

# PREA Facility Audit Report: Final

**Name of Facility:** Nottoway Work Center

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 06/22/2026

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Ron L Kidwell	<b>Date of Signature:</b> 06/22/2026

AUDITOR INFORMATION	
<b>Auditor name:</b>	Kidwell, Ron
<b>Email:</b>	ronnie.kidwell@yahoo.com
<b>Start Date of On-Site Audit:</b>	05/07/2026
<b>End Date of On-Site Audit:</b>	05/08/2026

FACILITY INFORMATION	
<b>Facility name:</b>	Nottoway Work Center
<b>Facility physical address:</b>	2892 Schutt Road, Burkeville, Virginia - 23922
<b>Facility mailing address:</b>	

Primary Contact
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<b>Name:</b>	Joseph Allotey
<b>Email Address:</b>	joseph.allotey@vadoc.virginia.gov
<b>Telephone Number:</b>	(804) 219-6845

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Kenneth A. Goldman
<b>Email Address:</b>	kenneth.goldman@vadoc.virginia.gov
<b>Telephone Number:</b>	(434) 767-2908

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	Melvin Gilmore
<b>Email Address:</b>	melvin.gilmore@vadoc.virginia.gov
<b>Telephone Number:</b>	(434) 767-2905

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Renée Bridges
<b>Email Address:</b>	Renee.Bridges@vadoc.virginia.gov
<b>Telephone Number:</b>	(434) 767-3005

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	200
<b>Current population of facility:</b>	134
<b>Average daily population for the past 12 months:</b>	137
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>What is the facility's population designation?</b>	Men/boys

<b>Age range of population:</b>	22-68
<b>Facility security levels/inmate custody levels:</b>	Level 1 & W
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	46
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	65
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	39

#### AGENCY INFORMATION

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

#### Agency Chief Executive Officer Information:

<b>Name:</b>	Joseph Walters
<b>Email Address:</b>	Joseph.Walters@vadoc.virginia.gov
<b>Telephone Number:</b>	804-887-8080

#### Agency-Wide PREA Coordinator Information

<b>Name:</b>	Tammy Barbetto	<b>Email Address:</b>	tammy.barbetto@vadoc.virginia.gov
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# Facility AUDIT FINDINGS

## Summary of Audit Findings

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

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

### Number of standards exceeded:

1

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

### Number of standards met:

44

### Number of standards not met:

0

## POST-AUDIT REPORTING INFORMATION

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

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2026-05-07
2. End date of the onsite portion of the audit:	2026-05-08

#### 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:	The Auditor contacted Just Detention International and the Virginia Action Alliance Group.

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	200
15. Average daily population for the past 12 months:	137
16. Number of inmate/resident/detainee housing units:	2
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" 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**

<b>23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	107
<b>25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>	0

<p><b>31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b></p>	<p>The Auditor began conducting random inmate interviews on the first and second day of the on-site audit. The Auditor was provided a private area to conduct the confidential interviews. All inmates were made available in a timely manner and no inmate refused to be interviewed by the Auditor. All interviews were conducted using the established DOJ interview protocols.</p>
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b></p>	<p>46</p>
<p><b>37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>39</p>

<b>38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	65
<b>39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b>	<p>The Auditor began conducting random and specialized staff interviews immediately following the completion of the on-site facility tours of both the NCC and NWC. The Auditor was provided a private area to conduct the confidential interviews. All staff were made available in a timely manner and no staff refused to be interviewed by the Auditor. All interviews were conducted using the established DOJ interview protocols.</p>
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	20
<b>41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None

<p><b>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b></p>	<p>Inmates were selected from both housing units, using the inmate cell assignment report. The Auditor went down the list of each housing unit and selected the inmate's name from all housing units. The Auditor also ensured that a representative sample of inmates based on race, age, and ethnicity were selected.</p>
<p><b>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p><b>44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>There were no barriers to interviewing the random inmates.</p>
<p><b>Targeted Inmate/Resident/Detainee Interviews</b></p>	
<p><b>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>0</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<p><b>47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>

<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported that they were not currently housing any inmates who were physically disabled. The Auditor asked the PCM and ADA Coordinator if he was aware of any inmates currently housed in the facility that were physically disabled. He indicated that he was not aware of any inmate that fell into this identity category. The NWC Assistant Warden also confirmed that the NWC was not currently housing any inmate that was physically disabled. Several random inmates were also asked if they were aware of any inmates in their housing units that appeared to be disabled, which they replied no.</p>
<p><b>48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported that they were not currently housing any inmates who were diagnosed as cognitively disabled. The Auditor asked the PCM and ADA Coordinator if he was aware of any inmates currently housed in the facility that were cognitively disabled. He indicated that he was not aware of any inmate that fell into this identity category. The mental health professional interviewed and Assistant Warden also confirmed that the NWC was not currently housing any inmate that was diagnosed as cognitively disabled. Several random inmates were also asked if they were aware of any inmates in their housing units that appeared to be cognitively disabled, which they replied no.</p>
<p><b>49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported that they were not currently housing any inmates who were blind or have low vision. The Auditor asked the PCM and ADA Coordinator if he was aware of any inmates currently housed in the facility that were physically disabled. He indicated that he was not aware of any inmate that fell into this identity category. The NWC Assistant Warden also confirmed that the NWC was not currently housing any inmate that was physically disabled. Several random inmates were also asked if they were aware of any inmates in their housing units that appeared to be disabled, which they replied no.</p>

