed by the auditor.

In accordance with the standard, WTRJ policy stipulates that material omissions regarding such conduct, or the provision of materially false information shall be grounds for termination. Interviews with staff verified that the WTRJ would and has terminated employees for engaging in inappropriate behavior with inmates, upon learning of such misconduct.

WTRJ policy indicates that the facility shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer and a signed release of information. Staff indicated they would share information upon request from another facility regarding a former employee.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Schematic of facility 4. Staffing Plan Review 2024 5. Interviews with PREA Coordinator and Facility Administrator 6. Observation of camera placement and footage <p>Findings:</p> <p>WTRJ policy indicates when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. The staff confirmed no substantial expansions or modifications were performed within the last 12 months.</p> <p>According to the WTRJ PAQ and targeted interviews with the PREA Coordinator and Facility Administrator, the WTRJ is in the process of making upgrades to the camera system since their last PREA audit. The WTRJ is putting in a new camera system to improve their efforts to better protect the inmates from sexual abuse and sexual harassment. The video monitoring system in the facility is Central Control. The current video monitoring system is adequate for the supervision of inmates with no blind spots recognized.</p> <p>A targeted interview with multiple staff stated that the camera system is a vital tool in the prevention and detection of sexual assault issues, as well as a measure to assist in investigations.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.21	<p>Evidence protocol and forensic medical examinations</p> <hr/> <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15
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3. Website
4. MOU with YMCA
5. MOU with Suffolk PD
6. MOU with Obisi Sentara Hospital
7. Review of incident logs

Interviews with the following:

- PREA Coordinator
- Agency Administrator
- Medical personnel

Findings:

The WTRJ is responsible for conducting administrative sexual abuse and sexual harassment investigations only. The Suffolk Police Department has the responsibility for conducting criminal abuse investigations. They have agreed to conduct sexual abuse investigations in accordance with PREA standards. This is also stipulated in WTRJ policy. The Suffolk Police department has agreed to follow the nationally accepted protocol for Sexual Assault Medical Forensic Exams published by the USDOJ. These evidence-based protocols are appropriate for youth. The Superintendent and PREA Coordinator confirm this agreement.

The WTRJ has not held any youthful offenders during the review period, however the protocol is appropriate for youth.

The facility follows a uniform protocol for investigating allegations of sexual abuse that maximizes the possibility of collecting usable evidence and trains facility staff who may be first responders in this protocol. The evidence protocol is confirmed by the Investigator, who can articulate investigative procedures for a sexual assault in a jail setting. Interviews with staff indicate that they are trained and familiar with the evidence protocol and what to do if they are the first responder to a sexual assault.

WTRJ policy stipulates that all victims of sexual abuse shall be offered a forensic medical exam, without financial cost including prophylactic testing/treatment for suspected STIs, and pregnancy testing as

applicable. There is an on-call Clinical Forensic Nurse through the hospital that is notified in such instances. These exams would be performed off-site at Sentara Obici Hospital and at no cost to the inmate, including prophylactic testing/treatment. The Auditor reviewed a written MOU with the forensic services provider for the Suffolk Police Department. The agreement stipulates that examinations shall be conducted by qualified SANE/SAFE experts in accordance with the guidelines of the American Nurses Association as well as the standards of the International Association of Forensic Nurses. Services are available 24 hours per day and 7 days per week. The presence of the agreement was verified with the forensic services provider.

Examinations will be conducted by qualified SANE/SAFE experts. Pursuant to the MOU, persons performing these exams will be qualified and possess training and/or certification in the Sexual Assault Nurse Examination. The availability of these

	<p>services was also confirmed by the Auditor with the HSA. She indicated they always had a SANE/SAFE nurse available 24 hours per day and 7 days per week and there would be no charge to the victim for this exam.</p> <p>The WTRJ reported on the PAQ there had been no have been no forensic exams conducted during this audit period. This was confirmed by jail staff and the HSA.</p> <p>WTRJ policy indicates they will make a victim advocate from a rape crisis center available to an abused inmate. A local rape crisis center, YWCA is available to serve as a victim advocate to victims of sexual assault at the WTRJ. The WTRJ has an MOU with the agency, which was provided to the Auditor for review. As stipulated in the MOU, YWCA will provide free and confidential services. There have been no instances of sexual abuse that have required services in the past 12 months. A targeted interview with the PREA Coordinator also confirmed that the MOU was in place, but no advocacy services had been utilized during the audit period.</p> <p>The Western Tidewater Regional Jail has entered into a Memorandum of Understanding with the Suffolk PD to conduct criminal investigations of sexual abuse, sexual assault, and sexual harassment. The WTRJ will conduct parallel administrative investigations for any cases of sexual assault referred to the PD.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. PREA Investigative Checklist 4. Review all investigative files for allegations of sexual abuse or harassment for the past 12 months 5. Website <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator • Random Inmates <p>Findings:</p>

The WTRJ policy is written in accordance with the standard and requires that an investigation is completed for all allegations of sexual abuse and harassment. Policy also dictates that allegations are referred for a criminal investigation, if warranted. The supervisors and PREA Coordinator work very closely together to ensure that all allegations of sexual abuse and harassment are investigated promptly and thoroughly. If an offender alleges a sexual assault or sexual harassment has taken place, the staff member will notify the supervisor, who will take the initial report and refer it to the PREA Coordinator for further action and investigation. The investigator coordinates with the PREA coordinator and Jail supervisors to determine the course of action.

The WTRJ policy requires all allegations of sexual abuse and sexual harassment to be investigated and referred for administrative review or criminal prosecution. Policy ensures that any allegation of sexual abuse or sexual harassment is referred to an agency with the legal authority to conduct criminal investigations. The Western Tidewater Regional Jail has entered a Memorandum of Understanding with the Suffolk Police Department to conduct these investigations. The WTRJ policy is posted on the website under the PREA section.

Targeted interviews with the PREA Coordinator, Investigator and Jail Administrator verified that all allegations of sexual abuse or harassment are investigated. They described the process for investigations, which is a collaborative approach. According to the staff, once an allegation is received, it is referred for investigation based upon the type of allegation. In the case of a sexual abuse allegation, the first responders and supervisory personnel would initially take action to separate the alleged victim and perpetrator and takes steps to preserve any evidence. The on-duty supervisor would brief the PREA Coordinator and depending on the situation initiate a call to the PD to begin a criminal investigation. All reports of sexual abuse or harassment are evaluated by the first responders and supervisors, in coordination with the PREA Coordinator and a determination is made whether to initiate a criminal investigation. If there is no exigency and no evidence that a crime has occurred, the agency initiates an administrative investigation. The incident is investigated and if during the investigation, it is determined that there is evidence to support a crime was committed, the investigators will consult with the Commonwealth Attorney as necessary. If there is no evidence that a crime was committed, then the investigation is completed as an administrative investigation.

Interviews with staff indicate they are aware of their responsibility to investigate every allegation, refer the allegation if it involves criminal behavior and notify the PREA Coordinator of all allegations.

A review of the investigative files for allegations of sexual abuse or harassment in the past 12 months indicate that the allegations were promptly and thoroughly investigated. The investigations were initiated immediately by the PREA Investigator, the report included all essential elements required within the standard, credibility assessments were conducted for staff and inmates, and staff actions were considered within the final report. There is a standardized template utilized by the investigator to ensure all required elements of the standard are met. The investigative reports

	<p>indicated several reporting mechanisms utilized by the inmates such as notifying the staff, inmate request, and the PREA Hotline. There were no allegations that warranted referral for criminal investigation.</p> <p>WTRJ policy requires that all sexual assault allegations that involve evidence of criminal behavior be referred for criminal prosecution.</p> <p>The auditor reviewed the WTRJ website and the agency policy is posted and publicly available. During an interview with the Investigator, he verified that investigations that revealed criminal behavior would be referred to the Commonwealth Attorney for prosecution. The Jail Administrator confirmed this information.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.31 Employee training	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Refresher Training 4. New Hire PREA Training 5. PREA Lesson Plan 6. Review of Training Files 7. Interviews with Random Staff, PREA Coordinator and Training Coordinator <p>Findings:</p> <p>The WTRJ policy is written in accordance with the standard and includes all required topics and elements of the standard. Policy includes a zero tolerance toward sexual abuse and sexual harassment policy relating to staff training. This policy includes training requirements on how to fulfill their responsibilities for prevention, detection, reporting, and response. This policy includes all elements listed in section 115.31 (a) 1-10. Per policy 5.15, all Western Tidewater Regional Jail employees, who have contact with inmates will be trained on the following:</p> <ol style="list-style-type: none"> a. The Jail's zero-tolerance policy for sexual abuse and sexual harassment. b. The employee's responsibilities under the Jails' sexual abuse and sexual harassment policy. c. Inmates' rights 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 a Jail setting such as: creating substitute families, power domination through aggression, and a young inmate being at risk for violent assault.
- f. The common reactions of sexual abuse and sexual harassment victims such as: hostility, withdrawn, denial, afraid of sexual transmitted diseases, and fear of staff.
- g. How to detect and respond to signs of threatened and actual sexual abuse such as: ensure safety, stabilize the situation, securing the scene, separate the ones involved, ask questions, and report incident to a Supervisor.
- h. How to avoid inappropriate relationships with inmates.
- i. How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or other nonconforming inmates.
- j. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Policy requires that all employees, contractors, volunteers and civilian staff member who have contact with inmates receive training. According to the policy, mental health and medical personnel receive

specialized training. The training is tailored to both male and female inmates, as the facility holds both. The facility provides PREA training to each employee to ensure they remain up to date on the WTRJ policies and procedures regarding sexual abuse and harassment. Per policy 5.15, all current employees will be initially trained in the PREA standards and refresher training will be provided to employees every two (2) years thereafter.

The Auditor reviewed the training curriculum and verified it included all information and each element required by the standard. The Auditor reviewed the training rosters, as well as random training files to verify and ensure all employees are receiving the training. Per the PAQ, the facility trained 100% of staff in the last 12 months. During the pre-audit period the Auditor reviewed the training documentation submitted by the facility. In addition, during the on-site portion of the audit, the auditor verified the training of staff by making spot checks of officer training files to match the training rosters with the files for verification of training attendance. Furthermore, during the on-site portion of the audit during the document review the auditor reviewed staff training files, and each file contained a training acknowledgement for PREA training within the last two years.

New staff are given PREA training during their orientation before assuming their duties and sign a verification acknowledging they have received the information. During interviews with the PREA Coordinator and Training staff, they confirmed that no employee is permitted to have contact with inmates prior to receiving PREA training during orientation.

The Auditor conducted interviews with random and specialized staff. All staff interviewed indicated that they had received training and were able to articulate information from the training. During the staff interviews, all the random employees recalled having PREA training. Most of the staff stated that they had received some sort of training related to PREA every year. During the random staff interviews, the

	<p>auditor asked the employees if they recalled being trained on each required element of the PREA training. None of the employees interviewed remembered all elements of the training, but staff appear to understand their responsibilities regarding the standards. The staff are appropriately trained, and all documentation is maintained accordingly.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Training Rosters 4. New Contractor PREA Training 5. Review of Training Files 6. Volunteer orientation <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Contract Staff • Volunteer Staff • Training Coordinator <p>Findings:</p> <p>The WTRJ policy is written in accordance with the standard and includes all required topics and elements of the standard. The policy explains the zero-tolerance standard and the facility also provides information to all volunteers and contractors. Per policy, all volunteers and contractors, who have contact with inmates, will be trained on the Western Tidewater Regional Jail's PREA policy.</p> <p>All training will be documented with the signature of the employee, volunteer, or contractor verifying they understand the training.</p> <p>The auditor reviewed the information provided to contract staff and volunteers, and it includes the zero-tolerance policy, requirements for preventing, reporting, detection, and response, and the discipline imposed for violations of this policy. WTRJ policy requires that all staff receive training regarding PREA. This training is required to be completed in person prior to contact with any inmates. The training is tailored to both</p>

male and female inmates, as the facility holds both.

