

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: 04/17/2023

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: Gregory Winston	Date of Signature: 04/17/2023

AUDITOR INFORMATION	
Auditor name:	Winston, Gregory
Email:	gwinston1993@gmail.com
Start Date of On-Site Audit:	08/29/2022
End Date of On-Site Audit:	09/02/2022

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

Primary Contact	
Name:	Sgt James D Buie
Email Address:	buiej@wtrj.org
Telephone Number:	(757) 942 0555

Warden/Jail Administrator/Sheriff/Director	
Name:	William C. Smith
Email Address:	smithw@wtrj.org
Telephone Number:	7579420525

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

Facility Health Service Administrator On-site	
Name:	Crisha Watson
Email Address:	watsonc@wtrj.org
Telephone Number:	7579420572

Facility Characteristics	
Designed facility capacity:	552
Current population of facility:	639
Average daily population for the past 12 months:	693
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	18-70
Facility security levels/inmate custody levels:	Minimum, Medium, Maximum, and Restrictive Housing
Does the facility hold youthful inmates?	Yes
Number of staff currently employed at the facility who may have contact with inmates:	155
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	37
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	126

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:	Michael Ambrose	Email Address:	ambrosem@wtrj.org

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

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-08-29
2. End date of the onsite portion of the audit:	2022-09-02

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:	YMCA South Hampton Roads

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	552
15. Average daily population for the past 12 months:	693
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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	560
37. 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
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	4
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	3
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1

<p>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</p>	<p>5</p>
<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>1</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>5</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>155</p>

<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>126</p>
<p>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>37</p>
<p>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>No text provided.</p>

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>22</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input 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>

55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Inmates were selected randomly using a random number generator from a roster of inmates sorted by housing unit.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	8
<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>	
59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:	0

<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>During the site review, the auditor was able to confirm that there were no youthful inmates housed at the jail.</p>
<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</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>Conversations with the PREA Coordinator as well as the HSA confirmed that there were no inmates housed there that had uncorrected vision problems.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</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>Conversations with the PREA Coordinator as well as the HSA confirmed that there were no inmates housed there that had uncorrected vision problems.</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>3</p>

<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>1</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</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>There were no inmates housed at the jail who had reported sexual abuse.</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>1</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</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>The auditor reviewed all restrictive housing units and there were no inmates confined in those areas for the purpose of protection from sexual abuse and the PAQ and PREA Coordinator confirmed that no inmates were confined to segregation for protection from sexual abuse or harassment in the past 12 months.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>Several of the individuals selected for targeted interviews because of reporting previous victimization denied reporting prior victimization to the auditor. In addition, the person identified as LEP was actually bilingual in English and Spanish. There were no monolingual non-english speakers.</p>
<h2>Staff, Volunteer, and Contractor Interviews</h2>	
<h3>Random Staff Interviews</h3>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>13</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>

<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>13</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>79. Were you able to interview the PREA Compliance Manager?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><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)</p>

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

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

	<input checked="" type="checkbox"/> Intake staff <input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. 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:	5
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
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

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.

84. Did you have access to all areas of the facility?

Yes

No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

Yes

No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

Yes

No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

Yes

No

<p>88. 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>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>No text provided.</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>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>The Auditor Reviewed all 5 investigative files, 25 randomly selected classification files, 20 randomly selected training files including contractors (no volunteer files were reviewed as there have been no new volunteers in two years due to COVID), 20 randomly selected personnel files of newly hired staff as well as three promotional files.</p>

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	5	0	5	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	5	1	5	0

93. 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	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	5	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	5	0	0

Sexual Harassment Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

5

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
---	--

Inmate-on-inmate sexual abuse investigation files

<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>5</p>
--	----------

<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal 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>102. 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>
--	---

Staff-on-inmate sexual abuse investigation files

<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
---	----------

<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
---	--

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
---	--

Sexual Harassment Investigation Files Selected for Review

<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
--	----------

<p>a. Explain why you were unable to review any sexual harassment investigation files:</p>	<p>There were no allegations of sexual harassment.</p>
---	--

<p>107. 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 type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
---	---

Inmate-on-inmate sexual harassment investigation files

<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
---	----------

<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
---	--

<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>No text provided.</p>

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

- Yes
- No

Non-certified Support Staff

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

- Yes
- No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- The audited facility or its parent agency
- My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- A third-party auditing entity (e.g., accreditation body, consulting firm)
- Other

Standards

Auditor Overall Determination Definitions

- 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

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</p>	<p>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy `5.15, Page 4 Agency Organizational Chart</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent)</p> <p>Findings:</p> <p>115.11 (a) The WTRJ policy is written in accordance with the standard. The policy details a agency-wide zero tolerance policy for sexual abuse and harassment. The policy outlines the agency’s approach to preventing, detecting, and responding to sexual abuse and harassment. The language in the policy provides definitions of prohibited behaviors in accordance with the standard and includes notice of sanctions for those who have been found to have participated in prohibited behaviors. The policy contains a specific section regarding documentation and review, which outlines the facility’s strategy for preventing and improving response to sexual abuse.</p> <p>115.11 (b) According to interviews with the PREA Coordinator and the Agency Administrator employees a PREA Coordinator who has sufficient time an authority to perform their functions of developing and overseeing the agency’s compliance with the PREA standards. Both the facility Administrator and PREA Coordinator told the Auditor that the PREA Coordinator reports directly to the Superintendent or Deputy Superintendent. The facility organizational chart indicates that the PREA Coordinator reports to the Director of Jail Operations, but this position is currently vacant. Policy `5.15 page 4 stipulates that the PREA Coordinator shall report to an upper level position, and this is consistent with their practice.</p> <p>115.11 (c) The agency operates on one facility, thus there is no PREA Compliance Manager. The agency PAQ indicates that the agency’s PCM is the Superintendent; however, based upon interviews with the PC as well as the Superintendent indicates that this was just a misstatement based upon a misunderstanding of the definition of the PCM.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
----------------------	--

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent)</p> <p>115.12 (a)(b) Based upon targeted interviews with both the PREA Coordinator and the Agency Administrator, the WTRJ does not contract with any other entities for the purpose of housing their inmates.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

115.13	Supervision and monitoring
	<p data-bbox="256 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 297">Auditor Discussion</p> <hr/> <p data-bbox="256 340 1082 374">Evidence Relied upon to make Compliance Determination:</p> <p data-bbox="256 483 1005 517">WTRJ Completed PAQ with ADP since last PREA Audit</p> <p data-bbox="256 524 743 557">WTRJ Policy 5.15, Page 4, 8, 24-26</p> <p data-bbox="256 564 759 598">Review of most recent staffing plan</p> <p data-bbox="256 604 956 638">Review of staffing plan review (dated June, 2022)</p> <p data-bbox="256 645 1469 723">Review of facility logs documenting unannounced supervisory rounds both during the pre-audit document review and during on-site document review</p> <p data-bbox="256 730 1401 808">On-site video review of supervisory rounds of housing areas (there is no audio of video footage to ensure that supervisory rounds were unannounced)</p> <p data-bbox="256 891 671 925">Interviews with the following:</p> <p data-bbox="256 963 509 996">PREA Coordinator</p> <p data-bbox="256 1003 813 1037">Agency Administrator (Superintendent)</p> <p data-bbox="256 1043 453 1077">Random Staff</p> <p data-bbox="256 1084 1136 1117">Supervisors Responsible for Conducting Unannounced Rounds</p> <p data-bbox="256 1200 667 1234">Observation of the following:</p> <ul data-bbox="256 1344 1481 1534" style="list-style-type: none"> <li data-bbox="256 1344 1481 1422">· Observation of unannounced rounds by supervisors as well as auditor during the site review <li data-bbox="256 1456 1420 1534">· Observation of supervisors documenting rounds in the daily logbooks on the duty post during the site review <p data-bbox="256 1644 1458 2051">115.13 (a) (b) The jail's staffing plan have not required revision since the last PREA Audit. The average daily population since the last PREA Audit is 730 and has been inconsistent at sometimes due to the COVID pandemic. The auditor reviewed the facility's current staffing plan as well as the most recent staffing plan review from June, 2022. In those reviews, they have documented that the PREA Coordinator has considered all of the elements from standard 115.13 (a) (1-15) as part of the review. In addition, each review was approved by the Superintendent in writing. During the interview with the Superintendent, the auditor verified that the Superintendent reviews and approves the annual staffing plan. In addition, the Superintendent does consider the use of CCTV and told the auditor that there was a significant CCTV</p>

upgrade three years ago. The Superintendent told the auditor during the targeted interview that if there were an instance where the facility did not comply with their staffing plan, the PREA Coordinator would report that instance to him and it would be reviewed. However, according to the PREA Coordinator, the Superintendent, and the PAQ indicated that there were 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.

115.13 (c) Annually, the jail reviews the staffing plan to ensure that adjustments are made if needed. The auditor reviewed the most recent staffing plan and the most recent annual review. During the targeted interviews with both the Superintendent and PREA Coordinator, they both indicated that there had not been any instances where the staffing plan was violated in the past year; however, both told the auditor that they would use overtime funds to provide additional staff as required. The auditor reviewed the most recent annual review, as well as the most recent review dated June of 2022. The jail's reviews were in compliance with the elements of 115.13(a). In addition, during the on-site review, the auditor reviewed the deployment of CCTV monitoring. There were 197 cameras in place and no recommendations for additional monitoring cameras were made, have not been made in several years after a significant CCTV upgrade which virtually eliminated any blind areas in the facility. Currently, they are exporting options to move forward with a new CCTV and security system upgrade to take advantage of improved technology. The jail also has a guard tour system in place which documents when officers make security rounds. While this was not installed as a result of any specific incident or as a result of an annual review, it will improve the jail's ability to prevent and detect incidents of sexual abuse.

115.13 (d) According to the PAQ submitted by WTRJ, the jail has a policy that requires supervisors conduct announced rounds of staff, the jail documents the rounds, cover each shift, and prohibits staff from alerting other staff of those rounds. The auditor was provided with written documentation of daily reports that verified that unannounced rounds were conducted during all shifts. During the on-site portion of the audit, the auditor reviewed daily reports that verified that unannounced rounds were recorded on the officer's duty posts. In addition, during the on-site review, the auditor was able to review the documentation from the computerized guard tour system documenting unannounced rounds by supervisors. The auditor reviewed policy 5.14, page 4 and verified the requirement for unannounced rounds and the prohibition of staff alerting other staff of the rounds. In addition, the site review rounds were unannounced to the staff, and the auditor observed supervisors who were accompanying the auditor documented our rounds in the guard tour system. In addition, we were allowed to view examples of supervisor's making rounds on the recorded CCTV system. We could not verify that the rounds were unannounced because there was no audio on the recordings. However, during targeted reviews with targeted staff, they told auditor that they were required to conduct, and document, unannounced rounds; and all of the supervisors told the auditor that they make those rounds and that staff was not allowed to alert others. When I asked one supervisor how he prevented staff from alerting others about his rounds, he told me

that that they spent so much time out in the jail, that the staff was used to seeing them. During the site review, the auditor informally spoke with staff and asked about unannounced rounds. 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 really never knew when they were going to show up.