<p><b>50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported that they were not currently housing any inmates who were deaf or hard of hearing. The Auditor asked the PCM and ADA Coordinator if he was aware of any inmates currently housed in the facility that were physically disabled. He indicated that he was not aware of any inmate that fell into this identity category. The NWC Assistant Warden also confirmed that the NWC was not currently housing any inmate that was physically disabled. Several random inmates were also asked if they were aware of any inmates in their housing units that appeared to be disabled, which they replied no.</p>
<p><b>51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported that they were not currently housing any inmates that were limited English proficient. The Auditor met with the PCM and reviewed the list of inmates housed in the facility that requested or required accommodations, given a particular language. The Auditor found no evidence of any resident listed that required assistance regarding translation services.</p>
<p><b>52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported that no inmates identified as lesbian, gay, or bisexual during their classification assessment during the intake process at the NWC.</p>
<p><b>53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>0</p>

<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility reported that no inmates identified as transgender or intersex during their classification assessment during the intake process at the NWC. The Auditor met with the PCM and reviewed the list of residents housed in the facility that requested or required accommodations, given any gender identity. The Auditor found no evidence that would suggest any transgender inmate was being housed at the facility at the time of the on-site visit.</p>
<p><b>54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The facility has reported via memorandum of record and in the PAQ that the NWC did not receive any allegations of sexual abuse or sexual harassment during this rating period.</p>

<p><b>55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>At the time of the on-site visit, the facility reported that no inmates housed at the NWC had disclosed prior sexual abuse, either in the community or in a confinement setting, during their intake classification assessment.</p>
<p><b>56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The Facility reported no current instances of placing any inmate in segregated housing for risk of sexual victimization. This was confirmed through interviews with the staff who supervise inmates in segregated housing, and the Warden.</p>
<p><b>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>The Auditor interviewed 20 randomly selected inmates at the NWC. The facility reported, and provided supporting evidence, that no targeted inmates, as defined by the PREA interview protocols, were present during the on-site portion of the audit. Accordingly, the Auditor did not conduct targeted inmate interviews.</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p><b>58. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>17</p>
<p><b>59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p> <input checked="" type="checkbox"/> Length of tenure in the facility  <input checked="" type="checkbox"/> Shift assignment  <input checked="" type="checkbox"/> Work assignment  <input type="checkbox"/> Rank (or equivalent)  <input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)  <input type="checkbox"/> None </p>
<p><b>If "Other," describe:</b></p>	<p>The Auditor ensured that female officers were interviewed to provide their point of view working at this facility.</p>
<p><b>60. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p> <input checked="" type="radio"/> Yes  <input type="radio"/> No </p>

<p><b>61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>The staff were randomly selected by the PREA Auditor. The Auditor chose staff from all shifts, working different assignments, and with different levels of experience. The Auditor also made sure interviews were conducted with a proportionate number of female staff corresponding to the NWC's employee demographics.</p>
<p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p><b>62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b></p>	<p>18</p>
<p><b>63. Were you able to interview the Agency Head?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p><b>64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p><b>65. Were you able to interview the PREA Coordinator?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p><b>66. Were you able to interview the PREA Compliance Manager?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No <input 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>

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

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

	<input type="checkbox"/> Other
<b>68. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>	1
<b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>69. Did you interview CONTRACTORS who may have contact with inmates/ residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	2
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
<b>70. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	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.

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

Yes

No

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

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

Yes

No

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

Yes

No

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

Yes

No

**75. Informal conversations with staff during the site review (encouraged, not required)?**

Yes

No

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

On 05/04/2026, at approximately 0830 hours, the PREA audit began with a kickoff meeting. Attendees included the Warden; Assistant Wardens for NWC and NCC; Regional PREA Analyst; PREA Compliance Manager; Unit Managers; HSA; Facility Investigator; Intel Supervisor; Chief of Housing and Programming; Operations Manager; Chief of Security; and four additional facility managers and supervisory staff. The NWC inmate population on that date was 107. The meeting was held to establish positive working relationships, associate names with faces, and prepare for the five-day audit. Shortly afterward, the Auditor began the facility observation tour. Accompanied by the Warden, Regional PREA Analyst, Major, CHAP, PREA Compliance Manager, Assistant NWC Warden, and NWC Captain, the Auditor toured the entire facility, including the Nottoway Work Center, over approximately five hours. Areas reviewed included the front entrance, food service/kitchen, program classrooms, boiler shop, VCE wood shop, water treatment facility, greenhouse, and two housing units. The facility consists of one building with A and B sides, with each unit designed as a 100-bed open dormitory. During the tour, the Auditor evaluated camera placement for potential blind spots, inmate-to-officer supervision ratios, privacy concerns, toilet and shower configurations, and overall inmate privacy. The Auditor also reviewed whether opposite-gender staff announced their presence when entering housing units, PREA posters and audit notices were displayed in housing units and public areas, and advocacy hotline and outside reporting entity contact information was readily available. The Auditor noted the number of phones in each unit and conducted a test call to the outside entity to verify the facility's sexual abuse reporting and advocacy practices. The Auditor also spoke with multiple inmates to assess their knowledge of how to report an allegation of sexual abuse. During the Exit Briefing, the Auditor shared several recommendations with staff.