The facility provides PREA training to each contract employee to ensure they remain up to date on the WTRJ policies and procedures regarding sexual abuse and harassment. The training staff briefly reviewed with the Auditor a typical training session. The documentation provided by the facility indicates the volunteer and contractor signature understanding the training they have received.

The Auditor reviewed the training curriculum and verified it included all information required by the standard. The Auditor reviewed the training rosters, as well as random training files to verify and ensure all contracted employees are receiving the training. New contractors and volunteers are given PREA training during their orientation before assuming their duties and sign a verification acknowledging they have received the information. During the document review, the auditor was able to verify that the contractors who had been trained were required to sign an acknowledgement that they had received and understood the PREA training. The auditor reviewed the files of newly hired contract employees and verified that the signed training acknowledgement form is retained in their files. In addition, during targeted interviews with the PREA Coordinator and Training Coordinator, they verified that training acknowledgements were retained in the files.

The Auditor conducted interviews with contract and volunteer staff. During targeted interviews with contract and volunteer staff members, each of the interviewees told the auditor that they recalled having the PREA training and knew of the WTRJ's zero-tolerance policy against sexual abuse and harassment. In addition, while they could not remember all the aspects of the training, they could articulate what to do is an inmate reported to them. When asked what would be the consequence if they violated the PREA policy, they stated they would be terminated and removed from the facility. Further, all recalled having to take a test and sign a paper acknowledging receipt and understanding of the training. Per the facility staff, they require that anyone who has any contact with inmates undergo the same training as sworn staff regarding PREA despite the fact it is not required by the standard. The contract staff were knowledgeable regarding the PREA information they had received. Staff appear to understand their responsibilities regarding the standards. The WTRJ is providing training in accordance with the standard. The documentation is maintained accordingly.

The facility reported on the PAQ that there have been 66 volunteers and contractors, who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

115.33

Inmate education

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Relied upon to make Compliance Determination:

1. WTRJ Completed PAQ
2. WTRJ Policy 5.15
3. Review of inmate training materials
4. Review of inmate training documentation
5. Inmate Handbook
6. Sampling of inmate files comparing intake date, the date of initial screenings, and the date of comprehensive screening
7. Logs of Completion of inmates provided Comprehensive Education

Interviews with the following:

- PREA Coordinator
- Random Inmates
- Intake Staff

Observations of the Following:

- PREA informational Posters throughout the facility in inmate housing and common areas
- Inmate Intake Process

Findings:

The WTRJ policy is written in accordance with the standard and includes elements (a-f) within the policy. In accordance with policy, offenders receive a screening and training regarding the facility's zero tolerance policy. In accordance with the standard, during the intake process, inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. This information, along with the inmate handbook and informal posters provides offenders with information regarding sexual abuse and assault, the agency's zero tolerance policy and how to report incidents of sexual abuse or harassment. There are several reporting methods available to the inmates which is discussed in the inmate handbook.

Per WTRJ policy, all inmates during intake will receive a WTRJ Inmate Handbook explaining the Jail's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

All inmates will receive information about sexual abuse and sexual harassment through the in-house video system.

All inmates within 30 days of intake, will be provided comprehensive education

regarding their rights to be free from sexual abuse, sexual harassment, their right to be free from retaliation for reporting such incidents, and the facility's policies and procedures for responding to such incidents.

The WTRJ PAQ reported that during the last year 3845 persons were committed to jail and all 3845 inmates were given the initial PREA information in accordance with the standard. Offenders will receive a PREA brochure at intake. A specialized interview with intake staff revealed the inmates receive the initial PREA document upon arrival to the facility. This document includes the facility zero tolerance policy, the inmates' right to be free from sexual abuse, sexual assault, and sexual harassment and instructions for reporting an allegation by phone. The inmates acknowledge receipt of this brochure.

The auditor reviewed inmate files to verify receipt of the brochure. The inmate handbook is available in paper format, as well as on the tablets located in the offender housing areas.

In addition, the auditor observed PREA signage with a reporting number and notification of the agency's zero tolerance policy. In both informal discussions with intake staff as well as formal specialized interviews with intake staff, officers told the auditor that they explained the agency's zero tolerance policy regarding sexual abuse and harassment, and they explained to the newly committed inmates that they could report any instances of abuse or harassment to staff and use the inmate telephone system to report abuse to the listed hotline.

Interviews with intake staff verified that inmates, including any transferred from another facility, are given the same PREA orientation. Further questioning during the informal and formal staff interviews revealed that inmates who were LEP would be provided the orientation using a telephone interpreting service, or a Spanish speaking officer would be utilized, if available. For offenders that are visually impaired, a staff member would read the information to the offender. Staff would assist any other disabled or impaired inmates that needed assistance, including intellectually limited inmates. Information in multiple formats was available throughout the facility. A targeted interview with the PREA Coordinator indicates that the facility has not received any inmates with significant enough disabilities or language barriers that needed accommodations within this audit period. The Auditor observed PREA informational posters in all offender housing areas, intake, and public areas.

Per WTRJ policy, all inmate education materials will be in formats accessible to all inmates in accordance with Title II of the Americans with Disabilities Act, 42 U.S.C. Formats include, but not limited to: interpreters for the deaf or hard hearing, reading the material to visual impaired, and providing interpreters services for Non-English speaking inmates.

Random inmate interviews revealed that most inmates remembered receiving information about the agency's zero tolerance policy and how to make a report of sexual abuse. The majority of the inmates said that they would just tell the staff and some also referenced the use of a sexual abuse hotline. The few who responded that they did not remember receiving the initial information did state that they are aware

	<p>of PREA.</p> <p>The PAQ indicates 1132 of the 3845 inmates received were there for 30 days or more and received the comprehensive education. The comprehensive education is accomplished using the PREA orientation information. The educational information is on the inmate tablets and each inmate must electronically acknowledge viewing of the information prior to being able to use the tablet for any other functions. Information is prominent on the tablets each time the inmate logs in to use it. The staff are able to print reports that show when the inmate acknowledged this information. In addition, the education video is played on the inmate televisions weekly.</p> <p>The auditor reviewed a sampling of random inmate files. The files contained documentation of the initial inmate PREA orientation (brochure) at the time of admission, as well as the comprehensive education. Interviews with staff and offenders verified that offenders are receiving the initial and comprehensive training.</p> <p>All current offenders have received PREA training. Offender interviews indicate that the majority remember receiving information upon arrival and viewing the educational information. They have an awareness of PREA information and how to report.</p> <p>As required by the standard, policy provides for education in formats accessible to all inmates. There are Spanish versions of all materials. For offenders that are visually impaired, a staff member would read the information to the offender. As indicated in the policy, all other special needs would be handled in coordination with the PREA Coordinator on a case-by-case basis. There have been no instances of the need to accommodate special needs inmates during this audit period.</p> <p>Information in multiple formats was available throughout the facility. The Auditor observed PREA informational posters in all offender housing areas, intake, and medical. The inmate handbook is available and provided to all offenders.</p> <p>After a review, the Auditor determined that the facility appears to substantially meet the minimum requirements of the standard.</p> <p>Corrective Action: None</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15

3. Review of Training Materials
4. Review of Training Documentation
5. Review Training Curriculum for Specialized Training
6. Review of Training Certificates for Investigators
7. Interviews with PREA Coordinator

Findings:

WTRJ policy is written in accordance with the standard and requires that investigators are trained in conducting sexual abuse investigations in confinement settings. WTRJ investigators conduct administrative investigations. The Auditor verified the training for the investigators. The training included all mandated aspects of the standard, including proper use of Miranda and Garrity, sexual abuse evidence collection in a correctional setting, as well criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Per WTRJ policy, the PREA coordinator will maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

There are two designated, trained investigators employed by the WTRJ. The auditor reviewed all investigations and they were conducted by one of the trained, designated investigators. The tracking mechanism for investigations is an Excel spreadsheet that includes: case number, date and time, initiation method, name of the participants involved, incident number, and a brief description.

The PREA investigators at WTRJ completed investigator training. The auditor was provided documentation of training. This training titled, "Investigating Sexual Assault" provided the necessary elements required within the standard. The auditor reviewed the training outline and power points associated with the training. Training certificates were also viewed for training received within the last 12 months.

During a targeted interview with one of designated investigators for the department, they were able to articulate all aspects of the training received. They appeared knowledgeable in the training they had received, as well as conducting sexual assault investigations. He indicated that, if in the course of the investigation, it appeared that the conduct was criminal in nature and there could be criminal charges involved, they would consult with the Commonwealth Attorney regarding any potential charges.

There is no state or federal agency that is charged with investigating sexual abuse or harassment allegations at the WTRJ.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Relied upon to make Compliance Determination:

1. WTRJ Completed PAQ
2. WTRJ Policy 5.15
3. Review of Training Materials
4. Review of Training Documentation
5. Interviews with PREA Coordinator and Medical Staff

Findings:

Facility policy requires all medical and mental health care practitioners to receive the required specialized PREA training. The policy requires that the mental health and medical staff receive additional specialized training on how to detect and assess signs of sexual abuse and harassment, how to preserve physical evidence, how to respond effectively to victims of sexual abuse and harassment and to whom to report allegations or suspicions of sexual abuse or harassment. The specialized training is accomplished online through the National Institute of Corrections PREA classes titled, "PREA, Behavioral Health Care for Sexual Assault Victims in a Confinement Setting," and "PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting."

The WTRJ employs contract medical and mental health providers. The facility maintains documentation demonstrating the medical and mental health practitioners have completed and understand the training received. Per the PAQ, there are 40 medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy.

The staff of the WTRJ does not perform forensic medical examinations for victims of sexual assault. Forensic medical exams are conducted at the local hospital, so no facility staff are trained on conducting forensic medical exams.

During the on-site portion of the audit, the auditor reviewed the training logs provided by the staff. During a targeted interview with the HSA, she recalled receiving PREA training. In addition, she remembered having to complete additional training specifically related to healthcare and PREA. She was able to articulate knowledge regarding how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and whom to report allegations or suspicions of sexual abuse and sexual harassment.

A targeted interview with the training staff verified that every employee is required to participate in PREA training in accordance with 115.31 and that training is documented.

After a review, the Auditor determined the facility appears to substantially meet the

	<p>requirements of the standard.</p> <p>Corrective action: None</p>
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115.41 Screening for risk of victimization and abusiveness	
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Review of Screenings 4. 30 Day Reassessment Logs 5. Sampling of Random Inmate Files <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Random Inmates • Intake Staff • Classification Staff • Medical <p>Observations of the Following:</p> <ul style="list-style-type: none"> • Inmate Intake Process <p>Findings:</p> <p>According to WTRJ Policy all inmates shall be assessed upon their admission to the facility and reassessed no later than 30 days after admission to the facility. The policy is written in accordance with the standard and includes all the required elements. Per WTRJ policy 5.15,</p> <ol style="list-style-type: none"> 1. All inmates will be screen during intake using an objective screening instrument for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. 2. The intake screening will normally take place within 72 hours of arrival at the facility and with a reassess of the inmate no later than 15 days from the inmate's arrival. 3. An inmate's risk level will be reassessed 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. 4. The intake screening will consider at the minimum the following : <ol style="list-style-type: none"> a. Whether the inmate has a mental, physical, or developmental disability. b. Age of the inmate. c. Physical build of the inmate.