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

Corrective Action: None

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Page 5 Review of population report on the day of the audit as well as population reports from the previous 12 months</p> <p>Interviews with the following:</p> <p>PREA Coordinator Superintendent</p> <p>Observation of the following:</p> <p>Site Review of the housing units and no youthful inmates were present.</p> <p>115.14 (a)(b) 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>115.14 (c) During this audit period, there have been no youthful inmates housed at the jail. 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 inmates that met that criteria, they would accommodate that lawful requirement.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

115.15	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Pages 6-7, Policy 5.10 Pages 3-5 Review of facility logs documenting cross-gender strip/body cavity searches (no instances by any staff including medical) Training Powerpoint regarding proper techniques for searching opposite gender inmates as well as transgender or intersex inmates Training records with signed acknowledgements by trained staff</p> <p>Interviews with the following:</p> <p>PREA Coordinator Random Staff Medical Staff Random Inmates</p> <p>Observation of the following:</p> <p>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</p> <p>115.15 (a) In accordance with standard, WTRJ policy 5.15 pages 6-7 and policy 5.10 pages 3-5 prohibits any cross-gender visual body cavity searches or cross-gender strip searches except in the case of exigent circumstances. According to the PAQ, there were no instances of cross-gender strip searches or cross-gender body cavity searches by WTRJ personnel during the past 12 months. During the on-site document review and targeted interviews with medical staff as well as random staff and the PREA Coordinator and review of the logs maintained by the PREA Coordinator, there was no evidence of any cross-gender strip searches or body cavity searches performed by non-medical nor medical staff.</p> <p>115.15 (b) According to WTRJ policy 5.15 pages 6-7 and policy 5.10 pages 3-5, the WTRJ prohibits the pat down search of female inmates by male staff members absent exigent circumstances and any such search shall be documented. According to the</p>

PAQ, there were no instances where female inmates were denied access to programs or other out of cell opportunities. Random staff interviews, informal staff communications as well as targeted interviews with 10 random female inmates as well revealed that no female inmates were restricted from programs in order to comply with this standard. During follow up questions with female inmates regarding this standard, they all indicated that there were always female staff to search and move them around the facility. During the on-site portion of the audit, the logs maintained by the PREA Coordinator verified that during the audit period, there were no instances where female inmates were pat searched by male staff. In addition, there were not recorded instances of female inmates being searched by male staff members under any circumstances.

115.15 (c) According to WTRJ policy 5.15 pages 6-7 and policy 5.10 pages 3-5, the WTRJ prohibits the pat down search of female inmates by male staff members absent exigent circumstances and any such search shall be documented. According to the PAQ, random staff interviews and interview with the PREA Coordinator, and on-site review of the log maintained by the PREA Coordinator, there were no instances of cross-gender strip searches or cross-gender body cavity searches during this audit period.

115.15 (d) According to WTRJ Policy 5.15 page 6, inmates are permitted to shower, perform bodily functions without staff of the opposite gender viewing their breasts, buttocks, or genitalia except during exigent circumstances. In addition, WTRJ policy 5.15 page 6 requires that all staff of the opposite gender announce their presence before entering a inmate housing unit. The WTRJ does not maintain computerized logs regarding entering housing units in the case of exigency where inmates of the opposite sex may be present. During the on-site portion of the audit while interviewing random staff members, all of the random staff members responded that they always announce their presence before entering a housing unit occupied by members of the opposite gender. During random interviews with male inmates, 9 out of 19 told the auditor that female staff made the announcement, 10 inmates said that females didn't make the announcement, and 1 inmate said he wasn't sure. I asked the PREA Coordinator about this information and he told me that it was likely because females rarely went through their units. During the site review, the auditor observed both males and females entering cross gender units and the announcements were made. Of 10 female inmates interviewed randomly, all but 1 said that male officers make an announcement before entering their housing area, the one that did not say that males announce, said she didn't know because men don't were her housing unit. I asked about supervisory rounds or administrative rounds and she said she wasn't sure. The auditor, during the site review, documented that each housing unit had individual shower stalls with modesty curtains and bathrooms were located in individual cells where available. In dorm housing areas, the toilet areas also had modesty curtains or other modesty shielding. The auditor also reviewed a sample of CCTV placements in housing areas and verified that there was not CCTV coverage of the interior of general population cells where inmates would be using the toilet or changing clothes. A review of CCTV coverage in individual protective cells revealed that the cameras were pointed away from toilet areas. In addition, inmates were

provided with protective clothing and were not naked.

115.15 (e) According to the WTRJ Policy 5.15 page 6, inmates are not searched or physically examined for the sole purpose of determining their gender 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 random interviews of 12 staff, none of the staff told the auditor that they would search or physically examine an inmate for the sole purpose of determining gender. The WTRJ had one transgender or intersex inmate during the on-site portion of the audit. The inmate indicated that she was a biological male and was strip-searched by a male with her consent and it was not done to determine her gender status.

115.15 (f) During the on-site portion of the audit, the auditor reviewed the training presentation that is provided to all 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. WTRJ Policy 5.15 page 9 requires for all security staff. In addition, the auditor reviewed the training log for sworn staff who received this training. According to the PAQ, 100% of all employees hired in the last 12 months received the required training. The Auditor reviewed a sample of 20 training files, which the auditor could match to the training rosters provided. All 20 verified that the training had been completed. 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. However, none could recall ever having to perform such a search.

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

Corrective Action: None

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Pages 9-10 Review of PREA training curriculum with section on effective communications Training Rosters Employee training rosters for the past 12 months Written Agreement with commercial interpreter service as well as utilization documentation Interpretive Service Poster and Quick Use Guide PREA Information Posters in English and Spanish PREA Training Video in English and Spanish and with subtitles Comprehensive PREA Training Booklet in English and Spanish Inmate Handbook in English and Spanish PREA Orientation Form in English and Spanish</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent) Random Staff Targeted Classification Staff Intake Staff Inmate who has cognitive/mental health disorder</p> <p>Observation of the following:</p> <p>Observation of Interpretive Service access posters in classification as well as booking area</p> <p>115.16 (a) (b) According to WTRJ policy 5.15 pages 9-10, and the PAQ, the jail provides inmates who are disabled an opportunity to participate in their efforts to prevent, detect, and respond to sexual abuse. The WTRJ provides inmates with inmate handbooks and comprehensive training booklets in English and Spanish. Spanish is the prevalent non-English language in the area. In addition, upon admission, inmates are provided a PREA Orientation Form in either English or Spanish. Auditor observed PREA informational posters throughout the facility in both</p>

English and Spanish. During both formal and informal interviews with staff responsible for intake and classification, when asked how they ensured that inmates with LEP or disabilities were provided access to the PREA program benefits, each staff member indicated that they have options on a case by case basis. Staff mentioned reading material to those with low vision, or were illiterate. Staff suggested using their telephone-based interpretive service. The targeted classification staff person told the auditor that they also have access to a sign language expert from the court system if necessary. The auditor asked the targeted intake staff how they would respond to the needs of an individual with a cognitive disorder or severe mental illness. The staff member told the auditor that it would depend on the level of impairment and the specific communication needs of the inmate. During the on-site portion of the audit, the Auditor was able to speak with one inmate who had been identified as having a severe mental illness. During the targeted interview, the inmate was oriented to time and place and recalled being booked into the jail, receiving information about the facility's zero-tolerance policy as well as the comprehensive education information, yet she still indicated she wasn't sure how to report an instance of sexual abuse or harassment. This inmate is seen frequently by mental health staff. She indicated that she felt like she had sufficient privacy and if she reported an incident of sexual abuse or harassment, the staff would intervene and investigate. No other inmates with disabilities or with limited English proficient were confined and thus no further interviews were conducted. It should be noted that the auditor did not encounter any inmates who did not speak English during the site review. In addition, the Auditor did conduct a review of a housing unit that was designated for inmates with serious mental illnesses and during informal discussions with several of those inmates, the ones with whom the auditor had informal discussions recalled being given information regarding the PREA and the agency's zero-tolerance policy during admission and said they could report incidents of sexual abuse over the phone or through the inmate tablet system. Several more were not willing to speak with the Auditor about the PREA.

115.16 (c) During the on-site portion of the audit, the Auditor spot-checked the log that documented usage of the interpretive service. Not all of the utilization was for PREA related purposes and there were a variety of languages used. According to Policy 5.15, page 10, the WTRJ prohibits the use of inmate interpreters in first responder duties or investigations of allegations of sexual abuse. According to the targeted interview with the PREA Coordinator, there were no instances of the use of an inmate interpreter even in exigent circumstances. During random staff interviews, no staff member said it was appropriate to use an inmate interpreter when responding to allegations of inmate sexual abuse. Few staff members did not know about the availability of the telephone interpretive services but said that if they had a LEP inmate who wanted to make an allegation, they would notify their supervisor immediately.

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

Corrective Action: None

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Pages 6-7 Random review of recently promoted employee files from the past 12 months Reviews of randomly selected employee files Review of contractors approved within the last 12 months Review of randomly selected volunteer files</p> <p>Interviews with the following:</p> <p>PREA Coordinator Human Resources Director</p> <p>115.17 (a) (b) (c) According to WTRJ Policy 5.15, page 6, the jail does not hire persons who have violated the provisions of this standard. During the on-site portion of the audit, the Auditor reviewed 20 employee files that were hired in the last 12 months. All of 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. The auditor also reviewed three files of employees who were promoted in the last 12 months. Each employee was asked questions regarding their past conduct and they responded that they had not engaged in any sexually abusive contact outlined in the standard. Prior to promotion or hire, each person had a criminal history query and it was documented in their personnel file. A targeted interview with the Human Resources Director verified that criminal history checks are run on all applicants and potential supervisors. She also verified her signature on the files that the Auditor reviewed on-site. According to WTRJ Policy `5.15 page 7, the WTRJ considers any incident of sexual harassment when deciding to promote or enlist the services of contractors or volunteer. During the interview with the HR Director and the PREA Coordinator they confirmed that they consider incidents of sexual harassment; however, there had been no incidents. Review of newly hired and promoted employee files confirmed their compliance with the policy. WTRJ policy `5.15 page 6-7 requires that all employees are subjected to a background investigation that included a criminal background check and that the jail solicit information from any prior institutional employment regarding investigations or allegations of sexual abuse or harassment. The document review on-site and the interview with the HR Director confirmed that they have complied with this policy and no employee with such a history has been hired during the audit period.</p> <p>115.17 (d) WTRJ Policy 5.15 page 6 requires that all potential contract employees</p>

undergo a background investigation and criminal records check prior to enlisting their services. However, the auditor reviewed 2 files of contractors hired during the past 12 months and verified that criminal records checks were completed inquiry into previous conduct related to this standard were conducted.