Participants included the Warden; Assistant Wardens for NWC and NCC; Regional PREA Analyst; PREA Compliance Manager; Unit Managers; Intel Supervisor; Chief of Housing and Programming; Operations Manager; Records Manager; NWC Captain; and other facility managers and supervisory staff.

## Documentation Sampling

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

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

Yes

No

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

At the conclusion of the fifth audit day, the Auditor reviewed 47 files: 30 inmate files and 17 staff personnel files. The inmate files belonged to individuals previously interviewed during the audit, while staff personnel files were selected from employees hired since the last PREA audit. In the staff files, the Auditor reviewed documentation of the initial criminal history check, institutional references, five-year background check, PREA training, and PREA refresher training. In the inmate files, the Auditor verified whether the PREA Intake Screening was completed within 72 hours, reassessments were documented, PREA information was provided at intake, and comprehensive PREA education was completed within 30 days of intake.

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

## Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0
<b>Total</b>	0	0	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.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	0	0

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

**Sexual Abuse Investigation Files Selected for Review**

<b>85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:</b>	0
<b>a. Explain why you were unable to review any sexual abuse investigation files:</b>	where were no investigations

<p><b>86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p><b>Inmate-on-inmate sexual abuse investigation files</b></p>	
<p><b>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>Staff-on-inmate sexual abuse investigation files</b></p>	
<p><b>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p><b>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p><b>Sexual Harassment Investigation Files Selected for Review</b></p>	
<p><b>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>a. Explain why you were unable to review any sexual harassment investigation files:</b></p>	<p>There were no investigations</p>
<p><b>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p><b>Inmate-on-inmate sexual harassment investigation files</b></p>	
<p><b>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<p><b>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>Staff-on-inmate sexual harassment investigation files</b></p>	
<p><b>98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p><b>100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p><b>101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b></p>	<p>The facility reported receiving no allegations of sexual abuse or sexual harassment during this rating period. Thus, no investigative files to review.</p>

## SUPPORT STAFF INFORMATION

### DOJ-certified PREA Auditors Support Staff

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

- Yes  
 No

### Non-certified Support Staff

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

- Yes  
 No

## AUDITING ARRANGEMENTS AND COMPENSATION

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

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

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

Corrections Consulting Services LLC

<b>Standards</b>	
<b>Auditor Overall Determination Definitions</b>	
<ul style="list-style-type: none"> <li>• Exceeds Standard (Substantially exceeds requirement of standard)</li>   <li>• Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li>   <li>• Does Not Meet Standard (requires corrective actions)</li> </ul>	
<b>Auditor Discussion Instructions</b>	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) Nottoway Correctional Center (NWC) Pre-Audit Questionnaire</li> <li>b) VADOC Operating Procedure 038.3 Prison Rape Elimination Act</li> <li>c) VADOC Operating Procedure 135.2 Rules of Conduct</li> <li>d) VADOC Statewide Organizational Chart</li> <li>e) VADOC Employee Work Profile for the PREA Coordinator, three PREA Regional Analysts, and the NCC/NWC PREA Compliance Manager</li> <li>f) NWC Organizational Chart</li> </ul>

g) List of VADOC PREA Compliance Managers

Interview:

- 1) Interview with PREA Coordinator
- 2) Interview with PREA Compliance Manager

Observations made during the On-Site Audit and Document Review

115.11 Provision (a)

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

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

115.11 Provision (b)

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

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

PREA-related standards. She further stated that there are three Regional PREA Analysts and 41 facility PREA Compliance Managers. Interaction between the PREA Unit and facility PCMs include phone calls, emails, and site visits. Quarterly site visits are conducted by each Regional PREA Analyst with their assigned facilities. The coordinator also conducts facility site visits and attends PREA Audits statewide. In addition, monthly newsletters with PREA refreshers are sent to all VADOC employees. Finally, a statewide VADOC PREA Conference for facility PREA Compliance Managers and PREA Investigators is held annually.

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

#### 115.11 Provision (c)

VADOC is a state correctional system that operates 36 secure confinement facilities and five community facilities. The agency provided employee work profiles outlining the responsibilities of the PREA Compliance Managers, PREA Regional Analysts, and the PREA Coordinator. The work profile for PREA Compliance Managers states, in part: "The role of the PREA Compliance Managers is to work at the facility level to coordinate the mission, policies, and implementation of all PREA standards between the facilities through the PREA Regional Analyst." The PREA Regional Analyst also provided a list of Virginia's three regions, including the names and contact information of the assigned analysts, who report to the PREA Coordinator. PREA Compliance Managers are responsible for maintaining documentation of PREA compliance efforts, serving as the facility's primary contact for the PREA Analyst, ensuring compliance with PREA-related departmental policies and procedures, and providing feedback to the Unit Head and Regional Analyst on any policies, procedures, or practices that do not comply with PREA standards.