- d. If the inmate has previously been incarcerated.
- e. If the inmate's criminal history is exclusively nonviolent.
- f. If the inmate has prior convictions for sex offenses against an adult or child.
- g. If the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming.
- h. If the inmate has previously experienced sexual victimization.
- i. The Inmate's own perception of vulnerability.
- j. If the inmate is detained solely for civil immigration purposes.

During the site review, the auditor was not able to follow an inmate through the admission and classification process. But during the site review, the auditor observed general intake operations and had the opportunity to speak with both the intake officers and Classification staff. They walked the auditor through an inmate intake and explained that during that process, inmates were informed of their right to be free from sexual abuse and harassment as well as the agency's zero-tolerance for sexual abuse and harassment and how to report instances of sexual abuse or harassment.

Interviews with the staff verified that upon admission within 72 hours, all inmates are screened for risk sexual abuse victimization and the potential for predatory behavior. Staff explained to the auditor that classification staff ask the PREA questions due to confidentiality and that the risk screening is part of the classification process. This is usually completed the next day after they arrive. However, medical also asks PREA related questions and will alert classification and mental health staff of any concerns.

During interviews with random inmates, a couple of the inmates do not remember their initial screening however, the remainder remember being asked PREA related questions during their admission; although none of the inmates remembered all of the PREA risk assessment questions. The Auditor asked the inmates if they were asked the risk screening questions. Most all inmates remembered at least something about the risk screening or some of the questions.

The screenings are completed on an objective screening instrument that includes: a classification questionnaire, a brief jail mental health screen, a booking inmate risks and needs assessment, and a PREA initial intake screening. All these tools are based on an individual points system, yes and no responses, and classification protocol. The objective classification screening includes the following criteria for the risk of sexual victimization: inmate mental, physical or developmental disabilities, age, physical build, previous incarcerations, criminal history violent or non-violent, prior sex convictions, whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming, previous sexual victimization, vulnerability perceptions, or if the inmate is detained solely for civil immigration purposes. The auditor reviewed this process with the staff assigned to conduct the screening. The objective classification questionnaire also assesses inmates for the risk of being sexually abusive by including the following criteria: prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse.

The classification staff complete the PREA screening within 72 hours, and usually the

next day. This screening is used by staff to assist in making housing and program decisions. The auditor reviewed this information and verified it is maintained with limited access. The auditor was provided a copy of and reviewed the screening form completed by the staff.

The auditor reviewed random inmate files and reviewed their booking reports and risk screenings in order to compare the admission date and the date of admission screening. All randomly selected files had received risk screening within 72 hours of booking. None of the files reviewed indicated concerns regarding the initial intake screening. Targeted interviews with Intake staff, as well as the PREA Coordinator verified that risk assessments are performed within 72 hours of booking.

Targeted interviews with random inmates revealed that most inmates recalled at least a portion of the initial screening and some of the risk assessment screening questions. The auditor reviewed the PREA risk assessment instrument, and it is objective as required by the standard. The questions are asked and the answers are recorded by the staff on the risk assessment form by the classification staff. There are areas on the form that allows for the inclusion of additional details related to the question, if additional data needs to be documented.

According to the PAQ and WTRJ Policy, the PREA screening instrument shall include 10 individual elements. Upon review of the screening instrument, the auditor determined that the screening instrument included all of the required elements.

According to WTRJ Policy the initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse in assessing the risk of inmates being potential abusers. The auditor reviewed the objective screening instrument and verified that the questions are present on the screening instrument and during the inmate file review, the same completed forms were in the inmate files. During targeted interviews with staff who conduct risk assessments, the auditor verified that they ask inmates if they have a history of violence and ask them to self-report their history of institutional violence. However, the staff also said that classification will review the inmate's criminal history, current offenses, as well as institutional history, if they have been in the WTRJ previously.

WTRJ Policy stipulates that no inmate shall be disciplined for refusing to answer or disclose information in response the risk assessment questions. According to targeted interviews with the staff as well as the PREA Coordinator, there have been no instances of inmates being disciplined for refusing to answer screening questions.

The PREA Coordinator confirmed that 30-day reassessments are being completed on all inmates. This is being completed by Classification staff. The auditor reviewed logs of 30-day reassessments. The auditor also reviewed random inmate files to determine if 30-day assessments had been completed.

Classification staff also indicated that an inmate's risk level is reassessed based upon a request, referral or incident of sexual assault. The WTRJ only operates one facility, therefore they are not required to reassess upon transfer. The Auditor randomly

	<p>reviewed inmate files and determined that the 30 day reassessments are being completed. However, the auditor determined that while the 30 day reassessments are being completed, this is being accomplished through a record review without input from the inmate, including their own perception of their vulnerability.</p> <p>The Auditor spoke with the PREA Coordinator and the PREA Coordinator regarding corrective action, including ensuring that they are getting input from the inmate during the 30-day reassessment.</p> <p>After a review, the Auditor determined the facility does not meet the requirements of the standard and corrective action is required.</p> <p>Corrective Action: The WTRJ shall ensure that input is received from the inmate during the 30 days reassessment process, as required and indicated in the FAQ. The WTRJ shall maintain written proof of reviews.</p> <p>Verification of Corrective Action: The Auditor was provided supplemental documentation onsite in the form of a memo to demonstrate corrective actions taken by the WTRJ administration regarding this standard.</p> <p>Additional Documentation Reviewed:</p> <ul style="list-style-type: none"> Completed 30-day reassessments with documentation of input from and acknowledgement by inmate <p>This was corrected during the post audit phase to include a revision of the process to ensure the inmate is being contacted for input during the reassessment process. The auditor spoke with the PREA Coordinator during the onsite review and he notified the staff of the revised procedure via memo. The WTRJ developed a form to document the 30-day reassessment with input from the inmate. Samples were provided to the auditor during the post audit phase. The WTRJ is now fully compliant with this standard.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> WTRJ Completed PAQ WTRJ Policy 5.15 Review of Screenings <p>Interviews with the following:</p> <ul style="list-style-type: none"> PREA Coordinator

- Classification staff
- Intake staff
- Supervisors Responsible for Conducting Unannounced Rounds

Observation of the following:

- Site review of inmate housing units

Findings:

The WTRJ policy 5.15 requires that screening information from the PREA risk assessment is used in making housing, bed work, education, and programming assignments. The classification staff complete a risk assessment screening upon the inmate's arrival to the facility. The staff use this information to make recommendations on housing, programs and referrals. Targeted interviews with Classification staff indicate that the results of the risk assessment and the interview with the inmate is used to determine classification decisions and make individualized determinations for each inmate.

WTRJ policy requires that the agency will consider housing for transgender or intersex inmates on a case-by-case basis in order to ensure the health and safety of the inmate and take into consideration any potential management or security problems. The policy requires that a transgender or intersex inmate's own view about their own safety shall be given serious consideration and that all transgender or intersex inmates are given the opportunity to shower separately from other prisoners.

During the site tour, the auditor reviewed all inmate housing units. All inmate housing units permit inmates to shower separately from one another. The WTRJ has housed transgender inmates during this reporting period. The auditor interviewed one transgender inmate during the onsite review. The inmate did not indicate any concerns regarding this standard. The auditor reviewed documentation for a previously housed transgender inmate and found no concerns related to this standard.

The policy stipulates that LGBTI inmates will not be placed in a dedicated facility, unit, or wing solely on the basis of such identification or status, unless the placement is established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates. Staff are aware of their responsibilities should they receive a transgender inmate with regard to this standard. Interviews with facility staff indicate that placement of any transgender or intersex offenders would be made on a case-by-case basis. WTRJ policy stipulates that placement and programming assignments for transgender inmates will be reassessed at least twice a year to review any threats to safety and a transgender inmate's views with respect to his or her safety will be given serious consideration. WTRJ policy allows for transgender inmates to shower separately. Interviews with facility administration corroborate these practices would be enforced if a transgender offender were received.

WTRJ policy states that transgender and Intersex inmate placements will be

	<p>reassessed at least twice each year to review any threats to the safety of the inmate. The inmate interviewed by the auditor had not been at the facility long enough to necessitate a review. However, staff are aware of their responsibility with respect to this provision of the standard.</p> <p>LGBTI offenders are not placed in dedicated housing areas. Interviews with staff confirm this practice would not occur. The auditor conducted informal discussions with inmates during the site review and no inmate mentioned being housed according to their sexual preference or identity. The auditor conducted a targeted interview with the Classification staff and asked if there were any dedicated housing units for LGBTI prisoners. The auditor was informed that inmates' housing was based upon objective finding and LGBTI inmates were not placed in dedicated units. A review of the roster indicated that identified LGBTI inmates are located in different housing areas.</p> <p>Random and informal inmate interviews concluded no issues reported due to other staff or inmates viewing the inmates while changing clothes, showering, or using the restrooms. The random staff interviews also revealed no concerns with this issue. The video monitoring equipment did not indicate concerns regarding this issue.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator • Supervisors and Staff Responsible for Supervising Inmates in Restrictive Housing <p>Findings:</p> <p>According to WTRJ Policy they do not place inmates who are at high risk for sexual victimization in restrictive housing unless alternatives have been considered and are not available. The inmate will not be held for more than 24 hours to complete this assessment. WTRJ policies are written in accordance with the standard and cover all mandated stipulations. According to the PAQ, there have not been any instances</p>

	<p>where inmates at risk for sexual victimization were placed in restrictive housing for the purpose of separating them from potential abusers. According to targeted interviews with staff who supervise inmates in restrictive housing, they are not aware of a case where an inmate was placed in restrictive housing as a result of being a high risk for sexual victimization. All staff interviewed, both formally and informally, indicate an inmate identified as high risk would be moved to another housing location and not placed in segregation unless the inmate requested it. A targeted interview with the PREA Coordinator also verified that no inmates during the audit period have been placed in restrictive housing involuntarily in order to separate them from potential abusers. He and other staff indicated that there was sufficient space and numbers of housing units to find a suitable place for an otherwise orderly inmate.</p> <p>The WTRJ Policy states that if inmates were placed in restrictive housing for involuntary protective purposes, they would be permitted programs and privileges, work and educational programs and any restrictions would be limited. Further, the policy stipulates that such an involuntary housing assignment would not normally exceed 30 day and such a placement would be documented and include the justification for such placement and why no alternative can be arranged. According to the policy, if an inmate is confined involuntarily under these circumstances, the facility shall review the continuing need at least every 30 days.</p> <p>Staff are aware of their responsibilities with regard to this standard, including the need for a review every 30 days. There have been no instances that required action with regard to this standard.</p> <p>During the on-site portion of the audit, the auditor reviewed all of the restrictive housing areas and had informal discussions with both inmates and staff. As verified by targeted interviews with the PREA Coordinator and staff supervising inmates in restrictive housing, the auditor did not identify any inmates who were involuntarily housed in restrictive solely for protective purposes.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. PREA Brochure

4. Inmate Handbook
5. Inmate Orientation
6. Site Review
7. YWCA MOU
8. WTRJ Website

Interviews with the following:

- PREA Coordinator
- Random Staff
- Random Inmates

Observation of the following:

- Observation of informal interactions between staff and inmates
- Observation of inmates using the telephone system
- Observation of Information Posters inside the housing units, adjacent to telephone and in the booking area

Findings:

The WTRJ Policy requires multiple mechanisms for the internal reporting of sexual abuse and harassment, retaliation by other inmates or staff for reporting, as well as mechanisms for reporting conditions that may have contributed to the alleged abuse. WTRJ policy is written in accordance with the standard and describes multiple methods for inmates to privately report sexual abuse, sexual assault, sexual harassment, retaliation against reporting, staff neglect, and contributing factors to these incidents. The auditor reviewed the inmate handbook and found that inmates are informed that they may report instances of abuse or harassment by reporting to staff members, both verbally and in writing, as well as by using the inmate telephone system to make a report to the PREA hotline. There are multiple internal ways for offenders to privately report PREA related incidents, including verbally to any staff member, grievance forms, a written note submitted to staff, anonymous reports, and third-party reports. They also have the ability to report through the tablets available in all offender housing areas. This information is received by offenders at intake, contained in the inmate handbook and on informational posters outside all offender housing areas, intake and various other locations throughout the jail. During random staff interviews, all staff mentioned that inmates could make a PREA report to staff, volunteers or contractors as well as making a report using a note. In addition, several staff members also mentioned the PREA Hotline that could be called from the inmate telephone. During the site review, the auditor observed posters adjacent to the inmate telephones. Random offender interviews revealed that most offenders would feel comfortable approaching and reporting to staff. Offenders felt that staff would ensure their safety.