115.17 (e) (f) WTRJ Policy 5.15 page 7 requires that each employee undergo a criminal background investigation every 5 years, this was confirmed by reviewing 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 page 7 includes an affirmative requirement that employees have a duty to report any conduct in violation of the PREA (Specifically Standard 115.17 (a). A review of newly hired employees verified that they had been subjected to a criminal records check and were subjected to a questionnaire regarding previous conduct. A review of 2 newly hired contractors showed evidence of a criminal records check prior to enlisting their services and they were they questioned about previous conduct listed in 115.17(a).

115.17 (g) (h) WTRJ Policy 5.15 page 7 requires that the agency will cooperate with other agencies by providing any information regarding allegations of sexual abuse of former employees upon request of other institutional employers. In addition, Policy `5.15 page 7 stipulates that material omissions regarding previous conduct in violation of this standard are a cause for termination. According to targeted interviews with the PREA Coordinator and the HR Director, there have been no instances of known failure to report previous conduct in violation of this standard and thus no terminations or employee discipline. According to the targeted interview with the HR Director, they cooperate and provide information to other institutions related to previous employee's conduct. The HR Director was able to show an example of a documented occasion where she had received an information release from another agency and provided employment records.

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

Corrective Action: None

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ</p> <p>Interviews with the following:</p> <p>PREA Coordinator</p> <p>115.18 (a) (b) According to the WTRJ PAQ and targeted interview with the PREA Coordinator, the WTRJ has not made any substantial expansion to the facility since their last PREA audit.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p>

115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, pages 17-22 Review of MOU with the local police department Review of MOU with the local forensic specialists Review of MOU with local YWCA Review of incident report logs Review of all investigations during the last 12 months</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent) Forensic Personnel who provide SANE/SAFE services to WTRJ Inmates YMCA Personnel who provide support services to victims of sexual abuse</p> <p>115.21 (a) (b) (f) According to the WTRJ Policy 5.15 pages 17-19, as well as a written MOU with the Suffolk Police Department any criminal investigation shall be conducted by the Suffolk Police Department. In the MOU, the Suffolk Police department has agreed to conduct sexual abuse investigations in accordance with PREA standards. The Suffolk Police department has agreed to follow the nationally accepted protocol for Sexual Assault Medical Forensic Exams published by the USDOJ. According to interviews with random staff, all random staff members identified the PREA Coordinator as the person who conducts sexual assault investigations. The WTRJ provided a signed copy of the MOU to the auditor during the pre-audit phase. This relationship was confirmed during targeted interviews with Superintendent as well as the PREA Coordinator.</p> <p>115.21 (c) According to WTRJ Policy 5.15 pages 17-19, the agency offers sexual abuse victims access to forensic medical exams off-site at the Sentara Obici Hospital and at no cost to the inmate, including prophylactic testing/treatment for suspected STIs, and pregnancy testing as applicable. 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. In addition, there have been no instances of alleged sexual abuse which required the use of forensic services in the past 12</p>

months. Review of the PREA investigative files for the past 12 months verified that no such instances have occurred.

115.21 (d) (e) (h) According to WTRJ Policy 5.15 pages 17-19, the WTRJ will make a victim advocate from a rape crisis center available to an abused inmate. The auditor reviewed a MOU with the local YWCA who has agreed to provide victim advocacy in accordance with the standard. The auditor verified the agreement by contacting the contracting agency and verifying the agreement is still in place. In addition, the agency verified that their advocates were screened for appropriateness and criminal history and trained in general sexual abuse and forensic examination support and advocacy. According to the YWCA and the WTRJ, no instances of sexual abuse that have required services have occurred in the past 12 months. Review of the PREA investigative files for the past 12 months verified that no such instances have occurred. 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.

115.21 (g) WTRJ Policy 5.15 page 19-21 does not distinguish between any agencies investigating instances of sexual abuse, and according to the PREA Coordinator, all investigations are required to be conducted in accordance with their written policy. There are no documents to review where investigation were conducted by state agencies or Department of Justice officials. There have been no instances of sexual abuse allegations involving United States inmates.

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

Corrective Action: None

115.22	Policies to ensure referrals of allegations for investigations
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 558 300">Auditor Discussion</p> <p data-bbox="256 340 1082 376">Evidence Relied upon to make Compliance Determination:</p> <p data-bbox="256 483 561 519">WTRJ Completed PAQ</p> <p data-bbox="256 524 686 560">WTRJ Policy 5.15, Pages 19-22</p> <p data-bbox="256 564 1110 600">Review of logs of PREA investigations for the last 12 months</p> <p data-bbox="256 604 1417 685">Review all investigative files for allegations of sexual abuse or harassment for the past 12 months</p> <p data-bbox="256 689 896 725">Review of information from the WTRJ website</p> <p data-bbox="256 806 673 842">Interviews with the following:</p> <p data-bbox="256 882 507 918">PREA Coordinator</p> <p data-bbox="256 922 813 958">Agency Administrator (Superintendent)</p> <p data-bbox="256 963 517 999">Investigative Staff</p> <p data-bbox="256 1003 497 1039">Random Inmates</p> <p data-bbox="256 1120 1477 2074">115.22 (a) According to WTRJ Policy 5.15 page 19 stipulates that all allegations of sexual abuse or harassment are investigated. During the past 12 months, there have been 5 allegations of sexual abuse or harassment. All 5 allegations were investigated administratively, and none were referred for criminal prosecution. All 5 investigations were completed. Targeted interview with the superintendent verified that all allegations of sexual abuse or harassment were investigated, and he went on to describe the process for investigations. According to the Superintendent, 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 preserved evidence. The on-duty supervisor would brief the facility investigator and PREA Coordinator and depending on the situation initiate a call to the Suffolk PD to begin a criminal investigation. Essentially, all reports of sexual abuse or harassment are evaluated by the first responders and facility investigator or PREA Coordinator, who is also a qualified investigator 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 investigation is turned over to the local police department. If there is no evidence that a crime was committed, then the investigation is completed as an administrative investigation. The auditor reviewed all 5 investigative files from the previous 12 months. The files contained the complaint, the source of the complaint,</p>

interviews, evidence collected and reviewed, findings and notice to the complaining inmate as required by the standard. In each of the 5 investigations, the allegations were unfounded.

115.22 (b) (c) (d) (e) According to WTRJ Policy 5.15 page 21 requires that all sexual assault allegations that involve evidence of criminal behavior be referred for criminal prosecution. The auditor reviewed the WTRJ website and the agency policy is posted and publicly available as well as the PREA policy. There is also a specific document that stipulates that all criminal investigations are conducted by the Suffolk PD and that any allegations that are found to be criminal in nature are referred to the Suffolk Commonwealth's Attorney Officer for prosecution. The document on the website also stipulates that the WTRJ is responsible for all administrative investigations and provides contact information for the PREA Coordinator and a method for anonymous reporting of sexual abuse or harassment that goes to the PREA Coordinator. During an interview with the agency investigator, he verified that investigations that revealed criminal behavior would be immediately referred to the Suffolk PD and that those investigations would be referred to the Commonwealth Attorney for prosecution. There are no state agencies or Department of Justice component that have a responsibility to conduct criminal or administrative investigations. The auditor reviewed investigative files and logs for the past 12 months during the on-site document review and there were no investigations referred for criminal prosecution in the past 12 months.

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

Corrective Action: None

115.31 Employee training

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Relied upon to make Compliance Determination:

- WTRJ Completed PAQ
- WTRJ Policy 5.15, Pages 8-11
- WTRJ Policy 13.1 Pages 1-4
- WTRJ PREA Training Curriculum
- Training Rosters for Civilian and Sworn Staff 2021
- Training Acknowledgements for Civilian and Sworn Staff

Interviews with the following:

- PREA Coordinator
- Random Staff
- Training Coordinator

115.31 (a) (b) (d) (c) According to WTRJ Policy 5.15 pages 8-12 and Policy 13.1 pages 1-4, all employees, contractors, volunteers and civilian staff members who have contact with inmates receive training. According to the policy, mental health and medical personnel receive specialized training. In order to confirm that compliance with this standard, the auditor reviewed the written training curriculum and during the pre-audit period, reviewed a sampling of training documentation with attendance rosters and employee acknowledgements, as well as logs of training attendance. In addition, during the on-site portion of the audit, the auditor verified the training of staff by making spot checks of 20 officer training files to match the training rosters with the files for verification of training attendance. Furthermore, the auditor reviewed the entire training logs for all employees who had received training for the current year. During the random staff interviews, all 12 random employees as well as the targeted staff recall having PREA training. During the random staff interviews, the auditor asked the employees if they recalled being trained on each required element of the PREA training. None of the employee interviewed remembered all elements of the training. The auditor reviewed the PREA training curriculum and verified that each of the elements of the standard are included in the standard. There are 10 specific elements of PREA training that are required and there are listed along with the corresponding page of the training curriculum: (1) page 2, (2) page 2, (3) page 1, (4) page 1, (5) page 4, (6) pages 4-6 (7) pages 4-6, (8) 5-7, (9) pages 10-11, (10) page 2. All employees are provided training that it tailored to both male and female inmates. During interviews with the PREA Coordinator and Training Coordinator, both confirmed that no employee is permitted to have contact with inmates prior to receiving PREA training during orientation.

115.31 (c) The WTRJ Policy 5.15, page 9 stipulates that all employees will be

provided initial PREA training and receive refresher training every two years. Since the last PREA audit, according to the training documents that were reviewed by the auditor indicated staff members have been trained in the PREA standards in the last 12 months. During the on-site portion of the audit during the document review the auditor reviewed 20 staff training files, and each file contained a training acknowledgement for PREA training within the last two years.

115.31 (d) According to Policy 5.15, page 9, all employees, volunteers and contractors are required to sign a training acknowledgement form verifying their understanding of the training. Examples of the acknowledgement form were reviewed during the pre-audit phase. During the on-site portion of the audit and document review, the auditor spot checked 20 employee training files and verified that there were signed acknowledgement forms in their files.