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

An interview was conducted with a PREA Compliance Manager, and he was asked if he felt he had enough time to manage all the PREA related responsibilities. The PREA Compliance Manager stated that, "Yes, he did have sufficient time to perform the duties required." Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

	<p>The Auditor has concluded that the VADOC exceeds this standard due to the additional oversight by the Regional PREA Analysts. The PREA Regional Analysts oversee the facilities in each region in addition to the PREA Coordinator. They maintain a direct relationship with the facilities and the PREA Compliance Managers. By virtue of the Regional PREA Analyst position, they have the ability to develop, implement, and oversee the Department’s efforts to comply with PREA standards, even though this level of structure is not required by the standard.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency to have a written policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment and to employ an agency PREA Coordinator.</p>
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<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 260.1 Procurement of Goods &amp; Services</li> <li>c) VADOC Director Memorandum of Record dated 01/16/2025</li> </ul> <p>Interviews:</p> <p>Observations made during the On-Site Audit and Document Review</p> <p>115.12 Provision (a)</p> <p>The Virginia Department of Corrections previously contracted with GEO Corrections and Detention, LLC located in Boca Raton, Florida. VADOC had entered into a contract for private management of a single correctional facility located in the Eastern Region of Virginia. The facility is named the Lawrenceville Correctional Center. However, on August 1, 2024, the VADOC took back operational control of that facility utilizing VADOC employee staff.</p> <p>The facility provided a memorandum of record written by the Director of the VADOC dated January 16, 2025, stating that the Lawrenceville Correctional Center is no longer being operated by a private outside entity and is now under the direct control of the Virginia Department of Corrections and therefore this standard is no longer</p>

	<p>applicable to this agency.</p> <p>Given this information and that effective August 1, 2024, the VADOC assumed operational control over the Lawrenceville Correctional Center. This standard is not applicable to the VADOC because they no longer contract outside private entities for the confinement of their inmates.</p> <p>The evidence collected for this provision shows that the agency has not entered into any contract for the confinement of their inmates with a private agency or entity. This provision of the standard is not applicable to this agency. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>115.12 Provision (b)</p> <p>The VADOC PREA Operating Procedure 038.3 page 4, paragraph 2, states in part that; “Any new contract or contract renewal will provide for DOC contract monitoring to ensure that the contractor is complying with the PREA standards.”</p> <p>The evidence collected for this provision shows that the agency has a written policy that requires that if a contract is entered into, it will be monitored for compliance with PREA standards. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard. As stated above, effective August 1, 2024, the VADOC took operational control of the Lawrenceville Correctional Center and is no longer operated by a private outside entity. Therefore, this standard is no longer applicable to VADOC.</p>
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<b>115.13</b>	<b>Supervision and monitoring</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Policy 401.2 Security Staffing</li> <li>b) VADOC Operating Policy 401.1 Development and Maintenance of Post Orders</li> <li>c) VADOC Operating Policy 401.3 Administrative Duty Officers</li> </ul>

- d) 2026 NCC/NWC Staffing Plan dated 02/03/2026
- e) 2026 NCC/NWC Staffing Plan Review & Acknowledgement form
- f) NWC Day & Night Duty Rosters
- g) NWC Camera List
- h) A&B Housing Units, Boiler Plant, Warehouse, Greenhouse, and VCE Shop Unannounced PREA Logs

Interviews:

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

Observations made during the On-Site Audit and Document Review

115.13 Provision (a)

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

- a.) Generally accepted detention and correctional practices
- b.) Any judicial findings of inadequacy
- c.) Any findings of inadequacy from Federal investigative agencies
- d.) Any findings of inadequacy from internal or external oversight bodies
- e.) All components of the facility’s physical plant (including “blind spots” or areas where staff or inmates may be isolated)
- f.) The composition of the inmate population
- g.) The number and placement of supervisory staff
- h.) Institution programs occurring on a particular shift
- i.) Any applicable State or local laws, regulations, or standards
- j.) The prevalence of substantiated and unsubstantiated incidents of sexual abuse

k.) Any other relevant factors.”

Since the last PREA audit, the average daily population of inmates at the NWC was 137 and the current staffing plan was predicated on 200 inmates housed at the work center.

During the interview with the Warden, he was asked if the work center had a staffing plan and if the staffing levels to protect inmates from sexual abuse were considered in the plan. Also, if video monitoring is part of this plan and if the staffing plan is documented? The Warden confirmed, “Yes” to all the above questions and indicated that he ensures there is an appropriate number of staff on post. Cameras are part of the plan and supervisors make unannounced rounds. The Warden also confirmed that when reviewing the staffing plan on an annual basis they consider all the above matters. The Auditor also interviewed the PREA Coordinator and asked if the above considerations are weighed when developing the staffing plan. The Coordinator explained that they were considered. The staffing plan is developed for 40 full-time security staff and 82 cameras. However, the facility currently has 114 full-time security positions vacant in the NCC and NWC Staffing Study. Finally, the facility provided a copy of the staffing plan review and acknowledgement form that indicates that both the PREA Central Regional Analyst and the PREA Coordinator reviewed and signed off on the NCC/NWC staffing plan.

During the on-site facility tour, the Auditor looked for potential blind spots, camera placement, and understaffing or overcrowding situations. The Auditor recommended that the medical staff be issued agency radios for emergency communication if necessary. This recommendation was immediately accomplished prior to the end of the on-site visit.

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

#### 115.13 Provision (b)

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

During the interview with the Warden, he was asked if the facility documents all instances of non-compliance with the staffing plan. The Warden stated that, “Yes, during staffing shortages the VADOC has a Roving Officer Program that compensates officers usually from the western region to work at facilities that are short staffed.” The Auditor interviewed two of these officers during random interviews about their special work assignment. The Warden also indicated that if the staffing plan is not met then the incident is documented and the explanation for not meeting the plan must be documented in an incident report. The facility reported no instances of not complying with the staffing plan during the audit period.