The facility has a Memorandum of Understanding with the YWCA to provide anonymous inmate reporting to a public entity that is not part of the agency. The YWCA will contact the PREA Coordinator at WTRJ to initiate an investigation promptly if they receive a report of sexual abuse or sexual harassment. This information is in the inmate handbook. During the site review, the auditor observed PREA

informational posters adjacent to the inmate telephones that have the Hotline number where reports can be taken and referred immediately for investigation. Most offenders mentioned this as a potential reporting method, indicating the offenders are aware of this information.

At the time of the on-site audit, there were no inmates detained solely for civil immigration purposes. The facility reports they have not had any such inmates in the last three years. If the WTRJ received an inmate detained solely for civil immigration, staff would provide information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

Staff interviews revealed that they are aware of their responsibilities with regard to reporting and would accept and act on any information received immediately. Information on how to report on behalf of an inmate is listed on the agency website. Staff indicated they would accept and act on third-party reports, including from another inmate.

WTRJ policy and the inmate handbook stipulates that 3rd party reports of sexual abuse or harassment will be accepted verbally or in writing. Random inmate and staff interviews revealed that the staff and inmates are aware that third party reports will be accepted and treated just like any other reports. There has been no third party report in the last 12 months.

A targeted interview with the PREA Coordinator verified that there are multiple ways to make PREA complaints by both staff and inmates, including the inmate phone system, anonymous letters, as well as third party reporting by family and friends. In addition, inmates can report using the tablets available in the inmate housing areas. The auditor reviewed investigative files for allegations of sexual misconduct within the last year. The allegations were reported in a variety of ways, indicating the inmates are aware of the multiple methods.

WTRJ policy requires that all staff accept reports of sexual abuse or harassment both verbally and in writing and that those reports shall be documented in writing by staff and responded to immediately. During targeted interviews with staff, the majority of the random staff interviewed told the auditors that if an inmate reported an allegation of sexual abuse or harassment, they would immediately intervene by separating the victim and alleged perpetrator. A few of the staff members told the auditor that they would notify their supervisor of such an allegation when they received the report before taking action with the inmates. However, in all random staff interviews, each staff member stated that they would take action without delay and would accept a verbal complaint and would be required to make a written report of the incident. During random inmate interviews, the inmates were asked if they knew that they could make a verbal report of an incident of sexual harassment. All the inmates stated that they knew that they could just tell a staff member or officer if something happened.

Staff may privately report sexual abuse or harassment of inmates either verbally or in writing to their supervisors, or facility administrators directly. Staff can also use the hotline for reporting. Staff members are informed of this provision during PREA

	<p>training. Staff interviews revealed that they are aware they can go directly to facility administration to report sexual abuse and harassment of inmates and all staff that were randomly interviewed answered that they would report any such incident to their supervisor.</p> <p>After a review, the Auditor determined that the facility meets the minimum requirements of the standard since they have at least one method for inmates to report outside the agency.</p> <p>Corrective Action: None</p>
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115.52	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 PREA 3. WTRJ Policy 5.9 Inmate Grievance Procedures 4. Inmate Grievance Worksheet 5. Inmate Handbook 6. Staff Interviews <p>Findings:</p> <p>Administrative procedures are in place to address WTRJ grievances regarding sexual abuse and harassment, therefore the WTRJ is not exempt from this standard. The policies are written in accordance with all provisions of the standard, addressing all required aspects. The policy explains the administrative procedures that address inmate grievances relative to sexual abuse, sexual assault, and sexual harassment. This policy does not place a time limit for an inmate to submit a grievance relating to these topics. Inmates are not required to use any informal grievance processes when submitting a grievance regarding sexual abuse. WTRJ reports in the PAQ there have been no grievances filed within the past 12 months alleging sexual abuse. Interviews with the PREA Coordinator confirm the information on the PAQ. Interviews with staff indicate they are aware of their responsibilities with respect to the standard and indicate an inmate would be allowed to file a grievance regarding sexual abuse or harassment without regard to time limit. There have been no instances that required action with regard to this standard. The auditor reviewed the inmate handbook and it contains the general provisions for filing a grievance.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Relied upon to make Compliance Determination:

1. WTRJ Completed PAQ
2. WTRJ Policy 5.15
3. Inmate Handbook and Website
4. Hotline Information
5. PREA brochure
6. MOU with YWCA

Interviews with the following:

- a. PREA Coordinator
- b. Random Inmates
- c. Random and Targeted Staff
- d. Mental Health and Medical Staff

Observations of the Following:

- PREA informational Posters throughout the facility and public area

Findings:

The WTRJ policy is written in accordance with the standard. The facility provides inmates with access to local, state, or national victim advocacy or rape crisis organizations, including toll-free hotline numbers. The policy requires reasonable communications between inmates and those organizations and agencies, in as confidential manner as possible. The WTRJ informs inmates of the extent to which these will be monitored prior to giving them access. The auditor confirmed these services are provided at no cost to the inmate. Volunteers, including those from YWCA receive training regarding the Virginia mandatory reporting laws, and facility policy regarding volunteer services. There have been no incidents reported that required confidential support services during this audit period. Staff interviews indicate they are aware of their obligations under this standard.

The Western Tidewater Regional Jail utilizes the services of the YWCA, a non-profit organization providing confidential services to persons experiencing domestic or sexual violence in South Hampton Roads. WTRJ established a Memorandum of Understanding with this agency in 2019 and per the MOU, the agreement will remain in force unless either party terminates in writing. The Auditor was provided a copy of the MOU and verified the agreement for services. The MOU may be revised at any time by either party and the terms of the MOU do not expire without written notice by both parties. The YWCA information is posted in all inmate living units near the phones, listed on the kiosks and tablets, provided in the inmate handbook, and listed

	<p>on the initial intake PREA brochure provided upon arrival to the facility.</p> <p>The auditor reviewed the WTRJ handbook, which included information regarding the availability of outside confidential support services for victims of sexual abuse and harassment. During the site review, the auditor viewed posters that notifies inmates of the availability of a third-party reporting hotline. WTRJ policy requires that inmates and staff are allowed to report sexual abuse or harassment confidentially and requires that medical and mental health personnel inform inmates of their limits of confidentiality. Targeted interviews with medical and mental health reveal they are aware of their obligations to inform the inmates of the limits of confidentiality.</p> <p>Inmates are informed of the services available at intake. Inmate interviews indicated that not all of the inmates are aware of the services that are available to them. Most inmates interviewed indicated they knew they could ask to speak to mental health if they needed to, but some were unsure of other services that are available, but felt sure there was something.</p> <p>There have been no inmates detained solely for civil or immigration purposes.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Inmate Handbook 4. WTRJ Website 5. Staff Interviews 6. Inmate Interviews <p>Findings:</p> <p>The facility has established a procedure to receive third-party reports of sexual abuse and sexual harassment. The WTRJ policy is written in accordance with the standards, stipulating that all third-party reports will be accepted and investigated. The WTRJ publicly provides a method for the receipt of third party reports of sexual abuse or harassment. The Auditor reviewed the WTRJ website. The WTRJ website has information on its PREA page that contains the PREA policy. It also contains reporting information for jail officials should any one wish to report an incident of sexual abuse</p>

	<p>or harassment on behalf of an inmate.</p> <p>There are posters throughout the facility and in the front visitation lobby regarding third-party reporting and the number to contact with a complaint. The inmates are provided a number to contact the YWCA, and this information is posted in the PREA intake document, inmate handbook, PREA video, and a pamphlet is posted near the inmate phones in the living units.</p> <p>Staff interviews reveal that they are aware of their obligation to accept and immediately act on any third-party reports received. Staff indicate they will accept a third-party report from a family member, friend or another inmate. They would document the report and inform their supervisor, and the report would be handled the same as any other allegation or report and investigated thoroughly.</p> <p>Offenders are provided this information at intake and offender interviews indicate that they are aware that family or friends can call or write and report an incident of sexual abuse on their behalf. The offenders felt as if the staff would act on any reports received and take all reports seriously and investigate them to the fullest extent.</p> <p>The WTRJ has not received any third-party reports of sexual assault or harassment during this reporting period.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ POLICY 5.15 3. Review of investigative files <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Medical and Mental Health Staff • Random Staff <p>Findings:</p> <p>WTRJ policy is written in accordance with the standard and requires all staff, contractors and volunteers to immediately report any knowledge, suspicion or</p>

information related to sexual abuse or harassment to a supervisor. During the site review, several staff members were asked if they were required by policy to report any instances or suspicions of sexual abuse or harassment. All of the staff members responded that they were required to report any such instances. The auditor also informally asked the same question of two contractor staff, and they stated that they would report any instance of sexual abuse or harassment. Interviews with staff indicate they are very clear with regard to their duties and responsibilities with regard to reporting PREA related information, including anonymous and third-party reports. During random staff interviews, all of the staff members stated that they were required by policy to report any instance of sexual abuse or harassment or retaliation for making reports. They were also asked if that included alleged behavior by staff or contractors or volunteers. All staff members who were randomly interviewed said that they were obligated to report any such allegations or suspicions, no matter who it involved. Staff articulated their understanding that they are required to report any information immediately and document such in a written report.

WTRJ policy requires confidentiality of all information of sexual abuse or harassment beyond what is required to be shared as a part of the reporting, treatment, or investigation. During the random staff interviews, staff were asked about their requirement for maintaining confidentiality. The staff understand the need to keep the information limited to those that need to know to preserve the integrity of the investigation. All of the interviewed staff stated that details related to either inmate allegations or staff allegations should remain confidential. When asked who they report or discuss details of a sexual abuse or sexual harassment allegation with, staff informed the Auditor they only discuss details with supervisors and investigators. When asked if they ever discuss it amongst other co-workers, the answer was no. A targeted interview with the PREA Coordinator verified that all investigative files are kept confidential with limited access.

The WTRJ has not housed any youthful offenders during this audit period.

WTRJ policy requires that all medical and mental health personnel report the mandatory reporting requirements and limits of confidentiality to victims of sexual abuse. Interviews with medical staff indicate they are aware of their mandatory reporting requirements and comply with the mandate to disclose the limits of their confidentiality. Medical staff are aware of their responsibilities to report information, knowledge, or suspicions of sexual abuse, sexual harassment, retaliation, staff neglect or violations of responsibilities which may have contributed to an incident.

Targeted interviews with the PREA Coordinator, as well as random staff interviews verified that the agency reports all allegations of sexual abuse or harassment received from a third party are referred for investigation and immediately acted upon.

All allegations of sexual abuse and harassment are reported to the on-duty supervisor, who initiates an investigation. The reporting officer and supervisor create a report, and this report is forwarded to the PREA Coordinator for review and further action. In addition, the PREA Coordinator and other command staff are notified through the chain of command.