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

Corrective Action: None

115.32	Volunteer and contractor training
	<p data-bbox="256 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 558 297">Auditor Discussion</p> <hr/> <p data-bbox="256 340 1082 374">Evidence Relied upon to make Compliance Determination:</p> <p data-bbox="256 483 892 725"> WTRJ Completed PAQ WTRJ Policy 5.15, Pages 8-11 WTRJ Policy 13.1 Pages 1-4 WTRJ PREA Training Curriculum Training Rosters for Civilian Staff 2019 Training Acknowledgements for Civilian Staff </p> <p data-bbox="256 808 671 842">Interviews with the following:</p> <p data-bbox="256 882 547 1037"> PREA Coordinator Contract Staff Volunteer Staff Training Coordinator </p> <p data-bbox="256 1120 1477 2072"> 115.32 (a) (b) (c) WTRJ Policy 5.15, page 9 requires that all volunteers and contractors receive training regarding the PREA. This training is required to be completed prior to contact with any inmates. According to the PAQ, 165 volunteers and contractors have received training in accordance with the policy. The Auditor reviewed the files of two contractors who were hired in the past 12 months and verified that they had received the required PREA training. The auditor reviewed the training curriculum that is used for training volunteers and contractors and it is the same as the curriculum that is used for sworn staff members. According to targeted interviews with PREA Coordinator and Training Coordinator, they require that anyone who has any contact with inmates undergo the same training as sworn staff regarding the PREA despite the fact it is not required by the standard. During the document review, the auditor were 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. 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, all recalled having to take a test and sign a paper and when asked what would be the consequence if they violated the PREA policy, each one said they would be removed from the facility and risk jail time. The auditor reviewed the files of 2 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 verified that training acknowledgements were retained in the files. </p>

	<p>After a review, the Auditor determined the facility meets the requirements of the standard.</p>
--	--

Corrective Action: None

115.33 Inmate education

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Relied upon to make Compliance Determination:

- WTRJ Completed PAQ
- WTRJ Policy 5.15, Page 9-11
- WTRJ inmate Handbook
- WTRJ Comprehensive Education Booklet
- WTRJ Sexual Misconduct Orientation Form
- Sampling of Completed Sexual Misconduct Orientation Forms from Inmate Files with inmate signatures
- Monthly Logs of Completion of all Inmates provided Comprehensive Education
- Sampling of Inmate files comparing intake date, the date of initial screenings, and the date of comprehensive screening

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

115.33 (a) The WTRJ PREA Policy 5.15, Page 9-11 is written in accordance with the policy. The auditor reviewed the intake process during the site review and observed a inmate being explained the PREA Orientation form. This was completed at the intake counter away from any other inmates as much as possible. This orientation didn't solicit any personal information. The inmate signed the orientation form. 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 interview with and intake officer, all officers told me that they

explained the agency's zero tolerance policy regarding sexual abuse and harassment, 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. As stated before, even newly committed inmates, who were just registering their PIN number into the inmate phone system were able to see the PREA signage and could call the hotline number if they chose to notify a third-party.

Interviews with intake staff, both informally and formally, verified that all inmates, including any transferred from another facility, are given the same PREA orientation.

Further probing during the informal and formal staff interviews revealed that inmates who were LEP would be provided the orientation using a language line and those staff interviewed knew how to use the line and there was a set of instructions also available to staff adjacent to the booking counter with step by step instructions to use the language line. The auditor conducted random inmate interviews and the majority of the 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 most also referenced the use of a sexual abuse hotline or the tablet. The WTRJ PAQ reported that during the last year 3054 persons were committed to jail and inmates were given the initial PREA information in accordance with the standard. The auditor reviewed an initial sampling of 25 random inmate records files. In each case, the file contained the initial inmate PREA orientation, signed by the inmate. This verified what the auditor personally observed, what the interviews revealed, what was required by policy and what was reported in the submitted PAQ.

115.33 (b)(c) The WTRJ admitted 3054 inmates in the last twelve months, 1,118 of those inmates served 30 days or more and 1,118 received the comprehensive education. The only inmates that do not receive the comprehensive education, who serve more than 30 days of incarceration, are those inmates assigned to non-consecutive days, such as weekend confinement or periodic confinement allowed under Virginia Code. However, these inmates are given the PREA orientation in accordance with 115.33(a). The auditor reviewed the records that are kept by the PREA coordinator. Those monthly records are logs of each inmate who has been confined in jail for the past two weeks and their signature that they have received the comprehensive PREA education. The auditor reviewed 25 random inmate files to verify the commitment date and compared them to the date recorded on the comprehensive training roster. There were no instances where the inmates were provided training beyond the time required by the standard. The auditor interviewed 30 random inmates. The majority of the inmates recall receiving the comprehensive education booklet.

115.33 (d)(e) The WTRJ provided the auditor with a copy of the comprehensive PREA education booklet. The booklet is provided in both English and Spanish (the predominate non-English language in the area). The booklet contains the information required by the standard. In addition, Policy 5.15 page 9 indicates that all inmates who serve at least 30 consecutive days of confinement will be provided with comprehensive PREA education in the form of a written booklet as well as a video that is played on the inmate televisions on a weekly basis. During a targeted

interview with the PREA Coordinator, he told me that in any case where a inmate was unable to understand the education booklet because they were LEP, he would use the language line. Further, if they are cognitively disabled, or had low vision or were hard of hearing, he would make accommodations in accordance with their disability.

However, he has had no instances during this audit period where accommodations beyond the language line were required. The PREA coordinator also documents each educational session and the auditor reviewed those logs for the last year. The inmates are required to acknowledge their participation in the training session, and this is retained in the log. No LEP inmates were available to participate in targeted inmate interviews.

115.33 (f) As part of the PAQ, the WTRJ submitted copies of PREA posters that specifically stated that the agency had a zero tolerance policy for sexual abuse or harassment. During the site review, the auditor personally observed these posters in all inmate housing areas as well as common inmate areas such as classrooms. In addition, during 30 random inmate interviews, the majority of the inmates told the auditor that they could report sexual abuse of harassment through the telephone system and they knew that posters were at the telephones and they had a hotline number on them as well as an address to write if preferred.

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

Corrective Action: None

115.34	<p>Specialized training: Investigations</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Page 10 Review Training Curriculum for Specialized Training Review of Training Certificates for Investigators Investigative Files for the last 12 months</p> <p>Interviews with the following:</p> <p>PREA Coordinator Investigative Staff</p> <p>115.34 (a) (b) (c) (d) WTRJ Policy 5.15, page 10, stipulates that all investigative personnel who conduct investigation for the agency successfully complete specialized training for conduction investigations in a confinements setting. The auditor reviewed the training outlines for the specific courses. The WTRJ has two investigators who attended training courses. Upon review of the training curricula, both courses provided instruction in accordance with the standard and included instruction on techniques for interviewing victims of sexual abuse, the use of Garrity and Miranda Warnings, evidence collection, and the evidence required to substantiate a case for administrative action as well as referring cases for criminal prosecution. The PREA Coordinator provided copies of the certificates of successful completion and the training agendas during the pre-audit portion of the audit. The WTRJ maintains certificates of training for the two investigators who conduct sexual assault investigations for the jail. The auditor reviewed the certificates of completion for both investigators. There is no state or federal agency that is charged with investigating sexual abuse or harassment allegations at the WTRJ.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
---------------	---

115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Pages 8-11 WTRJ Policy 13.1, pages 2-4 Review Training logs nursing and mental health staff</p> <p>Interviews with the following:</p> <p>PREA Coordinator Medical Staff Mental Health Staff</p> <p>115.35 (a) (c) (d) The WTRJ Policy 5.15, pages 9-11 requires that all staff members receive training regarding the PREA in accordance with standard 115.31. Further, the Policy 5.15, pages 10-11 requires that all part- and full-time mental health and medical staff members receive addition and specialized training. The police 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 WTRJ employees 32 medical and mental health personnel and all 32 have received the required specialized training. This represents 100% of the employees in this category. During the on-site portion of the audit, the auditor reviewed the training logs maintained by the PREA Coordinator and cross-referenced the roster of mental health and medical personnel and verified that all of the current employees had received the required training. There was some very recent turnover in the HSA and DON just prior to the audit. During targeted interviews with the medial and mental health staff all the staff members remember receiving NIC specialized PREA training upon their orientation. In addition, all remembered having to log into the NIC website and create an account and complete additional training related to healthcare and the PREA.</p> <p>Targeted interviews with the PREA Coordinator verified that every employee is required to participate in PREA training in accordance with 115.31 and that training is documented, the employees are required to sign a training acknowledgement and then then complete additional specialized training and provide a certificate of completion. The auditor reviewed examples of those additional certificates of completion.</p>

115.35 (b) The staff of the WTRJ does not perform forensic medical examinations for victims of sexual assault.

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

Corrective Action: None

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Page 14-17 WTRJ inmate Handbook Inmate Sexual Misconduct Orientation Forms WTRJ PREA Screening Instrument Sampling of 30 Random Inmate files 15 Day Reclassification Reviews conducted by Classification and Logs Maintained by PREA Coordinator (during corrective action). Interviews with the following:</p> <p>PREA Coordinator Random Inmates Intake Staff Classification Staff Observations of the Following:</p> <p>Inmate Intake Process</p> <p>115.41 (a) According to WTRJ Policy 5.15, pages 14-16 all inmates shall be assessed upon their admission to the facility within 72 hours and reassessed no later than 15 days after admission to the facility. During the site review, the auditor was not able to follow an inmate through the admission and entire classification process. But during the site review, the auditor observed a inmate being admitted to the jail during initial booking, and during that process, they were informed of the inmate’s 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 classification staff verified that upon admission within 72 hours, all inmates were screened for risk sexual abuse victimization and the potential for predatory behavior. During interviews with random inmate, some of the inmates interviewed did not remember their initial screening due to their drug and alcohol intoxication and withdrawals. 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.</p> <p>115.41 (b) (c) According to WTRJ Policy 5.15 page 15, inmates are required to</p>

normally take place within 72 hours of admission. According to the PAQ there were 1822 inmates admitted to the facility in the past 12 months who had a length of stay longer than 72 hours and according to the PAQ, 1,822 inmates received a risk screening within 72 hours. That is 100% of all 1,822 inmates received a risk assessment within 72 hours of admission. The auditor selected 25 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 25 randomly selected files verified that they had received risk screening within 72 hours of booking. Targeted interview with classification staff verified that they perform risk assessment within 72 hours of booking. Targeted interviews with random inmates revealed that there were several inmates that did not recall the initial screening and none of the inmates interviewed remember all 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 classification staff on the risk assessment form. There are areas on the form that allow for the inclusion of additional details related to the question, if additional data needs to be documented.

115.41 (d) According to the PAQ and WTRJ Policy 5.15, page 15, 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.

115.41 (e) According to WTRJ Policy 5.15, Page 15, 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 classification staff, who conduct risk assessments, 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 they review the inmate's criminal history, current offenses, as well as institutional history, if they have been in the WTRJ previously.

115.41 (f) (g) WTRJ Policy 5.15, page 15, requires that all inmates shall be reassessed within 15 days of the initial assessment utilizing any additional and relevant information received since the initial screening. Targeted interviews with the PREA Coordinator, Classification Staff, and a review of the PAQ and inmate classification files during the on-site review have verified that reassessments are not being conducted consistently in accordance with the standard. The WTRJ is not in compliance with this standard and will require corrective action.

115.41 (h) WTRJ Policy 5.15, page 15-16, 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 classification staff as well as the PREA Coordinator, there have been no instances of inmates being disciplined for refusing to answer screening questions.

115.41 (i) Targeted interviews with the PREA Coordinator and the Classification staff verified that only records, classification, and administrative staff have access to PREA risk assessment screening information, unless the inmate is referred for medical or mental health treatment. The auditor reviewed the storage area for inmate records. The records are stored in secure and lockable filing cabinets and behind a locked door in the records area.