The NWC listed the top six reasons for non-compliance in the staffing plan annual review, as follows:

- Authorized Call-ins
- Mandated training
- Sick leave absences
- Short-term disability
- Vacancies

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

#### 115.13 Provision (c)

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

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

a. The facility's established staffing plan

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

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

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

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

During the PREA Coordinator interview, the coordinator was asked if she is consulted regarding any assessments or adjustments to the staffing plan. The coordinator stated that by January 31st of each year and more frequently if needed, the facility unit head or designee of each facility will review any existing staffing plan for the facility. This review will assess, determine, and document whether adjustments are needed to the facility's established staffing plan, the facility's deployment of video

monitoring systems, and the resources the facility has available to ensure adherence to the staffing plan. The coordinator further explained that if the review indicated that the facility is not staffing to plan, the facility must provide a comprehensive written explanation as to why and provide possible solutions to increase facility staffing levels. These comprehensive written explanations are then reviewed by the Regional PREA Analyst and final approval is received from the PREA Coordinator prior to being submitted to the Deputy Director of Institutions.

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

#### 115.13 Provision (d)

VADOC Operating Policy 401.1 (Supervisor Rounds) state in part that; "Post Orders will require that lieutenants and above conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Supervisors are prohibited from notifying staff of unannounced rounds and supervisors of the opposite gender must announce their presence when entering an inmate housing unit to conduct their unannounced rounds; this announcement must be documented in the post logbook. Unannounced rounds must be conducted intermittently during the month and must be conducted on both night and day shifts." In addition, VADOC Operating Policy 401.3 states in part that; "Between the Facility Unit Head and the Assistant Facility Head, each institution's living and activity areas shall be visited weekly."

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

During the interview process, the Auditor interviewed an intermediate or higher-level supervisory staff about unannounced rounds. The supervisor was asked if she conducted unannounced rounds and if she documented those rounds. The supervisor stated that, "Yes, he performs unannounced rounds and that she logs the unannounced round in the PREA Logbook." When asked how the supervisor would prevent staff from alerting other staff members about unannounced rounds. The supervisor responded she never lets the officers know when the rounds are going to be conducted and enters the dorms from the back doors.

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

	<p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency to have supervision and monitoring.</p>
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<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 425.4 Management of Bed &amp; Cell Assignments</li> <li>b) VADOC Jail Management System CORIS Age &amp; Date of Birth report for NWC</li> <li>c) NWC Assistant Warden memorandum of record dated 03/31/2026 indicating no instances</li> </ul> <p>Observations made during the On-site Audit and Document Review</p> <p>115.14 Provision (a)</p> <p>VADOC Operating Procedure 425.4 states in part that; “Youthful Inmates under the age of 18, convicted as an adult; not under Youthful Inmate Law, the DOC provides specialized housing arrangements for youthful inmates that meet the requirements of this standard. A youthful inmate will not be placed in a housing unit in which the inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. Direct supervision by institutional staff is required at all times when a youthful inmate and an adult inmate have sight, sound, or physical contact with one another. All youthful inmates will be assigned to the specialized unit, unless this assignment creates a risk to the safe, secure, and orderly operation of the institution. Exigent circumstances may require removal to a restrictive housing unit.”</p> <p>The facility reported no instances of housing a youthful inmate during this rating period. In addition, the PREA Regional Analyst provided this Auditor with a copy of the inmate population report to provide proof that the NWC was not housing any youthful inmates over the last 12 months and that it is against policy to house a juvenile at the NWC.</p> <p>115.14 Provision (b) &amp;(c)</p> <p>VADOC Operating Procedure 425.4 states in part that; “A youthful inmate will not be</p>

	<p>placed in a housing unit in which the inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. Direct supervision by institutional staff is required at all times when a youthful inmate and an adult inmate have sight, sound, or physical contact with one another. All youthful inmates will be assigned to the specialized unit, unless this assignment creates a risk to the safe, secure, and orderly operation of the institution. Exigent circumstances may require removal to a restorative housing unit.”</p> <p>The NWC reported no instances of housing a youthful inmate during this rating period. The NWC Assistant Warden indicated that the Nottoway Correctional Center does not house inmates under the age of 18 and that all youthful inmates are housed at the Sussex I State Prison. Therefore, this standard is not applicable.</p> <p>During the on-site tour of the physical plant, the Auditor did not witness any youthful inmates housed in the general housing units. After conducting 28 interviews with staff and inmates, there was no evidence to suggest that the NWC houses youthful inmates. Also, no interviews were conducted for this standard because there have been no incidents involving youthful inmates. Therefore, this standard is not applicable, however, the agency does have policies and procedures in place to manage youthful inmates when these situations occur.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence the PREA Auditor has determined that the facility is fully compliant with this standard.</p>
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<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a.) VADOC Operating Procedure 445.4, Screening and Searches of Persons</li> <li>b.) VADOC Operating Procedure 401.1, Development Maintenance of Post Orders</li> <li>c.) VADOC Operating Procedure 401.2, Security Staff</li> <li>d.) VADOC Operating Procedure 801.1, Inmate Reception and Classification</li> </ul>