	<p>The Auditor conducted a formal interview with one of the facility investigators, who indicated that all allegations are immediately reported and investigated. There were 7 allegations for the previous 12 months. The Auditor reviewed the investigative files for all 7 allegations and determined that they were promptly investigated. The YWCA provides hotline services to the Western Tidewater Regional Jail and the Memorandum of Understanding indicates these services as third-party reporting. Investigative reports indicated the investigation began immediately upon the staff receiving an allegation.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.62	Agency protection duties
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator • Random Staff • Random Inmates <p>Findings:</p> <p>WTRJ policy is written in compliance with the standard and requires that whenever there is a report that there is an incident of sexual abuse or harassment, the victim should be immediately protected.</p> <p>Random interviews with staff indicate they are very clear about their duty to act immediately if an offender is at risk of imminent sexual abuse. Staff indicated they would immediately remove the inmate from the situation, keep them separate and find alternate housing. Staff stated they would ensure the inmate was kept safe, away from the potential threat and an investigation was completed by the supervisor. Classification staff would also be notified. Targeted interviews with the Jail Administrators and the PREA Coordinator confirmed that it is the policy of the agency to respond without delay when inmates are potentially at risk for sexual abuse or any other types of serious risk.</p>

	<p>Segregation may be ordered immediately to protect the inmate or others, but the action must be reviewed within 72 hours by the appropriate authority.</p> <p>Offender interviews revealed that they felt the staff would act promptly to any allegation of sexual abuse. For the most part, the inmates stated they felt comfortable going to any staff member and felt that the staff would ensure their protection.</p> <p>WTRJ reports in the PAQ that there have been no determinations made that an offender was at substantial risk of imminent sexual abuse. There was no evidence to suggest any concerns with this standard.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator <p>Findings:</p> <p>The agency’s policy is written in accordance with the standard and requires that if the Superintendent or his/her designee receives an allegation regarding an incident of sexual abuse that occurred at another facility, he must make notification within 72 hours. During this review period, the facility reported receiving no notifications from an inmate alleging sexual abuse while incarcerated at another facility that needed to be reported. According to targeted interviews with the Superintendent and PREA Coordinator, if they received such a notice, they would immediately report such an allegation to the facility administrator and document such a notice. They confirmed their understanding of their affirmative requirement to report allegations in accordance with the standard.</p> <p>WTRJ requires that if the Superintendent or designee receives notice that a previously incarcerated inmate makes an allegation of sexual abuse that occurred in the WTRJ, it would be investigated in accordance with the standards. The WTRJ reported receiving no notifications in the past 12 months from another facility that one of their former</p>

	<p>inmates alleged being sexually abused while incarcerated at the WTRJ. Interviews with the PREA Coordinator confirm the staff are aware of their obligation to fully investigate allegations received from other facilities.</p> <p>Further, interviews with the staff, both formal and informal, revealed that staff is aware of their obligations with regard to reporting, and there is a universal understanding and commitment to immediately report any allegations of sexual abuse or harassment, which increases the probability that abuse will be detected, reported and investigated.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Facility Action Plan 4. Review of investigative files 5. Interviews with Medical Staff 6. Interviews with Random Staff and PREA Coordinator <p>Findings:</p> <p>The WTRJ policy is written in accordance with the standard and indicates actions staff should take in the event of learning an inmate has been sexually assaulted. Policy requires that when an inmate reports an incident of sexual abuse, the responding staff member: Separate the alleged victim and alleged abuser, Preserve and protect and evidence, if the abuse allegedly occurred within a time period that would allow the collection of evidence the first responded advise the victim not take any actions that would destroy any evidence, and take action to prevent the alleged abuser from destroying evidence.</p> <p>There has been five instances of reported sexual abuse during this review period, however the allegations did not require the first responder to preserve or collect physical evidence. All other allegations for the previous 12 months did not require evidence collection or medical treatment. The alleged victims and perpetrators were immediately separated upon staff learning of the incident.</p> <p>There were no inmates present during the on-site portion of the audit who had</p>

reported sexual abuse. The Auditor reviewed the reports associated with the reported allegations, three of which were determined to be unfounded and two found to be unsubstantiated. All appropriate actions were taken by the first responders and other staff in accordance with the standard.

The Auditor conducted formal and informal interviews with staff first responders. Security first responders were asked to explain the steps they would take following an alleged sexual abuse reported to them. Staff interviewed said that they would notify their supervisor after separating the inmates and wait for further instructions. The staff were able to appropriately describe their response procedures and the steps they would take, including separating the alleged perpetrator and victim and securing the scene and any potential evidence. The Auditor was informed the scene would be preserved and remain so until the Investigator arrived to process the scene. A targeted interview with the PREA Coordinator and Investigator indicated that once the initial steps were done and the scene was secure, the PD would be notified, if required.

The Auditor conducted interviews with supervisory staff and investigators. The Auditor asked what the supervisor response and role would be following a report of sexual assault. The supervisor stated that they would ensure the alleged victim and alleged abuser were removed from the area and kept separately in the facility. The crime scene would be secured and staff member posted to ensure no one entered the scene. The alleged victim would be taken to medical for treatment and transported to the ER for a forensic exam if needed. The PREA Coordinator would also be informed. The supervisor stated the Investigator would be the only one allowed in the crime scene to process the evidence.

WTRJ Policy requires that if the first responder is not a security staff member, the staff immediately notify a security staff member. There were no instances during the audit period where a non-security staff member acted as a first responder to an allegation of sexual abuse. The Auditor conducted formal interviews with non-security personnel. Staff were asked what actions they take following an alleged sexual abuse reported to them. Staff indicated they would ensure the victim remains with them and immediately inform an officer. They would also request the victim not take actions to destroy evidence.

Medical personnel interviewed stated they would first ensure a victim's emergency medical needs are met. They stated they would request the victim not to use the restroom, shower, or take any other actions which could destroy evidence. Medical staff informed they would immediately notify a supervisor if they were the first person to be notified of an alleged sexual abuse. Victims would be transported off-site for forensic exams if needed.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

115.65	Coordinated response
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 340 1082 374">Evidence Relied upon to make Compliance Determination:</p> <ol data-bbox="256 412 911 573" style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Facility Action Plan 4. Interview with PREA Compliance Manager <p data-bbox="256 611 384 645">Findings:</p> <p data-bbox="256 683 1449 844">WTRJ has a coordinated facility plan to address actions in response to an incident of sexual abuse among facility staff, including first responders, supervisory staff, medical, investigative staff and facility administrators. The facility plan is an attachment to the WTRJ PREA policy.</p> <p data-bbox="256 882 1477 1122">Interviews with multiple staff indicate that they understand their duties in responding to allegations of sexual assault and are knowledgeable in their role and the response actions they should take. The WTRJ has a Facility Action Plan document to ensure that all aspects of the response are covered and nothing is missed. Many of the facility staff involved in responding to incidents of sexual abuse are a part of the incident review team.</p> <p data-bbox="256 1160 1449 1279">There have been five instances of reported sexual assault during this review period, however none of the allegations required the first responder to preserve or collect physical evidence.</p> <p data-bbox="256 1317 1469 1391">The alleged victims and perpetrators were immediately separated upon staff learning of the incident.</p> <p data-bbox="256 1429 1426 1547">A review of the investigative files reveal that all appropriate steps were taken with regard to the standard. Supervisory staff were notified by the staff that became aware of the incident, as well as the PREA Coordinator.</p> <p data-bbox="256 1585 1477 2078">The auditor interviewed several staff, including the Jail Administrators and PREA Coordinator who all described the jail's coordinated response in the case of an allegation of sexual abuse or harassment. The response begins with the allegation and first responder action to protect the victim, secure the crime scene and protect any potential evidence. The initial investigation begins with the first responders and supervisors and then the facility investigators. Depending on the nature of the allegation, the investigation will either begin as administrative or criminal. In the case of a criminal investigation, the victim is treated in accordance with policy and provided forensic exams and ancillary services, as well as advocacy services. The remainder of the investigation is dictated by the nature of the allegation. Regardless, all investigations are completed and a finding is assigned. It may be referred for criminal prosecution or handled administratively and could require medical and</p>

	<p>mental health services and monitoring for retaliation and notice to the victim about the outcome of the investigation.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator <p>Findings:</p> <p>The WTRJ has not entered into any agreement that limits the agency’s ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p>The WTRJ policy prohibits entering into a collective bargaining agreement. Virginia Code §40.1 - 57.2 prohibits state, county, and municipalities from collective bargaining or entering into a collective bargaining contract with a union with respect to any matter relating to an agency or their employment service.</p> <p>Interviews with both the Jail Administrator and the PREA Coordinator verified that there is not a collective bargaining agreement in place.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Relied upon to make Compliance Determination:

1. WTRJ Completed PAQ
2. WTRJ Policy 5.15

Interviews with the following:

- PREA Coordinator
- Agency Administrator

Findings:

The agency's policy is written in accordance with the standard and requires staff and inmates who report substantiated allegations of sexual abuse or harassment are protected from retaliation for making such reports. WTRJ policy states that, "Staff or inmates who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations will not be subject to retaliation by other staff or inmates. After the report of sexual abuse, the Superintendent or their designee will monitor the conduct and treatment of inmates or staff who reported the sexual abuse or inmates who experience the sexual abuse for at least 90 days for possible retaliation."

The Auditor conducted an interview with the staff member responsible for monitoring retaliation. The Auditor asked the staff member how he goes about monitoring retaliation. The staff member stated he reviews disciplinary charges and Incident Reports and any other actions related to the inmate including documents maintained in an inmate's file and his/her electronic record.

The Auditor asked the staff member the amount of time he will monitor for acts of retaliation. He stated the monitoring period would be a minimum of 90 days. In the event the inmate cannot be protected at the facility, the staff can and will recommend a transfer.

The Auditor asked how staff ensures the protection of an inmate who is being retaliated against by a staff member. The Auditor was informed the administration will discuss staff assignments with the supervisor to ensure the staff member is not placed in an area where the inmate is housed. The retaliation would be reported through the chain of command to ensure the staff member who is retaliating against an inmate is appropriately disciplined, if need be.

The PREA Coordinator and the Classification Supervisor both have the authority to move inmates around the facility or take other protective measures to assure inmates were not retaliated against. In addition, the Jail Administrator has the authority and would intervene in any way necessary to protect employees from retaliation if they reported incidents of sexual abuse or harassment. The Superintendent monitors the progress of PREA investigations and receives regular briefings until the investigation is complete.