Corrective Action:

In order to be in compliance with the standard, the WTRJ must develop a reliable method to assure that all inmates who are screened for risk in accordance with this standard are affirmatively reassessed in a set period no later than thirty days using any additional and relevant information. This reassessment must be reliably documented in accordance with the standard. In addition, there must be documentation of any reassessment that occurs as a result of additional information or involvement in incidents of sexual abuse.

Corrective Action Summary and Determination of Compliance: The WTRJ PREA Coordinator prepares a computerized report every two weeks, which contains a list of all inmates committed to jail in the previous two weeks. Using that report, the PREA Coordinator meets with each inmate remaining in custody for two weeks and provides comprehensive education to those inmates. In order to comply with this standard, the PREA Coordinator provides that same report to their classification personnel, who perform a reassessment of the inmate's initial PREA screening results, including any relevant additional information. This reassessment is documented in the inmate's classification file. The evaluation compliance, the auditor reviewed examples of the computer generated report of inmates in custody as well as a sample of reassessment forms completed by classification. There is a very strong likelihood that the inconsistency in this practice was simply based upon the unpredictable turnover in this role surrounding the period of the PREA audit as opposed to a lack of operationalization of the policy.

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

	standard.
--	-----------

115.42	Use of screening information
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 558 300">Auditor Discussion</p> <p data-bbox="256 340 1082 376">Evidence Relied upon to make Compliance Determination:</p> <p data-bbox="256 483 1043 600">WTRJ Completed PAQ WTRJ Policy 5.15, Page 16 Review of classification screening decisions for inmates</p> <p data-bbox="256 680 673 716">Interviews with the following:</p> <p data-bbox="256 752 1136 828">PREA Coordinator Supervisors Responsible for Conducting Unannounced Rounds</p> <p data-bbox="256 909 667 945">Observation of the following:</p> <p data-bbox="256 1048 759 1084">Site review of inmate housing units</p> <p data-bbox="256 1164 1474 1491">115.42 (a) (b) Policy 5.15, page 16 of the WTRJ requires that screening information from the PREA risk assessment is used in making housing, bed work, education, and programming assignments. The auditor reviewed the written documents used when making classification decisions, and there was evidence of having used the risk assessment information to make such classification decisions. Targeted interviews with the PREA Coordinator and Classification staff told the auditor that they considered the results of the PREA screening in accordance with the standard and the computerized records provided documentation of such.</p> <p data-bbox="256 1527 1474 2069">115.42 (b) (c) (d) (e) (f) WTRJ Policy 5.15, page 16, 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 placement and programming decisions shall be reassessed twice per year in order to review any threats to safety. The policy requires that a transgender or intersex inmate's own views 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 inmates. During the site tour, the auditor reviewed all inmate housing units. All inmate housing units permit inmates to shower separately from one another, including dormitory housing units. During targeted interviews with the PREA Coordinator and Classification Staff, they both confirmed that they would act in accordance with the standard and there have been 2 transgender or intersex inmates</p>

confined in the jail during this audit period. In addition, one targeted interview with a transgender or intersex was able to be completed by the auditor. The transgendered inmate had not been in the jail long enough to participate in a six month review.

115.42 (g) According to WTRJ Policy 5.15, page 16, the WTRJ shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated wings solely on the basis of such identification. According to the WTRJ submitted PAQ, the WTRJ is not subject to any legal settlements or decrees or judgements. 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 targeted interviews with the PREA Coordinator and asked if there were any dedicated housing units for LGBTI inmates. The PREA Coordinator told the auditor that inmates' housing was based upon objective finding and LGBTI inmates were not placed in dedicated units. Targeted interviews with 4 LGBTI inmates verified that the WTRJ does not place inmates in dedicated housing units.

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

Corrective Action: None

115.43	Protective Custody
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 300">Auditor Discussion</p> <hr/> <p data-bbox="256 340 1082 376">Evidence Relied upon to make Compliance Determination:</p> <p data-bbox="256 483 686 560">WTRJ Completed PAQ WTRJ Policy 5.15, Pages 16-17</p> <p data-bbox="256 640 673 676">Interviews with the following:</p> <p data-bbox="256 712 1262 828">PREA Coordinator Agency Administrator (Superintendent) Supervisors Responsible for Supervising Inmates in Restrictive Housing</p> <p data-bbox="256 909 1458 1106">115.43 (a) According to Policy 5.15, Page 16-17, the WTRJ does not place inmates who are at high risk for sexual victimization in restrictive housing unless alternatives have been considered and are not available. According to the PAQ, there have not been any instances where inmates at risk for sexual victimization were placed in restrictive housing for the purpose of separating them from potential abusers.</p> <p data-bbox="256 1120 1458 1402">According to targeted interviews with staff who supervise inmates in restrictive housing, he is not aware of a case where a inmate was placed in restrictive housing as a result of being a high risk for sexual victimization. A targeted interview with the superintendent also verified that no inmates during the audit period have been placed in restrictive housing involuntarily in order to separate them from potential abusers. The superintendent remarked that he has sufficient space and numbers of housing units to find a suitable place for an otherwise orderly inmate.</p> <p data-bbox="256 1438 1477 1805">115.43 (b) (c) (d) (e) The WTRJ stipulates in Policy 5.15, Pages 16 and 17 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 on page 17 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 a inmate is confined involuntarily under these circumstances, the facility shall review the continuing need at least every 30 days.</p> <p data-bbox="256 1841 1477 2047">During the on-site portion of the audit, the auditor reviewed all of the restrictive housing area and had informal discussions with both inmates and staff. As verified by targeted interviews with the Superintendent 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>
--	--

Corrective Action: None

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ with ADP since last PREA Audit WTRJ Policy 5.15, Page 4, 8, 24-26 Review of investigative files which include anonymous 3rd party reporting Review of inmate handbook (English and Spanish) Review of inmate PREA Comprehensive Training Booklet (English and Spanish)</p> <p>Interviews with the following:</p> <p>PREA Coordinator Random Staff Random Inmates</p> <p>Observation of the following:</p> <p>Observation of informal interactions between staff and inmates Observation of inmates using the inmate tablet system Observation of inmates using the telephone system Observation of Information Posters inside the housing units, adjacent to telephone and in the booking area</p> <p>115.51 (a) The WTRJ Policy 5.15, pages 11-14 require 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. The auditor reviewed the inmate handbook on page 20, where 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. The auditor reviewed the Comprehensive PREA Booklet and in the booklet, it informs inmates that they can make reports of sexual abuse or harassment or retaliation by using Inmate Request Forms, Inmate Grievance Forms, Verbal Reporting to any staff member, contractor, or volunteer or by contacting the Sexual Abuse Hotline using the inmate telephones. 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 the inmate request form system on the tablet. In addition, several staff members mentioned writing an anonymous letter to the PREA Coordinator and most</p>

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 and during informal conversations with the inmates, many told the auditor that they could report instances of sexual abuse to staff or using the hotline on the telephone. In addition, several inmates also mentioned the use of the inmate request system on the tablet.

115.51 (b) According to WTRJ Policy 5.15, page 12 provides a requirement that inmate have the option of reporting incidents of sexual abuse to a public or private entity that is not part of the agency. During the site review, the auditor observed PREA informational posters adjacent to the inmate telephones that have a Hotline to the YWCA where report can be taken and referred immediately for investigation by the PREA Coordinator. In addition, auditor tested the telephone number to ensure it was functioning and could be used for reporting. The number worked when called from 3 inmate housing units. The number was also tested from a staff telephone line and it also connected. The auditor reviewed the inmate handbook, and page 20 informed inmates that they may make a 3rd party report of sexual abuse or harassment by calling the YWCA hotline. The Comprehensive PREA Educational Booklet also informs the inmates on page 4 that they may report incidents of sexual abuse to a third party, including family or friends, and by use of the YWCA Hotline on page 5. During targeted interviews with random inmates, many of the inmate knew that they could make reports of sexual abuse to individuals outside of the facility and called it the "Hotline"; however, not every inmate knew that they could. One inmate simply responded that they don't snitch. Targeted interview with the PREA Coordinator verified that there are multiple ways to make PREA complaints by both staff and inmates. He mentioned the use of the inmate phone system, anonymous letters, direct letters to the police department or commonwealth's attorney as well as third party reporting by family and friends. During the auditor's review of investigative files, there was an investigation initiated by a family member making a third-party complaint. The WTRJ does not hold inmates solely for civil immigration purposes.

115.51 (c) WTRJ policy 5.15, pages 11-12 requires that all staff accept reports of sexual abuse or harassment both verbally and in writing and that those reports shall be documented writing by staff and responded to immediately. During targeted interviews with staff, the majority of the random staff interviewed told the auditor that if a 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 every random staff interview, each staff member stated that they would take action without delay and would accept a verbal or anonymous 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. The majority of the inmates stated that they knew that they could just report an incident to staff if something happened, but there were several inmates that said that they don't tell the police anything. During

random inmate interviews, the auditor routinely asks inmates if they reported an incident of sexual abuse or harassment, do they think that the staff would respond and investigate. The majority of the inmates interviewed said they believed that staff would respond and some inmates said that it would depend on the staff member.

115.51 (d) According to Policy 5.15, page 12, staff members are able to report instances of sexual abuse or harassment privately to their supervisor or any facility supervisor or call the YWCA Hotline. Staff members are informed of this provision during PREA training, and it is in their policy manual. Targeted staff interviews verified that staff are aware that they can report incidents of sexual abuse or harassment and all staff that were randomly interviewed answered that they would report any such incident to their supervisor. A few staff members also mentioned that they could make a report to the YWCA hotline, if for some reason they didn't want to tell a supervisor.