- e.) VADOC Operating Procedure 720.2, Medical Screening
- f.) NWC Assistant Warden memorandum of record dated 12/31/2025 indicating no instances of cross-gender strip searches or visual body cavity searches.
- g.) Housing Unit Post Logs indicating Female staff announcement
- h.) NCC/NWC In-Service PREA Training Class Rosters
- i.) NCC/NWC Basic Officer Training rosters
- j.) Signed Training Staff Acknowledgement forms
- k.) PREA Exams
- l.) PREA Training Certificates

Interviews:

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

Observations made during the On-Site Audit and Document Review

115.15 Provision (a)

The NWC is situated in a rural area in the county of Nottoway, VA. The facility is a field work center that supports the larger Nottoway Correctional facility with an inmate workforce. This work center is located on the premises of the larger Nottoway Correctional Center just outside the NCC's secure perimeter. The work center is a completely different and separate location. The NWC operates as a security level 1 adult male facility. It has an operating capacity of 200 general population beds with 40 authorized security staff. The two housing units consist of an open dorm style double-bunked unit.

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

inmates by DOC employees of the opposite gender from the inmate or the gender indicated on their approved Strip Search Deviation Request may only be conducted when there is an immediate threat to the safe, secure, orderly operation of the facility and there is no other available alternative. Prior to conducting the search, the Shift Commander must approve the search and will be responsible for notifying the ADO and Regional PREA Analyst.”

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

There are no examples of exigent circumstances in the last 12 months where a cross-gender strip or visual body cavity search occurred. It is against policy and there are no female inmates housed at this facility. When conducting the on-site review of the facility, the Auditor observed adequate male staff to accommodate any day-to-day operations involving gender specific searches. All strip searches are conducted in a specific trailer outside the perimeter that is private. When interviewing the non-medical staff responsible for conducting strip searches, an officer was asked under what circumstance would it require a cross-gender strip search. The officer replied that he could not think of any circumstance that would constitute the need to cross gender strip searches an inmate of the opposite gender unless in a life-threatening situation, excluding an existing Strip Search Deviation form.

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

#### 115.15 Provision (b)

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

1. Prior to the search, the Shift Commander must approve the search and will notify the ADO and the Regional PREA Analyst.

2. The Corrections Officers conducting the search must submit an Internal Incident Report; see Operating Procedure 038.1, Reporting Serious, or Unusual Incidents.

Access to regularly available programming or other out of cell opportunities for female inmates must not be restricted in order to comply with the search requirements.”

As stated previously, the NWC does not house female inmates. The facility reported no instances where a cross-gender pat down search was conducted. When conducting the on-site review of the facility, the Auditor observed adequate female staff to accommodate any day-to-day operations involving gender specific pat searches if necessary.

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

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

#### 115.15 Provision (c)

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

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

#### 115.15 Provision (d)

The VADOC Operating Procedure 401.2, states in part that; "Corrections Officers of the opposite gender should be allowed to supervise an inmate housing unit when appropriate physical modifications have been made to the toilet and shower areas to provide inmates with a reasonable degree of privacy. Inmates must be allowed to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia; except in exigent circumstances or when such viewing is incidental to routine housing unit checks. Staff of the opposite gender must announce their presence when entering an inmate-housing unit and must document these announcements in the logbook."

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

During the on-site phase, the Auditor interviewed both random staff and inmates. The 12 random staff were asked if they, or other officers, announce their presence when entering a housing unit of inmates of the opposite sex. All 12 officers stated that they do. When asked if inmates can dress, shower, and use the restroom without being viewed by officers of the opposite sex, 12 officers stated yes. The Auditor also interviewed 20 random inmates. When asked if female officers announce their presence when entering the housing block of the opposite sex, all 20 inmates stated yes. When asked if they or other inmates are ever naked in full view of female officers once again all 20 inmates indicated no.

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

#### 115.15 Provision (e)

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

	<p>This information may be determined during an interview, by reviewing medical records, or if necessary, by learning this information as part of a broader medical examination conducted in private.”</p> <p>This provision is no longer applicable for compliance with this standard.</p> <p>115.15 Provision (f)</p> <p>The NWC does not conduct cross-gender pat down searches unless exigent circumstances exist. The facility provided training records and training curricula as proof of receiving training on cross-gender pat searches and searches of transgender and intersex inmates in a professional manner. During the on-site review, the Auditor interviewed 12 random staff and in those interviews the officers were asked if they had received training on how to conduct a cross-gender pat search and when did they received the training. 12 officers stated that they had received training. From those interviews, the 12 officers stated that they received the training during annual in-service, the academy, and during orientation.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the work center is fully compliant with this standard requiring the agency to have limits on cross-gender viewing and searches.</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) Homeland Language Services Contract (expires 12/31/26)</li> <li>c) Propio Language Services Contract (expires 12/31/26)</li> <li>d) PREA Zero-Tolerance Posters in both English &amp; Spanish</li> <li>e) PREA Informational Posters in both English &amp; Spanish</li> <li>f) PREA Handbook in Braille</li> <li>g) PREA Inmate Acknowledgement in both English &amp; Spanish</li> </ul>

- h) Inmate PREA educational video in both English & Spanish
- i) Purple Language Contract for American Sign Language services (ALS) expire 10/16/26
- j) Homeland Language Services Invoices

Interviews:

- 1) Agency Head
- 2) Random Staff
- 3) Inmates with Disabilities or limited English proficient

115.16 Provision (a)

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

The agency has provided documentation on two separate contracts between VADOC and Language Lines to provide interpreting services. The first contract is between VADOC and Homeland Language Services LLC. This company provides sign language translation and video remote interpretation with qualified American Sign Language (ASL) interpreters and the 40 most common foreign languages from any desktop, tablet, or handheld device using Zoom or Teams webinar integration. The company also provides telephonic interpretation supporting 200 plus languages 24 hours a day, 7 days a week. The second contract is with Purple Communications, which also provides ASL services and translation services.