There have been no reported incidents of sexual abuse/harassment that would

	<p>require the staff to invoke any protections from retaliation. In addition, staff interviews confirmed their knowledge of the requirements for protection from retaliation for both inmates and staff members. All staff members interviewed affirmed that they had an affirmative requirement to report any incident of retaliation and also reported that they know that they could report such incidents anonymously.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Review of all Investigative Files from the past 12 Months <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Classification Supervisor <p>Observation of the following:</p> <ul style="list-style-type: none"> • Observation of Inmates in restrictive housing <p>Findings:</p> <p>The agency's policy is written in accordance with the standard and requires the use of segregated housing be subjected to the requirements of PREA standard 115.43. Both formal and informal interviews with staff state they would not place an inmate in segregation for reporting sexual abuse or assault. Staff indicated they would not ordinarily place a sexual assault victim in segregation unless he or she had requested it. Staff explained that other alternatives are explored and segregation is utilized as a last resort. The Auditor was informed of and observed several areas in the facility to place sexual abuse victims to ensure they are protected from abusers without having to place the victim in segregated housing.</p> <p>The auditor reviewed all of the WTRJ restrictive housing areas and through informal discussions with supervising officers, no staff indicated that inmates were assigned to restrictive housing as a result of their sexual vulnerability.</p> <p>The agency has had no incidents that have required involuntary restrictive protective custody. Interviews with the supervisory staff as well as the PREA Coordinator and Classification Supervisor confirmed their knowledge of their requirements to</p>

	<p>appropriately adhere to the elements of standard 115.43, after a victim's allegation of abuse.</p> <p>In addition, during targeted interviews with the Classification Supervisor and the PREA Coordinator, they both verified that there have been no instances of inmates being placed in restrictive housing as a result of the sexual victimization or vulnerability. There were no records or documentation to review regarding this standard because there were no instances of the use of restrictive housing to protect and inmate who was alleged to have suffered sexual abuse.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Review of Investigative files 4. Interviews with Staff 5. Documentation of Investigator Training 6. Certificates of Completion for Departmental Investigators 7. Training Curricula for Investigative Training specific to Corrections <p>Findings:</p> <p>The WTRJ policy is written in accordance with the standard. Policy requires that the agency conduct administrative investigations of sexual abuse and harassment and the Suffolk Police Department conducts any criminal investigations. The WTRJ policy stipulates that they will respond to complaints that are received internally and externally by a third party. The policy requires that investigations are responded to promptly. The WTRJ conducts an investigation on all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports. The policy requires administrative investigations to include efforts to determine whether staff actions or failure to act contributed to an act of sexual abuse. Investigative reports are required to include a description of physical evidence, testimonial evidence, the reason behind credibility assessments, and investigative facts and findings.</p> <p>The auditor reviewed investigative reports for the 7 allegations of sexual misconduct during the past 12 months. All reports contained the required elements as dictated by the standard.</p>

If at any time during the investigation, it appears the charges are criminal in nature, the investigation will be referred to the Suffolk Police Department. The facility is required to maintain written investigative reports for as long as the alleged abuser is incarcerated or employed by the WTRJ, plus an additional 5 years. Policy prohibits the termination of an investigation if an inmate is released or a staff member is terminated or terminates employment.

WTRJ investigators are required by policy to cooperate with outside investigators and attempt to communicate to remain informed about the progress of a sexual abuse investigation. According to targeted interviews with the PREA Coordinator, if an outside agency were to conduct an investigation of sexual abuse, the departmental investigator serves as a liaison and would keep jail administrators informed of the progress of the investigation. There have been no investigations conducted by an outside agency during the audit period.

At the time of the on-site audit, the facility employed and provided training records for 2 staff members who have received specialized training to conduct sexual abuse investigations in confinement facilities. The auditor was provided training curricula and training certificates of designated investigators. The auditor reviewed and verified that each of the facility investigators had proof of receiving the specialized training required by the standard. Each investigator had received specialized training to conduct sexual abuse investigations in confinement settings. Targeted interviews with a facility investigator verified they are available to respond immediately if necessary.

The Auditor conducted a formal interview with one of the facility's designated PREA Investigators. The Auditor asked the Investigator to describe the process when he is conducting an investigation. He stated he interviews the victim, alleged perpetrator, inmate witnesses, and staff witnesses, if applicable. He stated he reviews the scene, preserves any evidence if necessary and then begins looking at other documents. He reviews criminal histories on all inmates involved, disciplinary history, incident reports, and classification actions. The investigator reviews video footage if applicable, telephone recordings, staff logs, and any other relevant items which could be considered evidence to support the determination. He will notify the facility administration of the allegation. If at any point during the investigation he determines there could be potential criminal charges involved, the investigation would be reviewed and discussed, and the Police Department would be contacted. The Investigator stated he begins the investigation immediately after receiving an allegation.

All investigative files are maintained in the PREA Coordinator's office in a locked cabinet with limited access. Investigative files are maintained for a minimum of five years after the abuser has been released or a staff abuser is no longer employed. The WTRJ does not require inmates to submit to a polygraph examination during sexual abuse investigations.

If an allegation is reported anonymously, the PREA Coordinator/Investigator stated the investigation would be handled the same as any other investigation. Staff indicate

	<p>they would continue the investigation even if an inmate is released or a staff member terminates employment during the investigation.</p> <p>The WTRJ has had 7 incidents that required investigation during the review period. The auditor reviewed investigative reports for all 7 allegations of sexual misconduct during the past 12 months. A review of the investigative files indicate that the investigators are conducting the investigations in accordance with the standard. The reports show evidence that the investigator is gathering evidence, interviewing witnesses, victims, perpetrators, and conducting the investigation promptly. The investigation appears to be conducted promptly, thoroughly and objectively.</p> <p>There have been no criminal investigations during the previous 12 months and no substantiated allegations of sexual assault or harassment during this audit period.</p> <p>After a review, the Auditor determined the facility substantially meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Review of Investigative files for the past 12 months <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Investigative staff <p>Findings:</p> <p>The agency's policy is in compliance with the requirements of the standard and imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>A formal interview with both the PREA Coordinator and an investigator confirmed that the staff responsible for administrative adjudication of investigations is aware of the requirements of the evidentiary standard. There have been 7 allegations of sexual abuse or harassment within the last 12 months for which the auditor reviewed the investigative files. There has been no substantiated allegations of sexual abuse or harassment during this audit period. A review of the files and interview indicates that the investigations are being conducted in accordance with the standard.</p> <p>After a review, the Auditor determined the facility meets the requirements of the</p>

	<p>standard.</p> <p>Corrective Action: None</p>
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115.73	Reporting to inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Review of investigative files and notification to inmate <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Investigator <p>Findings:</p> <p>The WTRJ policy is written in accordance with the standard and requires and inmate be notified when a sexual abuse allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. WTRJ policy states:</p> <p>Following an investigation into allegations of sexual abuse or sexual harassment, the inmate will be informed whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.</p> <p>Following an inmate’s allegation that a staff member committed sexual abuse against the inmate, the Jail will inform the inmate (unless the Jail has determined the allegation is unfounded) whenever:</p> <ol style="list-style-type: none"> a. The staff member is no longer posted within the inmate’s housing unit. b. The staff member is no longer employed at the Jail. c. The Jail learns that the staff member has been indicted on a charge related to sexual abuse within the Jail. d. The Jail learns that the staff member has been convicted on a charge related to sexual abuse within the facility. <p>Following an inmate’s allegation that another inmate has sexually abused them, the Jail will inform the alleged victim whenever:</p> <ol style="list-style-type: none"> a. The Jail learns that the alleged abuser has been indicted on a charge related to sexual abuse within the Jail. b. The Jail learns that the alleged abuser has been convicted on a charge related to sexual abuse within the Jail. <p>All notifications and attempted notifications will be documented.</p>

	<p>The auditor conducted targeted interviews with the PREA Coordinator. The targeted interview verified that there have been no external investigations in the past 12 months. The agency is responsible for both administrative investigations only. If the investigation was conducted by Suffolk Police Department, the Memorandum of Understanding specifies the requirements necessary to inform the inmate regarding the case.</p> <p>The Auditor conducted an interview with the PREA Coordinator and an Investigator. They indicated that inmates are informed of the results of an investigation at the conclusion of the investigation. The Investigator will notify the inmate and document the notification.</p> <p>During the past 12 months, there have been 7 allegations of sexual abuse or harassment. There were no inmates who reported sexual abuse or harassment in custody during the on-site portion of the audit for targeted interviews.</p> <p>The Auditor reviewed the investigative files for all 7 reported allegations of sexual assault or harassment. The WTRJ made notification to the inmates at the conclusion of the investigation as required. Interviews with the facility investigator confirmed their knowledge of their affirmative requirement to report investigative finding to inmates in custody.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Interviews with Staff <p>Findings:</p> <p>The WTRJ PREA and disciplinary policies were reviewed and are in compliance with the requirements of the standard. Policy states:</p> <ol style="list-style-type: none"> 1. Western Tidewater Regional Jail staff will be subject to disciplinary sanctions up to and including termination for violating the sexual abuse and sexual harassment policies. 2. Staff that has engaged in sexual abuse will be terminated from the Western Tidewater Regional Jail.

3. Other disciplinary sanctions for violating the sexual abuse or sexual harassment policy that does not include actually engaging in sexual abuse will be based on the following:

- a. The nature and circumstances of the acts committed.
 - b. The staff member's disciplinary history.
 - c. The sanctions imposed for similar offenses by other staff with similar histories.
4. All terminations or resignations for violations of the Jail's sexual abuse or sexual harassment policy will be reported to the Suffolk Police Department unless the activity was not criminal.

Staff is subject to disciplinary sanctions up to and including termination for violating the sexual abuse or sexual harassment policies. Policy requires that staff found responsible for sexual abuse of an inmate shall be terminated from employment. Employees who are found to have violated jail policy related to sexual abuse and harassment but not actually engaging in sexual abuse shall be disciplined in a manner commensurate with the nature and circumstances of the acts as well as the previous disciplinary history of the staff and comparable to other comparable offenses by other staff with similar disciplinary histories.

According to the submitted PAQ, in the past 12 months, there were no staff terminations or disciplinary actions related to the sexual abuse or harassment of inmates. Discussions with the PREA Coordinator and Jail Administrator verified that there were no terminations or disciplinary actions related to sexual abuse or harassment of inmates in the past 12 months.

Interviews with facility staff and administrators verified that staff consider a violation of the PREA policy to be of sufficient seriousness to warrant termination and prosecution in accordance with the law. In staff interviews, the staff were aware that the agency has a zero-tolerance policy regarding sexual abuse, and any such incidents would be investigated and reported to the appropriate agency for prosecution, if necessary.

The Auditor interviewed facility administration regarding the facility's staff disciplinary policy. Facility administration indicated that if a staff member is terminated for violating the facility's sexual assault and harassment policy, and if the conduct is criminal in nature, it will be referred to the Police Department and Commonwealth Attorney's office for possible prosecution. If an employee under investigation resigns before the investigation is complete, or resigns in lieu of termination, that does not terminate the investigation or the possibility of prosecution if the conduct is criminal in nature. The facility would still refer the case when a staff member terminates employment that would have otherwise been terminated for committing a criminal act of sexual abuse or sexual harassment. Staff confirmed past incidents being referred to law enforcement for prosecution and notifying the applicable licensing board upon termination or resignations in lieu of termination.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Interviews with Staff <p>Findings:</p> <p>The WTRJ PREA and disciplinary policies were reviewed and are in compliance with the requirements of the standard. WTRJ policy states: Any contractor or volunteer who engages in sexual abuse will be prohibited from contact with inmates and will be reported to Suffolk Police Department unless the activity was not criminal. In case of any other violation of agency sexual abuse or sexual harassment policy by a contractor or volunteer, the Jail will consider whether to prohibit further contact with inmates.</p> <p>Policy stipulates that contractors and volunteers who violate the sexual abuse or sexual harassment policies are prohibited from having contact with inmates and will have their security clearance for the WTRJ revoked. In the past 12 months, there have been no instances where volunteers or contractors have engaged in sexual abuse or harassment. The PREA Coordinator and Jail Administrator verified during targeted interviews that there had been no instances of sexual abuse or harassment by contractors or volunteers in the past 12 months.</p> <p>A targeted interview with 3 contract staff members verified that they consider a violation of the PREA policy to be of sufficient seriousness to warrant termination from the facility, and possible prosecution in accordance with the law. The contract staff were aware that the agency has a zero-tolerance policy regarding sexual abuse, and any such incidents would be investigated and reported to the appropriate agency for prosecution, if necessary.</p> <p>The Auditor interviewed facility administration regarding the disciplinary policy regarding contract staff and volunteers. Facility administration indicated that contractors and volunteers who violate the sexual abuse or sexual harassment policies will have their security clearance revoked immediately. Contract staff would most likely be terminated by the contract employer. If the conduct is criminal in nature, it will be referred to the police department for investigation and the Commonwealth Attorney's office for possible prosecution.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Relied upon to make Compliance Determination:

1. WTRJ Completed PAQ
2. WTRJ Policy 5.15
3. Inmate Handbook
4. Review of Investigative Files
5. Review of Classification Records
6. Interviews with Staff

Findings:

The WTRJ policy directs that inmates are not permitted to engage in non-coercive sexual contact and may be disciplined for such behavior. Policy 5.15 states: Inmates will be subject to disciplinary sanctions through a formal disciplinary process following:

- a. An administrative finding that the inmate engaged in Inmate-on-Inmate sexual abuse.
- b. Following a criminal finding of guilt for Inmate-on-Inmate sexual abuse. Inmate disciplinary sanctions will take in consideration the following:
 - a. The nature and circumstances of the abuse committed.
 - b. The inmate’s disciplinary history.
 - c. The sanctions imposed for similar offenses by other inmates with similar histories.
 - d. Inmates’ mental disabilities or mental illness.