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

Corrective Action: None

115.52	Exhaustion of administrative remedies
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 557 300">Auditor Discussion</p> <p data-bbox="256 340 1082 376">Evidence Relied upon to make Compliance Determination:</p> <p data-bbox="256 416 826 533">WTRJ Completed PAQ WTRJ Policy 5.15, Page 14 Inmate Handbook (English and Spanish)</p> <p data-bbox="256 613 673 649">Interviews with the following:</p> <p data-bbox="256 685 509 721">PREA Coordinator</p> <p data-bbox="256 797 1469 1079">115.52 (a) (b) (c) (d) (e) (f) (g) WTRJ Policy 5.15 Pages 13-14 are written in accordance with all of the provisions of the standard. On site document reviews of the grievance log verifies that there have been no grievances filed regarding an allegation of sexual abuse in the past 12 months. There have also been no instances in the past 12 months where a grievance was filed in bad faith and inmates were disciplined by staff. The auditor reviewed the inmate handbook and it contains the general provisions for filing a grievance.</p> <p data-bbox="256 1120 1404 1191">After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p data-bbox="256 1232 593 1267">Corrective Action: None</p>

115.53	Inmate access to outside confidential support services
	<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 pages 11-12 3. WTRJ Website and inmate Handbook 4. MOU with local YWCA center 5. Email notifications of third-party reporting from the local YWCA 6. Interviews with the following: <ol style="list-style-type: none"> a. PREA Coordinator b. Random Inmates c. Random and Targeted Staff d. Mental Health and Medical Staff 7. Observations of the Following: <ol style="list-style-type: none"> a. PREA informational Posters throughout the facility and public areas <p>115.53 (a) Along with their completed PAQ, the WTRJ provided examples of several documents that included information regarding the availability of outside confidential support services for victims of sexual abuse and harassment. These documents were the inmate handbook, in both English and Spanish, as well as the inmate comprehensive education booklet, also available in English and Spanish. Finally, they provided copies of a poster that notifies inmates of the availability of a third-party reporting hotline. Additionally, the WTRJ Policy 5.15 pages 11 and 12 require 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. After review of the documentation provided, I determined that the number to confidential outside services was provided on PREA signage, the inmate handbook as well as the comprehensive PREA education booklet. The information was included as required by the standard.</p> <p>The auditor conducted interviews with 30 inmates. The majority of inmates were aware that there was a hotline they could call where they could make a complaint of abuse or harassment and a majority of those interviewed knew that there was a confidential resource that they could access for support.</p> <p>An interview with the PREA Coordinator indicated that during his comprehensive</p>

education, he does inform inmates about the availability of outside support services that are available, and the information is listed in the comprehensive booklet that is provided to the inmates. The comprehensive education booklet and inmate handbook does inform the inmates that all information will be maintained as confidentially as possible and in accordance with mandatory reporting requirements. During the site review, the auditor observed PREA signage that all included the YMCA hotline numbers, and informal conversations with inmates indicated that they had received face to face comprehensive training from the PREA Coordinator. They were all aware of the hotline, and most reported know that the line was also available for emotional support services. The WTRJ does not house inmates solely for immigration purposes, so the provision of the standard related to that is not applicable.

115.53 (b) The inmate handbook, as well as the comprehensive PREA education booklet, explains to the inmate that outside support services are available to inmates and requests and reports would be kept as confidential as possible. In addition, the documents tell the inmates that calls made on the hotline may be monitored and recorded.

115.53 (c) The agency has provided the auditor a copy of a MOU between the local YWCA and the Jail Authority whereby the YWCA agrees to provide outside emotional support services in response to requests of staff or inmates of the WTRJ.

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

Corrective Action: None

115.54	<p>Third-party reporting</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. WTRJ Policy 5.15 pages 11-12 3. WTRJ Website and inmate Handbook 4. MOU with local YWCA center 5. Interviews with the following: <ol style="list-style-type: none"> a. PREA Coordinator b. Random Inmates <p>115.54 (a) The WTRJ publicly provides a method for the receipt of third party reports of sexual abuse or harassment. This information is provided to the inmates as part of their comprehensive education, on informational posters in both English and Spanish, and in the inmate handbook. The WTRJ website has a document on its public website that contains information about investigative agencies and their responsibilities for criminal and administrative investigations and also contains contact information for jail officials should any one wish to report an incident of sexual abuse or harassment on behalf of a inmate. The auditor viewed the information on the website. Other agencies, such as the commonwealth’s attorney’s office and the local police department as well as the YWCA sexual assault hotline and their contact information is available on the website.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
--------	---

115.61	Staff and agency reporting duties
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 300">Auditor Discussion</p> <p data-bbox="256 340 1082 376">Evidence Relied upon to make Compliance Determination:</p> <p data-bbox="256 483 986 600">WTRJ Completed PAQ WTRJ Policy 5.15, Page 11 Review of investigative files for the past 12 months</p> <p data-bbox="256 680 673 716">Interviews with the following:</p> <p data-bbox="256 752 815 869">PREA Coordinator Agency Administrator (Superintendent) Random Staff</p> <p data-bbox="256 949 1477 1608">115.61 (a) WTRJ Policy 5.15, page 11 requires that any staff member, volunteer or contractor immediately report any instance of sexual abuse or harassment, any retaliation for the report of abuse or harassment any actions that may have contributed to an incident of abuse or harassment. During the site review, several staff members were informally 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 kitchen contractors who were supervising inmates during the site review, and all responded that they would report any instance of sexual abuse or harassment and do so immediately. 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. They all responded that they would make the report and take action without delay. 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 such allegations or suspicions, even if it were staff or contractors or volunteers.</p> <p data-bbox="256 1648 1477 1975">115.61 (b) WTRJ Policy 5.155, page 11, required 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. All of the interviewed staff stated that details related to either inmate allegations or staff allegations should remain confidential. During site review, the auditor observed all investigative and classification files to be contained in lockable cabinets with limited access and medical files are in an electronic medical record.</p> <p data-bbox="256 2016 1477 2087">115.61 (c) (d) (e) The WTRJ Policy 5.15, page 11 requires that all medical and mental health personnel report the mandatory reporting requirements and limits of</p>

confidentiality to victims of sexual abuse. According to targeted interviews with medical and mental health staff, they inform inmates of their reporting requirements and limits of confidentiality whenever they would begin treatment associated with sexual abuse related services. Both of the targeted interviews revealed that the medical and mental health practitioners indicated that were aware of the laws in Virginia regarding the mandatory reporting requirements for vulnerable adults and victims under the age of 18. They indicated that they would document consent to notify in non-mandatory circumstances in the inmate medical record. During targeted interviews with the PREA Coordinator and the Superintendent, both acknowledged their requirement under the law to report instances of current or previous sexual abuse of inmates under the age of 18. There were not such reports in the last 12 months. Targeted interviews with the Superintendent and the PREA Coordinator verified that the agency reports all allegations of sexual abuse or harassment received from a third party are referred for investigation. The auditor reviewed all 5 investigative files from the previous 12 months and none were initiated due to mandatory reporting.

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

Corrective Action: None

115.62	<p>Agency protection duties</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Page 26</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent) Random Staff</p> <p>115.62 (a) WTRJ Policy 5.15, page 16 requires that whenever there is a report that there is an incident of sexual abuse or harassment, the victim should be immediately protected. During the review of investigations from the past 12 months, there were five instances where staff responded to allegations of sexual abuse or harassment and according to their reports, the circumstances did not require immediate protective actions. Targeted interviews with the Superintendent 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. In addition, there were circumstances where staff responded to instances where inmates were at a substantial risk of immediate harm, but they were not related to PREA allegations. During targeted interviews with random staff, all staff who were asked what they would do if they knew of a substantial risk of imminent sexual abuse responded that they would immediately remove the inmate from the location and notify their supervisor and investigate.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
--------	--

115.63	<p>Reporting to other confinement facilities</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Page 13 Review of notice to another facility</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent)</p> <p>115.63 (a) (b) (c) The WTRJ Policy 5.15, page 13, 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. In the past 12 months the WTRJ received one allegation from an inmate that a inmate was abused in another facility. The Auditor reviewed the notification that was made to the facility in accordance with the standard.</p> <p>115.63 (d) WTRJ Policy 5.15, page 13, 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. There were no instances of notice by another facility that an inmate alleged abuse at the WTRJ in the last 12 months. Targeted interviews with the Superintendent and PREA Coordinator revealed that if they received such a notice, they would begin an investigation immediately, including making an attempt to interview the alleged victim in person.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
---------------	---

115.64	<p>Staff first responder duties</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, pages 28-28 Review of all 5investigative reports from the past 12 months</p> <p>Interviews with the following:</p> <p>Random Staff</p> <p>115.64 (a) WTRJ Policy 5.15, pages 26-28 requires that when a inmate reports and 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. During the past 12 months, there were no instances of allegations of sexual abuse that required the first responder to preserve or collect physical evidence. Five instances of sexual abuse were reported, but all were unfounded. The alleged victim made allegations of sexual abuse, but the victim and alleged abuser were not housed together and didn't need to be separated. There were no inmates present during the on-site portion of the audit who had reported sexual abuse.</p> <p>115.64 (b) WTRJ Policy 5.15, pages 26-28 requires that if the first responder is not a security staff member 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. A review of all investigative files from the past 12 months verifies that no non-security staff member acted as a first responder.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
--------	---

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ with ADP since last PREA Audit WTRJ Policy 5.15, pages 30-32</p> <p>Interviews with the following:</p> <p>Agency Administrator (Superintendent)</p> <p>115.65 (a) WTRJ Policy 5.15, pages 30-32 described the jail’s coordinated response to an allegation sexual abuse or harassment. The auditor interviewed the Superintendent who 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 evidence. The initial investigation begins with the first responders and then the facility investigators. Depending on the nature of the allegation, the investigation will either begin 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 along with 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 and the alleged victim is notified. It may be referred for criminal prosecution or handled administratively and could require medical and 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>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent)</p> <p>115.66 (a) (b) Interviews with both the Superintendent and the PREA Coordinator verified that there is not a collective bargaining agreement in place. However, targeted interviews verified that all staff are required to act in accordance with all policy standards.</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:

WTRJ Completed PAQ
WTRJ Policy 5.15 page 13

Interviews with the following:

PREA Coordinator
Agency Administrator (Superintendent)

115.67 (a) (b) (c) (d) (e) (f) The WTRJ has a written policy, 5.15, pages 13-14, that requires staff and inmates who report unsubstantiated or substantiated allegations of sexual abuse or harassment are protected from retaliation for making such reports. In addition, the Superintendent or his designee is charged with monitoring for any instances of retaliation. During targeted interviews with the Superintendent and the PREA Coordinator, they confirmed that the PREA Coordinator, Lieutenant Ambrose, is responsible for monitoring for retaliation. During targeted interviews with the Superintendent and PREA Coordinator, both persons told the auditor that the Superintendent, Colonel Chris Smith and Lieutenant Ambrose were responsible for monitoring for retaliation against staff members who may report unsubstantiated or substantiated incidents of sexual abuse or harassment. During targeted interviews, the Superintendent told the auditor that it was ultimately his responsibility to assure that there was no retaliation for reports of abuse by either staff or inmates. The Superintendent and PREA Coordinator both told the auditor that they had the authority to move inmates around the facility or to other facilities or take other protective measures to assure inmates were not retaliated against. In addition, the Superintendent told the auditor that he has the authority to intervene in any way necessary to protect employees from retaliation if they reported incidents of sexual abuse or harassment. He told the auditor that he personally monitors all progress of PREA investigations and requires regular briefings by the PREA Coordinator until the investigation is complete. All five PREA complaints this audit period were unfounded, but the Superintendent and the PREA Coordinator both told the auditor that had any investigations been unsubstantiated or substantiated, then the inmates would have been monitored in accordance with the standard. The auditor was not able to view documents that would verify compliance. There were no substantiated or unsubstantiated incidents of sexual abuse or harassment during this audit period.