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

stated that, "Yes, his agency has policies in place to assist those inmates that have special needs such as sign language, blind or low vision, deaf or hard of hearing, or do not speak or read English." The Director indicated that his agency has multiple contracts with vendors to provide these services. Those contracts consisted of two language line contracts with Homeland Services and Propio. He also informed the Auditor that the agency has a contract with Purple for those inmates that need American Sign Language or are hard of hearing.

The Auditor did not interview any inmates that were disabled. The facility reported that there were no inmates assigned to the work center that were disabled.

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

#### 115.16 Provision (b)

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

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

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

The Auditor did not interview any inmates that were limited English proficient. The facility reported that there no inmates that were limited English proficient assigned to the work center.

The evidence collected for this provision shows that the agency has a written policy that addresses that the agency takes appropriate steps to ensure that inmates who

are “limited English proficient” have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse or sexual harassment. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.16 Provision (c)

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

During the audit interview process, the Auditor asked a total of seventeen random staff if the facility ever allows the use of inmate interpreters. From that question, nine officers stated that they would not use inmate interpreters, and the other eight officers stated that they would use an inmate interpreter to assist in a sexual abuse allegation. When asked further about when and how, the eight staff members indicated that they would use inmate interpreters when they could not communicate with the inmate due to the language barrier. Also, to the best of their knowledge, they had never witnessed an inmate interpreter being utilized to assist in a sexual abuse allegation. The nine officers that indicated they would not utilize the services of an inmate interpreter, did recognize that under exigent circumstances the inmate could be used as an interpreter. However, the eight officers that implied they would use an inmate interpreter in a sexual abuse allegation did not specify any limitations, only when they could not communicate with the inmate.

On May 18, 2026, the Auditor received an email from the PREA Regional Analyst containing proof of compliance, by way of the NCC/NWC Warden directive dated 05/15/2026 advising the Auditor that refresher training regarding the use of interpreter services was conducted at the Nottoway Correctional Center and Nottoway Work Center. The facility also covered the procedures to maintain confidentiality and not to disclose any information regarding sexual abuse. All affected staff were made aware of this Warden directive. In addition, the Deputy Director for Administration authored a memorandum dated 05/13/2026 to all Unit Heads as a reminder that states, “This (end of quote?) memorandum serves as a reminder and reference regarding the Department’s procedures for accommodating limited English proficient (LEP) residents and probationers/parolees. The information below outlines available language services resources, staff responsibilities, and required protocols to ensure meaningful access to DOC facilities, programs, services, and activities in compliance with Department policy. VADOC depends on third-party vendors to provide qualified or certified interpretation and translation services. Vendor services include on-demand and scheduled telephone and virtual interpretation, on-site interpretation and translation services. Use of an inmate or unapproved staff member for interpretation or translation services is prohibited by Operating Procedure 801.7: Language Services for Limited English Proficiency. Use of the internet and machine translations such as

	<p>Babelfish, Google Translate, etc. is also prohibited.”</p> <p>The agency and facility have done their due diligence to correct this issue. Therefore, the Auditor finds the facility is compliance with this provision of this standard.</p> <p>The evidence collected for this provision shows that the agency has a written policy that says that the facility should not rely on inmate interpreters. Therefore, through written policy, observations, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard referencing requirements for inmates with disabilities and inmates who are limited English proficient having equal opportunity or benefiting from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</p>
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<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 102.3 (Background Investigations)</li> <li>b) VADOC Operating Procedure 102.2 (Recruitment, Selection, and Appointment)</li> <li>c) VADOC Operating Procedure 260.1 (Procurement of Goods)</li> <li>d) VADOC Operating Procedure 102.7 (Employee Records)</li> <li>e) Examples of Background Investigations</li> <li>f) Examples of PREA related questions asked during promotions</li> <li>g) NCC/NWC New Hire Job Applications</li> <li>h) NCC/NWC Promotion Job Application</li> <li>i) NCC/NWC Contractor and Volunteer VCIN Background Checks</li> <li>j) Five-year Security VCIN Log</li> </ul>

k) NCC/NWC Staff Employee Files

Interviews:

1) Interview with Human Resources Staff

Observations made during the On-Site Audit and Document Review

115.17 Provision (a)

VADOC Operating Procedure 102.3 states in part that; "The DOC will not hire or promote anyone who may have contact with inmates, and will not enlist the services of any contractor who may have contact with inmates, who:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, as defined in 42 U.S.C.
2. Has been civilly or administratively adjudicated to have engaged or has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse."