The Jail will discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. An inmates’ report of sexual abuse made in good faith and based on reasonable belief will not be disciplined for falsely reporting an incident or lying, even if the investigation does not establish evidence sufficient to substantiate the allegation. Western Tidewater Regional Jail prohibits all sexual activity between inmates and will discipline inmates for any such activities. Western Tidewater Regional Jail will not deem the activity as sexual abuse if it was not coerced.

Staff verified their understanding that the facility is prohibited from disciplining an inmate who makes a report of sexual abuse in good faith and based on a reasonable belief the incident occurred, even if the investigation does not establish sufficient evidence to substantiate the allegation. WTRJ prohibits sexual activity between inmates. Inmates found to have participated in sexual activity are internally disciplined for such activity. Staff verified that if the sexual activity between inmates is found to be consensual, staff will not consider the sexual activity as an act of sexual abuse.

WTRJ policy states inmates are subject to formal disciplinary action following an

administrative finding that they engaged in inmate-on-inmate sexual abuse. According to the submitted PAQ, there have been no instances of inmate-on-inmate sexual abuse or substantiated allegations of staff on inmate sexual abuse or harassment or criminal findings of guilt for inmate-on-inmate sexual abuse. The auditor reviewed the investigative files for all 12 allegations of sexual misconduct within the last 12 months.

According to WTRJ policy, disciplinary action for inmates is proportional to the abuse committed as well as the history of sanctions for similar offenses by other inmates with similar histories.

WTRJ policy requires that staff consider whether an inmate's mental health contributed to their behavior before determining their disciplinary sanctions.

The WTRJ does not have mental health staff available at all times but has mental health staff available during business hours and on call for emergent needs and can transfer inmates if they need more in-depth mental health treatment. Any decision to offer counseling or therapy to offenders and the initiation of any such counseling or therapy for individuals who have committed sexual offenses would be done at the discretion of the mental health staff in conjunction with a treatment plan for the offender.

WTRJ policy stipulates that inmates will not be disciplined for sexual contact with staff unless it is substantiated that the staff did not consent. There were no unsubstantiated or substantiated instances of inmate on staff sexual abuse or harassment during the audit period.

WTRJ policy prohibits disciplining inmates who make allegations in good faith with a reasonable belief that prohibited conduct occurred. There were no instances, in the past 12 months, where inmates were disciplined for filing a report or making unsubstantiated or unfounded allegations of sexual abuse or harassment. The Auditor reviewed investigative files, classification files, inmate records and interviewed staff. There is no evidence to suggest an inmate received a disciplinary charge for making an allegation of sexual abuse or sexual harassment.

Interviews with staff and inmates confirmed their knowledge of the policy regarding inmates engaging in non-coerced sexual activity. Furthermore, the staff and inmates were aware that the agency has an internal disciplinary process for inmates who engage in sexually abusive behavior against other inmates and knew that they could be disciplined for sexual abuse.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Relied upon to make Compliance Determination:

1. WTRJ Completed PAQ
2. WTRJ Policy 5.15
3. PREA Screening and Follow-up
4. Random Review of Files
5. Follow up mental health referral within 14 days
6. Interviews with Staff, including the following:
 - a. PREA Coordinator
 - b. Medical Staff

Findings:

The agency's policy is consistent with the requirements of the standards. Policy 5.15 states:

1. If the intake screening indicates that a Jail inmate has experienced prior sexual victimization in an institutional setting or in the community, the inmate will be offered a follow-up meeting with medical or mental health within 14 days.
2. All information related to sexual victimization and abusiveness that occurred in an institutional setting shall be strictly limited to medical, mental health, and any other staff on a need to know basis.
3. Medical and mental health personnel will 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.

The policy requires staff to offer a follow-up meeting with medical or mental health staff within 14 days of arrival at the facility for an inmate that reports sexual victimization, either in an institutional setting or in the community. It is the policy of the WTRJ to identify, monitor and counsel inmates who are at risk of sexual victimization, as well as those who have a history of sexually assaultive behavior. Medical and mental health staff verify their understanding of the provisions of the standard.

A random review of inmate files validated that the screenings were being conducted in accordance with the standards and the policy. In addition, there were several documented instances provided by the facility where inmates who were identified as needing follow up care, were offered and received the follow-up care within the 14-day period prescribed by the standards. An interview with medical staff confirms that if an inmate answers yes on the screening question that they have experienced previous victimization, it automatically triggers an alert for a referral and the inmate is offered a follow-up meeting, which is scheduled at that time.

During the on-site review, the auditor interviewed 6 inmates identified as having reported previous sexual victimization. Formal interviews with the inmates revealed that the inmates were offered a follow-up meeting with mental health.

	<p>The Auditor conducted a formal interview with medical staff. The medical staff member indicated that inmates identified as needing follow-up care are scheduled to be seen within 14 days, usually sooner. Mental health staff conformed that she receives referrals from medical staff when inmates report previous sexual victimization. Further, she stated that she sees all incoming inmates to provide an initial mental health assessment and will provide follow-up care if requested or needed.</p> <p>When asked who this information would be shared with, the medical staff member was clear about confidentiality and that this information would be only be shared with those who needed to know. This information is recorded in the electronic medical system, and each medical staff member has an individual login and password. Only medical personnel have access to this system. An interview with the PREA Coordinator and the Health Services Administrator confirmed that information related to sexual victimization and sexual abusiveness is kept secure and confidential. This information is limited access and only used to make housing, bed, work, education, and other program assignments.</p> <p>WTRJ policy states that medical and mental health personnel will 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. Interviews with medical staff confirm that they would gain informed consent before reporting information about prior sexual victimization that did not occur in an institutional setting. The Auditor reviewed examples of informed consent signed by the inmates.</p> <p>While WTRJ has not held any youthful offenders during the previous 12 months, staff are aware of the reporting requirements related to inmates under the age of 18.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Interviews with Staff, including the following: <ol style="list-style-type: none"> a. PREA Coordinator b. Medical Staff

- c. Random Security Staff
- 4. Interviews with Inmates

Findings:

The WTRJ policy is written in compliance with the standard and states that all inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Policy 5.15 states:

All inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. All inmate victims of sexual abuse while in the Jail will be offered information and access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate.

Interviews with medical staff, as well as the PREA Coordinator confirm that victims of sexual abuse would receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Contract medical staff provide coverage 24 hours per day, seven days a week. While there have been no documented incidents of sexual abuse requiring emergency medical or mental health services during the review period, the staff are aware of their responsibilities with regard to protection of the victim and evidence in the case of a report of sexual assault. Per the HSA and mental health provider, the level of care at the Western Tidewater Regional Jail is consistent with the level of care demonstrated within the community. In addition, the contracted medical and mental health staff are available 24 hours per day in the case of emergency and/or crisis intervention services. This was confirmed by the PREA Coordinator, HSA and other medical staff. For services that are outside the scope of their experience, the victim can be treated at the local emergency department. Forensic exams are conducted off-site at the local emergency department by qualified forensic nurse examiners. An advocate from the rape crisis center, YWCA is available at the request of the victim.

WTRJ policy states that all inmate victims of sexual abuse will be offered information and access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate. Medical staff was interviewed and confirmed the fact that they knew that they had an affirmative responsibility to provide care without regard to the ability of the victim pay for services or identify the alleged abuser, and the requirement to make a provision for pregnancy related medical care and/or STD prophylaxis if required. They confirm that victims of sexual abuse would be offered these services. There have been no incidents of sexual assault at the WTRJ in the last 12 months requiring these services.

WTRJ policy states that forensic examinations will be performed by Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE) at a local hospital without a financial cost to the victim. The facility has an MOU with Obisi Senterra Hospital. Interviews with medical staff, as well as the PREA Coordinator confirm that victims of sexual abuse would not be charged for services received as a

	<p>result of a sexual abuse incident. There have been no incidents of sexual assault at the WTRJ in the last 12 months.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Interviews with Staff, including the following: <ol style="list-style-type: none"> a. PREA Coordinator b. Medical and Mental Health Staff 4. Interviews with Inmates <p>Findings:</p> <p>The WTRJ policy is written in compliance with the standard and states that the Jail will offer medical and mental health evaluation and 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 victims will include follow up services, treatment plans, and referrals for continued care following their transfer or release.</p> <p>Interviews with medical and mental health staff confirm that these services would be available to inmates who have been victims of sexual abuse, and these services would be consistent with the community level of care. There have been no instances of sexual abuse during the review period, therefore the Auditor was unable to review any related documentation with regard to follow-up and on- going medical and mental health care.</p> <p>WTRJ policy requires that inmate victims of sexual abusive vaginal penetration while in the Jail will be offered pregnancy tests. Inmate victims who become pregnant while in the Jail will receive comprehensive information about all lawful pregnancy-related medical services. Inmate victims of sexual abuse while in the Jail will be offered tests for sexually transmitted infections as medically appropriate. Interviews with medical staff confirm that female inmates who were victims of abusiveness vaginal penetration would be offered pregnancy tests. Inmate victims of sexual abuse would be offered tests for sexually transmitted infections and emergency prophylaxis. There</p>

	<p>have been no incidents of sexual assault at the WTRJ in the last 12 months requiring these services.</p> <p>WTRJ policy states that all treatment services for sexual abuse will be 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. Interviews with medical staff confirm that these services would be provided to the inmate at no cost. There have been no incidents of sexual assault at the WTRJ in the last 12 months requiring these services.</p> <p>Staff interviews confirmed the presence of policies and procedures consistent with the standard and also confirmed the medical and mental health staffs' knowledge of the policy and standard. Interviews with inmates confirm they are generally aware of the availability of services should they request or require them, particularly the availability of mental health. The rape crisis center, YWCA is available for crisis counseling services and inmates can request to speak with mental health. Information regarding these services is available on the form of a brochure given to the inmates at arrival, as well as posted in the inmate living areas.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Incident Reviews 4. Interviews with staff <p>Findings:</p> <p>The WTRJ has a policy that governs the review of all substantiated or unsubstantiated allegations of sexual abuse. WTRJ policy states that a sexual abuse incident review will be conducted within 30 days after the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded. The review team will consist of upper-level management officials, supervisors, investigators, and medical/mental health personnel.</p> <p>During the review period the WTRJ reports there has been five administrative investigations of alleged sexual abuse at the facility. Two allegations were inmate on</p>

inmate allegations, which were unsubstantiated. Three allegations of sexual abuse were staff on inmate allegations. The Auditor reviewed the incident reviews for the two unsubstantiated allegations. There is a standardized form that covers all facets of the standard.

There were 7 total allegations of sexual misconduct in the previous 12 months.

WTRJ policy states that the review team will consider a need to change policy or practice to better prevent, detect, or respond to sexual abuse; if the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, perceived status, gang affiliation; the area in the Jail where the alleged incident occurred to assess whether physical barriers in the area may permit abuse; the adequacy of staffing levels in that area during different shifts; and whether monitoring technology should be deployed or augmented to supplement supervision by staff. Per policy, the review team will prepare a report of the findings, determinations, and any recommendations for improvement and submit the report to the Superintendent and the PREA Coordinator. The Jail will implement the review team's recommendations for improvements, or will document the reasons for not doing so.