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

Corrective Action: None

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Page 16-17 Review of all 5 Investigative Files from the past 12 Months</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent)</p> <p>Observation of the following:</p> <p>Observation of inmates in restrictive housing</p> <p>115.68 (a) According the WTRJ Policy 5.15, pages 16-17, inmate are not held in restrictive housing as a result of being a high risk for sexual victimization in accordance with PREA Standard 115.43. There have been no instances in the past 12 months were inmates have been held in involuntary restrictive housing as a result of sexual victimization or having been identified as being at high risk of victimization. The auditor reviewed all of the WTRJ restrictive housing units and through informal discussions with both supervising officers and inmates assigned to restrictive housing, no staff or inmates indicated that they were assigned to restrictive housing as a result of their sexual vulnerability. In addition, during targeted interviews with the Superintendent 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>

115.71	Criminal and administrative agency investigations
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 558 300">Auditor Discussion</p> <p data-bbox="256 340 1082 376">Evidence Relied upon to make Compliance Determination:</p> <p data-bbox="256 483 1187 685"> WTRJ Completed PAQ WTRJ Policy 5.15, Pages 19-22 Review of all 5 Investigative Files for the past 12 months Certificates of Completion for Both Agency Investigators Training Curricula for Investigative Training specific to Corrections </p> <p data-bbox="256 766 673 801">Interviews with the following:</p> <p data-bbox="256 837 520 913"> PREA Coordinator Investigative Staff </p> <p data-bbox="256 994 1474 1778"> 115.71 (a) (b) WTRJ Policy 5.15, pages 19-22, requires that the agency conduct administrative investigations of sexual abuse and harassment. The policy stipulates that criminal investigations shall be conducted by the local police department. The auditor has reviewed and verified that there is a MOU with the local police department where they agree to conduct criminal investigations related to the PREA and that they agree to abide by the provisions of standard 115.21. 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 auditor reviewed all 5 of the reported incidents that were reported during this audit period and verified that all of the investigations were responded to immediately by staff. According to the document reviews, all incidents were investigated by a specially trained investigator within 24 hours and did not rise to the level of a crime and did not require first responder intervention. Targeted interviews with the facility investigators verified that the investigators are available to respond immediately if necessary. The auditor’s review of the investigative reports verify that investigators respond to allegations during on and off duty hours. The auditor was provided training curricula and training certificates of designated investigators during the pre-audit phase. The auditor reviewed and verified that the two facility investigators had proof of receiving the specialized training required by the standard. </p> <p data-bbox="256 1814 1474 2060"> 115.71 (c) (d) (e) The auditor reviewed the investigative files of 5 allegations of sexual abuse or harassment. The auditor verified that no allegations required the collection of any physical evidence or DNA evidence. None of the alleged perpetrators had a history of sexual violence or complaints of sexual abuse. In all of the investigations, investigators were able to view CCTV recording of the alleged incidents and in all 5 investigations, both victims, alleged perpetrators and witnesses, </p>

including staff were interviewed and made a part of the investigative reports. The credibility of the witnesses was evaluated on their merits and not their status as a inmate or officer or staff member. There were no circumstances where either alleged victims nor abusers or victims were subjected to a polygraph examination.

115.71 (f) The departmental investigator documented his investigations in writing and included descriptions of the allegations, a description the evidence reviewed, as well as his reasonings for his findings. In the review of the investigations, there were no circumstances where the investigator found any witnesses unreliable based upon their statements alone.

115.71 (g) (h) (i) (j) According to the documents reviewed by the auditor, there have been no criminal investigations or substantiated allegations of sexual abuse or harassment during this audit period. The WTRJ Policy, pages 19-22 requires that all written reports are retained in accordance with this standard. The auditor did not review the reports for compliance with the standards, only to review retention. All investigations during this audit period were completed before the inmates were released from custody. Targeted interviews with the PREA Coordinator as well as the Superintendent and Investigative Personnel verified that they retain all investigative records in accordance with the standard and written policy. The auditor observed previously completed reports that were completed prior to this audit period and they were retained in a locked cabinet.

115.71 (k) State agencies do not investigate allegations of sexual abuse or harassment in the WTRJ.

115.71 (l) According to targeted interviews with the PREA Coordinator, Investigator and Superintendent verified that whenever an outside agency conducts an investigation of sexual abuse, the departmental investigator serves as a liaison and will keep jail administrators informed of the progress of the investigation. The Superintendent said that the only exception to this practice would be if there was an employee involved, and in such a case, the investigators would communicate directly with him or the deputy superintendent.

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

Corrective Action: None

115.72	Evidentiary standard for administrative investigations
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 557 300">Auditor Discussion</p> <p data-bbox="256 340 1082 376">Evidence Relied upon to make Compliance Determination:</p> <p data-bbox="256 483 1011 600">WTRJ Completed PAQ WTRJ Policy 5.15, Page 21 Review of 5 Investigative files for the past 12 months</p> <p data-bbox="256 654 671 689">Interviews with the following:</p> <p data-bbox="256 725 815 842">PREA Coordinator Agency Administrator (Superintendent) Investigative Staff</p> <p data-bbox="256 922 1481 1245">115.72 (a) WTRJ Policy 5.15, page 21, stipulates that no evidentiary standard greater than a preponderance of the evidence will be used to substantiate an administrative investigation. During the past 12 months, there have been no substantiated cases of sexual abuse or harassment. A Review of all investigative files for the past 12 months verified this information. A targeted interview with both the PREA Coordinator and facility investigator verified that the evidentiary standard for substantiating administrative investigations is not higher than a preponderance of the evidence.</p> <p data-bbox="256 1281 1401 1361">After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p data-bbox="256 1397 592 1433">Corrective Action: None</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Pages 21-22 MOU with the Suffolk Police Department Review of Sexual Abuse Investigative Files (5) for the past 12 months</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent)</p> <p>115.73 (a) According to WTRJ Policy 5.15, page 21, all inmates who make an allegation of sexual abuse is informed as to whether the allegation is substantiated, unsubstantiated or unfounded. During the past 12 months, there have been 5 administrative investigative investigations completed by the agency as a result of sexual abuse allegations for inmates in custody in the facility. In all 5 cases, the inmates were notified of the results of the investigations. In all 5 cases the allegations were unfounded. The auditor conducted targeted interviews with the PREA Coordinator and the Jail Superintendent. The targeted interviews verified that there have been one external investigation in the past 12 months. They verified that the established MOU requires that the PD keep the jail informed of the progress of such an investigation and that the provide a final report of such an investigation to the Superintendent. They confirmed that the final report would be required to contain the elements as required by the standard. The auditor asked the Superintendent if the PD was required to make prosecutorial referrals for all criminal incidents and he told me that they were.</p> <p>115.73 (b) During the past twelve months, one investigation of sexual abuse was conducted by outside agencies. WTRJ Policy 5.15, page 21, requires that the jail be informed of the progress of and outcome of investigations conducted by outside agencies. The auditor reviewed the MOU with the Suffolk PD which requires that they inform the WTRJ of progress of investigations and that they provide a final report to the WTRJ in accordance with the standards. The auditor reviewed the final report.</p> <p>115.73 (c) WTRJ Policy 5.15, pages 21-22, is written in accordance with the standard. During the past 12 months, there have been no substantiated or unsubstantiated allegations of sexual abuse against a staff member. The auditor reviewed all of the investigative files for the last 12 months and confirmed that there had been no substantiated or unsubstantiated incidents of sexual abuse or harassment in the past</p>

12 months.

115.73 (d) WTRJ Policy 5.15, pages 21-22 is written in accordance with the standard. The auditor reviewed all investigative files for the previous 12 months and there were no instances where an alleged abuser was either indicted or convicted of a charge related to sexual abuse within the facility. No inmates who reported abuse were in custody during the on-site portion of the audit.

115.73 (e) (f) WTRJ policy 5.15, page 21, is written in accordance with the standard and page 21 requires that notification is documented. The auditor reviewed all investigative files from the last 12 months. 5 allegations of sexual abuse were made by inmates who were in the facility at the time of the allegation. The auditor reviewed the investigative files for the past 12 months and verified that notification was made to the five inmates as required by the standard.

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

Corrective Action: None

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Pages 22-24</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent) Human Resources Director</p> <p>115.76 (a) (b) (c) (d) According to WTRJ Policy 5.15, pages 22-24, staff shall be subject to disciplinary sanctions up to and including termination for violating the jail's sexual abuse and harassment policies. In addition, Policy 5.15 page 22 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, Superintendent and HR Director verified that there were no terminations or disciplinary actions related to sexual abuse or harassment of inmates in the past 12 months.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Page 23</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent) Targeted Interviews with contract staff</p> <p>115.77 (a) (b) WTRJ 5.15, page 23 stipulates that any contractor or volunteer who engages in unlawful sexual abuse of a inmate is reported to law enforcement agencies and considers whether to prohibit contact with inmates in the case of other violations or the sexual abuse or harassment policies. In the past 12 months, there have been no instances where volunteers or contractors have engaged in sexual abuse or harassment. During informal discussions with the superintendent, he indicated that any contractor or volunteer who was found to have engaged in any type of sexual abuse or harassment would have their security clearance to enter the jail immediately revoked. The Superintendent and the PREA Coordinator both verified during targeted interviews that there had been no instances of sexual abuse or harassment by contractors or volunteers in the past 12 months. The auditor asked three kitchen contractors and two medical contractors what they thought would happen if they violated the PREA and sexually abused or harassed an inmate. All five of the interviewees said that they expected to be removed from the jail and prosecuted.</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
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Pages 23-25</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent)</p> <p>115.78 (a) According to WTRJ policy 5.15 pages, 23-24, inmates are subject to formal disciplinary action following an administrative finding that they engage in inmate on inmate sexual abuse. According to the submitted FAQ, 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 was not able to review any inmate files related to this standard because there were no instances of inmate on inmate or staff on inmate abuse.</p> <p>115.78 (b) According to WTRJ policy 5.15, page 23, 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. The auditor was not able to review any inmate files related to this standard because there were no instances of inmate on inmate or staff on inmate abuse.</p> <p>115.78 (c) WTRJ policy 5.15, page 23, requires that WTRJ staff consider whether a inmate’s mental health contributed to their behavior before determining their disciplinary sanctions. The auditor was not able to review any inmate files related to this standard because there were no instances of inmate on inmate or staff on inmate abuse.</p> <p>115.78 (d) The auditor interviewed mental health personnel regarding their initiation of counseling or therapy for individuals who have committed sexual offenses. The auditor also asked if participation in such counseling or therapy was required in order to participate or access other programs or counseling. The mental health personnel said that any decision to offer counseling or therapy to offenders would be on a case by case basis because of the complexity of the type of treatment that is often required. The mental health personnel, as well as the PREA Coordinator said that there were no requirements for treatment in order to participate in other programs.</p> <p>115.78 (e) WTRJ policy 5.15, page 23, stipulates that inmates will not be disciplined</p>

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

115.78 (f) WTRJ policy 5.15 page 24, 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 making unsubstantiated or unfounded allegations of sexual abuse or harassment.

115.78 (g) The WTRJ prohibits all inmate to inmate sexual activity according to Policy 5.15, page 24. According to page 23 of Policy 5.15, they do not consider non-coercive sexual contact as sexual abuse; but it is considered a violation of jail rules and the inmates could be disciplined.