An interview with three members of the incident review team confirms if there was an incident that required a review, all these factors would be considered. An interview with the PREA Coordinator confirms that a report of the findings, including recommendations for improvement, would be completed and submitted for inclusion in the file. The PREA Coordinator also stated any recommendations would be implemented, or the reasons for not doing so would be documented.

The WTRJ has appointed a team that conducts incident reviews at the conclusion of sexual assault investigations as stipulated by the standard. The incident review team consists of the facility Superintendent, Assistant Superintendent, PREA Coordinator, Security Captain, Health Services Administrator, and Mental Health staff. This was confirmed by formal interview of the facility administrator and PREA Coordinator. A written report of the findings is prepared and maintained by the PREA Coordinator. The PREA Coordinator indicated that the reviews ordinarily take place within 30 days of the conclusion of the investigation.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Annual Report 4. Interviews with staff <p>Findings:</p> <p>The WTRJ policy is consistent with the requirements of the standard and states that the Jail will collect annually accurate, uniform data for every allegation of sexual abuse necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice and complete an annual report based upon said data.</p> <p>The Auditor reviewed the Annual Report available on the facility website, including aggregated sexual abuse data for calendar year 2024. The Western Tidewater Regional Jail does not operate another facility or contract with other facilities for the confinement of its inmates. The Department of Justice has not requested to review the Western Tidewater Regional Jail sexual abuse data and the facility PREA Investigator securely maintains all documentation used to compile the information.</p> <p>An interview with the PREA Coordinator confirms the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Data from the previous calendar year is supplied to the Department of Justice no later than June 30th, if requested.</p> <p>The facility is collecting and aggregating sexual abuse data on an annual basis as required by the standard. The report uses a standardized set of definitions, which are available on the facility website and in the WTRJ policy.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ with ADP 2. WTRJ Policy 5.15 3. Annual Report

	<p>4. Website with sexual abuse data 5. Interviews with Staff</p> <p>Findings:</p> <p>The WTRJ policy is consistent with the requirements of the standard and indicates that data collected pursuant to 115.87 will be made readily available to the public through the Jail’s website, excluding all personal identifiers after final approval by the Jail Administrator. The Auditor reviewed the Annual Report available on the facility website, including data for calendar year 2024 and available data for 2025. The reports indicate that the agency reviewed the data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The report includes an overview of the facility’s plan for addressing sexual abuse and aggregated data. The annual report indicates the agency’s efforts to address sexual abuse include continually providing inmate education and staff training. Interviews with the PREA Coordinator and the Agency Administrator confirm these efforts.</p> <p>The report is signed by the Facility Administrator, and there is no personally identifying information in the report.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. WTRJ Completed PAQ 2. WTRJ Policy 5.15 3. Annual Report 4. WTRJ Website containing sexual abuse data 5. Interviews with Staff <p>Findings:</p> <p>The WTRJ policy is consistent with the requirements of the standard, which mandates that sexual abuse data be securely maintained and indicates that data collected pursuant to 115.87 will be made readily available to the public through the Jail’s website, excluding all personal identifiers after final approval by the Jail Administrator. Policy states the Jail will ensure all data collected is securely retained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires</p>

	<p>otherwise.</p> <p>The PREA Coordinator maintains all sexual abuse data and files in a locked cabinet in the office, with limited access, including the PREA Coordinator and Jail Administrator. Aggregated sexual abuse data is gathered from the investigative reports. The Auditor reviewed the facility’s website, which included an annual report with aggregated sexual abuse data, as well as an analysis of the data. There were no personal identifiers contained within the report. The Auditor was informed sexual abuse and sexual harassment data is maintained for a minimum of 10 years after collection.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. Previous Audit Report 2. PAQ 3. On-Site Review <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator • Random and Targeted Inmates <p>Observation of the following:</p> <ul style="list-style-type: none"> • Observation of, and access to all areas of the WTRJ during the site review <p>Findings:</p> <p>The WTRJ had its last PREA Audit August 29-September 2, 2022. The Western Tidewater Regional Jail only operates one facility.</p> <p>The Auditor reviewed the facility’s previous PREA report during the pre-audit phase. The Auditor was given full access to the facility. The facility administration was open to feedback and all recommendations and any corrective action was implemented immediately. The facility provided the Auditor with a detailed tour of the facility. The Auditor was able to request, review and receive all requested documents, reports, files, video, and other information requested, including electronically stored information. All requested documentation was provided in a timely manner.</p> <p>All staff cooperated with the Auditor and allowed the Auditor to conduct interviews</p>

	<p>with staff and inmates in a private area. The auditor was permitted to conduct unimpeded private interviews with inmates at the WTRJ, both informally and formally. Auditor was given private interview rooms to interview inmates, which were convenient to inmate housing areas. The WTRJ staff facilitated getting the inmates to the auditor for interviews in a timely and efficient manner. Auditor did not receive any confidential communication from any inmate at the WTRJ, however informal interviews with inmates confirm that they were aware of the audit and the ability to communicate with the auditors.</p> <p>The auditor was able to observe both inmates and staff in various settings.</p> <p>Prior to the on-site review, the Auditor sent a letter to be posted in all inmate living areas which included the Auditor's address. The Auditor observed notices posted in each inmate living unit that the Auditor emailed to the PREA Coordinator prior to the Audit. The Auditor received photographic evidence that the notices to inmates were posted four weeks in advance of the first day of the audit.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.403	Audit contents and findings
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. Previous Audit Report 2. WTRJ Website <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator <p>The Auditor reviewed the WTRJ website which contains a link for the April 2023 PREA Audit Report.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	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
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	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
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	na
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	na
115.12 (a)	Contracting with other entities for the confinement of inmates	
	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.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

	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.)	
115.13 (a)	Supervision and monitoring	
	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

	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
115.13 (b)	Supervision and monitoring	
	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.)	na
115.13 (c)	Supervision and monitoring	
	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
115.13 (d)	Supervision and monitoring	
	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

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

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	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)?	yes
115.15 (d)	Limits to cross-gender viewing and searches	
	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
115.15 (e)	Limits to cross-gender viewing and searches	
	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
115.15 (f)	Limits to cross-gender viewing and searches	
	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

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	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

	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
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	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
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	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
115.17 (a)	Hiring and promotion decisions	
	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

	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
115.17 (b)	Hiring and promotion decisions	
	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
115.17 (c)	Hiring and promotion decisions	
	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
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	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
115.17 (f)	Hiring and promotion decisions	
	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
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	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
115.18 (a)	Upgrades to facilities and technologies	
	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
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	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
115.21 (b)	Evidence protocol and forensic medical examinations	
	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
115.21 (c)	Evidence protocol and forensic medical examinations	
	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

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	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
115.21 (e)	Evidence protocol and forensic medical examinations	
	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
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	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
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	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
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	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

	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
115.31 (b)	Employee training	
	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
115.31 (c)	Employee training	
	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
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	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
115.32 (b)	Volunteer and contractor training	
	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
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	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
115.33 (b)	Inmate education	
	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
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	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
115.33 (d)	Inmate education	
	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
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	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
115.34 (a)	Specialized training: Investigations	
	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
115.34 (b)	Specialized training: Investigations	
	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

	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
115.34 (c)	Specialized training: Investigations	
	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
115.35 (a)	Specialized training: Medical and mental health care	
	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

	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.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	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
115.35 (d)	Specialized training: Medical and mental health care	
	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
115.41 (a)	Screening for risk of victimization and abusiveness	
	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
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	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

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	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
115.41 (f)	Screening for risk of victimization and abusiveness	
	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
115.41 (g)	Screening for risk of victimization and abusiveness	
	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
115.41 (h)	Screening for risk of victimization and abusiveness	
	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
115.41 (i)	Screening for risk of victimization and abusiveness	
	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

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a) Use of screening information		
	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
115.42 (b) Use of screening information		
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c) Use of screening information		
	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

	present management or security problems?	
115.42 (d)	Use of screening information	
	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
115.42 (e)	Use of screening information	
	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
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	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

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	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
115.43 (b)	Protective Custody	
	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
115.43 (c)	Protective Custody	

	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
115.43 (d) Protective Custody		
	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
115.43 (e) Protective Custody		
	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
115.51 (a) Inmate reporting		
	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
115.51 (b) Inmate reporting		
	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

	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
115.51 (c)	Inmate reporting	
	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
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	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
115.52 (c)	Exhaustion of administrative remedies	
	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

	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
115.52 (d)	Exhaustion of administrative remedies	
	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
115.52 (e)	Exhaustion of administrative remedies	
	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
115.52 (f)	Exhaustion of administrative remedies	

	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
115.52 (g)	Exhaustion of administrative remedies	
	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
115.53 (a)	Inmate access to outside confidential support services	
	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

	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
115.53 (b)	Inmate access to outside confidential support services	
	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
115.53 (c)	Inmate access to outside confidential support services	
	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
115.54 (a)	Third-party reporting	
	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
115.61 (a)	Staff and agency reporting duties	
	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

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	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
115.61 (c)	Staff and agency reporting duties	
	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
115.61 (d)	Staff and agency reporting duties	
	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
115.61 (e)	Staff and agency reporting duties	
	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
115.62 (a)	Agency protection duties	
	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
115.63 (a)	Reporting to other confinement facilities	
	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
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	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
115.64 (b)	Staff first responder duties	
	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
115.65 (a)	Coordinated response	
	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

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	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
115.67 (a)	Agency protection against retaliation	
	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
115.67 (b)	Agency protection against retaliation	
	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
115.67 (c)	Agency protection against 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 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

	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
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	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
115.68 (a)	Post-allegation protective custody	
	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
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	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
115.71 (b)	Criminal and administrative agency investigations	
	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
115.71 (c)	Criminal and administrative agency investigations	
	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
115.71 (d)	Criminal and administrative agency investigations	
	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
115.71 (e)	Criminal and administrative agency investigations	
	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
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	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
115.71 (g)	Criminal and administrative agency investigations	
	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
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	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
115.71 (j)	Criminal and administrative agency investigations	
	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
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	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
115.73 (a)	Reporting to inmates	
	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

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	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
115.73 (d)	Reporting to inmates	
	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

	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?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	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
115.76 (d)	Disciplinary sanctions for staff	
	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
115.77 (a)	Corrective action for contractors and volunteers	
	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

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	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
115.78 (a)	Disciplinary sanctions for inmates	
	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
115.78 (b)	Disciplinary sanctions for inmates	
	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
115.78 (c)	Disciplinary sanctions for inmates	
	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
115.78 (d)	Disciplinary sanctions for inmates	
	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
115.78 (e)	Disciplinary sanctions for inmates	
	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
115.78 (f)	Disciplinary sanctions for inmates	
	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

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	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
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	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
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	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
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	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).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	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
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	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
115.82 (b)	Access to emergency medical and mental health services	
	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
115.82 (c)	Access to emergency medical and mental health services	
	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
115.82 (d)	Access to emergency medical and mental health services	
	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
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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.)	na

115.86 (a)	Sexual abuse incident reviews	
	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
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	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
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	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
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	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
115.87 (d)	Data collection	
	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
115.87 (e)	Data collection	
	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.)	na
115.87 (f)	Data collection	
	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.)	na
115.88 (a)	Data review for corrective action	
	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

	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?	
115.88 (b)	Data review for corrective action	
	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
115.88 (c)	Data review for corrective action	
	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
115.88 (d)	Data review for corrective action	
	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
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	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
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	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
115.401 (a)	Frequency and scope of audits	

	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
115.401 (b)	Frequency and scope of audits	
	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.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	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
115.403	Audit contents and findings	

(f)		
	<p>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.)</p>	yes