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

Corrective Action: None

115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Page 17 Risk Screening Forms of inmates who reported prior victimization Follow up mental health referral within 14 days</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent) Medical and Mental Health Staff Inmate Who Reported Victimization During Risk Screening</p> <p>115.81 (c) WTRJ policy 5.15, page 17 states that 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. The WTRJ reported there have been 5 instances in the last year where inmates have reported prior victimization. The auditor reviewed the files of all 9 inmates and confirmed that all 9 inmates were offered a follow-up meeting with medical or mental health within 14 days. Those inmates that requested follow-up care were seen well before the 14 day requirement. Interviews with medical and mental health staff confirm that they are notified immediately and offer a follow-up meeting with the inmate within 14 days, but typically sooner. The PREA Coordinator stated he is copied on all notifications and verifies that mental health consult. The auditor interviewed an inmate that had reported previous victimization during the risk screening. The inmate verified she had been offered a follow-up meeting with mental health staff and it occurred within 14 days.</p> <p>115.81 (d) WTRJ policy 5.15, page 17 states that 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. Interviews with both medical and mental health staff, as well as the PREA Coordinator confirm 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, or to administrative personnel on a case by case basis.</p> <p>115.81 (e) WTRJ policy 5.15, page 17 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</p>

the inmate is under the age of 18. Interviews with medical and mental health staff confirm that they would gain informed consent before reporting information about prior sexual victimization that did not occur in an institutional setting. Inmate interviews indicate that mental health staff explained informed consent and the limits of confidentiality.

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

Corrective Action: None

115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Page 17-18</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent) Medical and Mental Health Staff Random Security Staff</p> <p>115.82 (a) WTRJ policy page 17 states that all inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Interviews with medical and mental health 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. Crisis intervention services are provided by the YMCA, which was confirmed by the PREA Coordinator. Mental Health staff are also available to provide support counseling and treatment. There have been no incidents of sexual assault at the WTRJ in the last 12 months. The auditor was able to verify the availability of services as well as the MOU in effect for services.</p> <p>115.82 (b) Qualified medical and mental health staff are available 24/7 at WTRJ to respond to incidents of sexual abuse. Interviews with medical and mental health staff confirm there are always medical staff on duty and available to respond to incidents of sexual abuse. They indicate they would be immediately notified by security staff. Interviews with security staff indicate that they would take preliminary steps to protect the victim and immediately notify medical staff as well as protect the crime scene and preserve evidence.</p> <p>115.82 (c) WTRJ policy page 17 states that 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 and mental health staff confirm that victims of sexual abuse would be offered these services and they would be no charge for these services. There have been no incidents of sexual assault at the WTRJ in the last 12 months requiring these services.</p> <p>115.82 (d) WTRJ policy page 18 states that forensic examinations will be performed by Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners</p>

(SANE) at a local hospital without a financial cost to the victim. Interviews with medical and mental health staff, as well as the PREA Coordinator and Superintendent confirm that victims of sexual abuse would not be charged for services received as a result of a sexual abuse incident. There have been no incidents of sexual abuse that required these services in the last 12 months.

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

Corrective Action: None

<p>115.83</p>	<p>Ongoing medical and mental health care for sexual abuse victims and abusers</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Page 24-26</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent) Medical and Mental Health Staff</p> <p>115.83 (a) (b) (c) WTRJ policy 5.15 page 18 states that the Jail will offer medical and mental health evaluation and treatment to all inmates who have been victimized by sexual abuse. The evaluation and treatment of such victims will include follow up services, treatment plans, and referrals for continued care following their transfer or release. Interviews with medical and mental health staff, as well as the PREA Coordinator confirm that these services would be available to inmates who have been victims of sexual abuse, and these services would be consistent and actually exceed with the community level of care. There have been no incidents of sexual assault at the WTRJ in the last 12 months requiring these services.</p> <p>115.83 (d) (e) (f) WTRJ policy page 19 states 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 and mental health 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. The policy and targeted staff confirm that these services would be provided at no cost to the inmate. There have been no incidents of sexual assault at the WTRJ in the last 12 months requiring these services.</p> <p>115.83 (g) WTRJ policy page 19 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 and mental health staff, as well as the PREA Coordinator 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</p>
----------------------	---

requiring these services.

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

Corrective Action: None

115.86	Sexual abuse incident reviews
	<p data-bbox="256 188 983 221">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 340 1082 374">Evidence Relied upon to make Compliance Determination:</p> <p data-bbox="256 483 671 562">WTRJ Completed PAQ WTRJ Policy 5.15, Page 24-25</p> <p data-bbox="256 640 671 674">Interviews with the following:</p> <p data-bbox="256 712 509 745">PREA Coordinator</p> <p data-bbox="256 784 703 817">Incident Review Team Members</p> <p data-bbox="256 855 480 889">Superintendent</p> <p data-bbox="256 967 1481 1292">115.86 (a) (b) (c) WTRJ policy 5.15 page 24 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. The WTRJ has not had any incidents within the last 12 months which required an incident review. Auditor interviewed two members of the incident review team, who confirmed there have been no incidents which required an incident review.</p> <p data-bbox="256 1330 1481 1912">115.86 (d) (e) WTRJ policy 5.15 pages 24-25 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. Interviews with two members of the incident review team confirm 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 to the Superintendent for review and approval. The PREA Coordinator also stated any recommendations would be implemented, or the reasons for not doing so would be documented.</p> <p data-bbox="256 1951 1401 2029">After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p data-bbox="256 2067 592 2101">Corrective Action: None</p>

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ with ADP since last PREA Audit WTRJ Policy 5.15, Page 25 WTRJ Website containing sexual abuse data</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent)</p> <p>115.87 (a) (b) (c) (d) (e) (f) The WTRJ policy 5.15, page 25 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. The auditor reviewed the WTRJ website and found that annual reports from 2014 containing aggregated sexual abuse data are available on their public website, the most recent from calendar year 2021. In addition, the website contains the Survey of Sexual Violence for years 2014-2020 (the last year the agency received a SSV from the DOJ). Interviews with the PREA Coordinator and the Agency Administrator confirm the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Interviews with the PREA Coordinator and Agency Head confirm data from the previous calendar year is supplied to the Department of Justice no later than June 30th, if requested (which it has not been since 2020). The auditor was able to review the locked archives of the aggregated data that is maintained.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

115.88	<p data-bbox="240 91 1503 1686">Data review for corrective action</p> <p data-bbox="240 168 1503 241">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 250 1503 324">Auditor Discussion</p> <p data-bbox="240 333 1503 369">Evidence Relied upon to make Compliance Determination:</p> <p data-bbox="240 481 1503 600">WTRJ Completed PAQ with ADP since last PREA Audit WTRJ Policy 5.15, Page 25 WTRJ Website containing sexual abuse data</p> <p data-bbox="240 678 1503 714">Interviews with the following:</p> <p data-bbox="240 750 1503 824">PREA Coordinator Agency Administrator (Superintendent)</p> <p data-bbox="240 902 1503 1485">115.88 (a) (b) (c) (d) The WTRJ completes an annual report based upon data collected pursuant to 115.87. WTRJ policy 5.15, page 25 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 Superintendent. The WTRJ annual report contains no material that has been redacted. The auditor reviewed the WTRJ website and found that annual reports containing aggregated sexual abuse data are available from 2014-2021. 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 reports contain a comparison between current year’s data and previous year’s data. The WTRJ did not identify any problem areas, therefore no corrective action was listed. 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 data-bbox="240 1520 1503 1594">After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p data-bbox="240 1630 1503 1666">Corrective Action: None</p>
---------------	--

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Policy 5.15, Page 25 WTRJ Website containing sexual abuse data</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent)</p> <p>115.89 (a) (b) (c) (d) The WTRJ policy 5.15, page 25 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 Superintendent. WTRJ 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 otherwise. The auditor reviewed the WTRJ website and found that annual reports containing aggregated sexual abuse data are available from 2014-2021. Interviews with the PREA Coordinator and the Agency Administrator confirm all sexual abuse data is securely maintained in a locked cabinet in the PREA Coordinator's office.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

115.401	Frequency and scope of audits
	<p data-bbox="280 188 1007 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 264 579 300">Auditor Discussion</p> <hr/> <p data-bbox="280 340 1102 376">Evidence Relied upon to make Compliance Determination:</p> <p data-bbox="280 483 1062 560">WTRJ Completed PAQ Review of Previous WTRJ Final PREA Compliance Report</p> <p data-bbox="280 640 695 676">Interviews with the following:</p> <p data-bbox="280 712 836 828">PREA Coordinator Agency Administrator (Superintendent) Random and Targeted Inmates</p> <p data-bbox="280 909 687 945">Observation of the following:</p> <p data-bbox="280 981 1318 1016">Observation of, and access to all areas of the WTRJ during the site review</p> <p data-bbox="280 1097 1453 1214">115.401 (a) (b) According to the previous PREA Audit Certification report reviewed by the auditor, the last PREA audit of the WTRJ was conducted on August 5th-7th, 2019.</p> <p data-bbox="280 1249 1477 1366">115.401 (h) The auditor were given unrestricted access to all areas of the WTRJ and were able to observe both inmates and staff in various settings. The auditor were made to feel welcome and able to go to any area when requested.</p> <p data-bbox="280 1402 1469 1518">115.401 (i) The auditor were permitted to review, request and receive copies of all relevant and requested documents, including electronically stored information. All requested documentation was provided in a timely manner.</p> <p data-bbox="280 1554 1469 1886">115.401 (m) (n) The auditor were permitted to conduct private interviews with inmates at the WTRJ, both informally and formally. Auditor were 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 auditor.</p> <p data-bbox="280 1921 1426 1998">After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p data-bbox="280 2033 616 2069">Corrective Action: None</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>WTRJ Completed PAQ WTRJ Website containing previous Final Report</p> <p>Interviews with the following:</p> <p>PREA Coordinator Agency Administrator (Superintendent)</p> <p>115.403 (f) The WTRJ website has a link on its PREA page labeled PREA Certification that contains the report from the previous PREA Certification audit which was completed in August, 2019. The auditor reviewed this information on the website.</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 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.)	na

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 consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need	yes

	for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	
	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.)	yes
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 facility does not have female inmates.)	yes
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 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
	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.)	na
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.)	na
	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.)	na
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 Garrity warnings? (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 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 suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
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.)	na

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 screening instrument?	yes

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) Whether the inmate is detained solely for civil immigration purposes?	yes

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 information is not exploited to the inmate's detriment by staff or other inmates?	yes

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 present management or security problems?	yes

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 solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes

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 anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
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 this standard.)	yes
	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, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	yes
	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 abuse or sexual harassment or retaliation?	yes
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 response to an incident of sexual abuse?	yes

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 sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	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 of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	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 abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
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 evidence sufficient to substantiate the allegation?	yes
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).	na
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.)	na
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 sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes

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 to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
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.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
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 (f)	Audit contents and findings	
	<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