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

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

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

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

During the file review part of this audit, 13 personnel files were sampled. This sample included civilian staff and security staff. The review resulted in all 13 files indicating

either an initial criminal history being ran, a five-year criminal history check, or both checks present. In addition, the Auditor observed Personal History Questionnaires with evidence that the sexual abuse questions appear in the pre-hire interview questions. Also included in the documentation reviewed in the files were the Pre-Questionnaire Promotional Applications where the questions were reiterated and answered regarding sexual abuse. Finally, there is an attachment to the employee's annual evaluation where the sexual abuse questions must be answered and attached to their evaluation.

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

#### 115.17 Provision (b)

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

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

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

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

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

#### 115.17 Provision (c)

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

1. Perform a criminal background records check, i.e., Virginia Criminal Information Network (VCIN).
2. Consistent with Federal, State, and local law, make its best efforts to contact all

prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.”

During the audit interview process, the H.R. staff member was asked if the facility performs criminal record background checks for all newly hired sworn employees, employees considered for promotion, and any contractor that may have contact with inmates. The H.R. staff member stated that; “The facility conducts a criminal record check on all volunteers, contractors, promotions, and transfers. She also indicated that the VADOC Central Office Background Investigators conduct all criminal history inquiries on all new hire employees. She further stated that it is each facility’s responsibility to ensure the five-year checks are completed. The Auditor reviewed 13 personnel files. The Auditor determined that the 13 names of staff members that were selected had evidence in the personnel file of an initial VCIN Background Check and several that had a recurring five-year check. The facility also provided a copy of the VCIN transaction record check that identifies the individual being run, the date, and the reason for the record check, including pre-employment background checks, promotion, lateral transfers, and 5-year checks.

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

#### 115.17 Provision (d)

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

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

The facility provided the Auditor with evidence that VCIN checks were conducted on 190 contractors and volunteers during the last calendar year. The report listed each contractor and volunteer by name, the date of the background check, the requester, and department.

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

the facility has demonstrated that it meets this provision.

#### 115.17 Provision (e)

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

During the audit interview process, the H.R. staff member was asked if the facility performs criminal record background checks for all sworn employees, and any contractor that may have contact with inmates. The H.R. staff member stated that; “The agency performs a criminal record check on all new hires, volunteers, contractors, promotions, transfers, and all current employees every five years through the VCIN system.” The Auditor reviewed 13 personnel files and determined that all the staff files contained a record of a criminal background check and those employed for more than five years also had evidence of the five-year background check. The facility also provided the Auditor with evidence of investigative background checks conducted through the VCIN system on all contractors and volunteers.

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

#### 115.17 Provision (f)

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

During the interview with the H.R. staff member, it was asked if the facility asks all applicants and employees about previous misconduct regarding inmates and does the facility impose upon employees a continuing affirmative duty to disclose previous misconduct. The H.R. staff member stated that the agency has a list of questions that must be answered during the hiring process application, during the promotional process, and during the employee’s annual review. She also stated that, “Yes, all employees must report any misconduct or interaction with law enforcement.” The agency provided copies of staff personal history applications, promotional

applications, and annual evaluations with the questions and answers given.

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

#### 115.17 Provision (g)

VADOC Operating Procedure 102.3 states in part that; "The DOC will not hire or promote anyone who may have contact with inmates and will not enlist the services of any contractor who may have contact with inmates, who has made material omissions regarding such misconduct, or has provided materially false information, material omissions or providing false information will be grounds for termination." In addition, VADOC Operating Procedure 135.1 states in part that; "Material omissions regarding convictions or charges of sexual abuse or sexual harassment in an institutional setting, sexual activity by force or coercion, or administrative adjudication for sexual activity by force shall be grounds for termination." There are no examples or circumstances during this audit rating period to provide proof of compliance or documentation for this provision.

The evidence collected for this provision shows that the agency has a policy requiring that material omissions regarding such misconduct or the provision of materially false information are grounds for termination. Therefore, through written policy the facility has demonstrated that it meets this provision.

#### 115.17 Provision (h)

VADOC Operating Procedure 102.7 states in part that; "Information on substantiated allegations of sexual abuse or sexual harassment involving a former employee must be furnished to any institutional employer for whom which the employee has applied to work provided the request is written." The H.R. staff member was asked during the interview, "If a former employee applies for work at another institution and a request by that institution is made, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving that former employee?" The H.R. staff member stated that she would require a signed consent to release information from the requesting agency prior to releasing that information. She further stated that this information would have to come from the Central Office.

The evidence collected for this provision shows that the agency has a policy requiring that unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse and sexual harassment involving a former employee upon receiving a request from an institutional employer for whom the employee has applied to work. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.

#### Conclusion:

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

	promotional decisions.
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<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 801.1</li> <li>b) NWC Work Order and Invoice for replacing doors in five locations in the food service area.</li> <li>c) Warden Memorandum dated 02/02/2026 documenting no modifications or expansions made to the facility.</li> </ul> <p>Interviews</p> <ul style="list-style-type: none"> <li>1) Interview with Agency Head</li> <li>2) Interview with Warden</li> </ul> <p>Observations made during the On-Site Audit and Document Review</p> <p>115.18 Provision (a)</p> <p>VADOC Operating Procedure 801.1 states in part that; “The effect of the facility’s design, acquisition, expansion, or modification on the facility’s ability to protect the inmate from sexual abuse shall be taken into consideration when designing or acquiring any new facility and in planning any substantial expansion or modification to an existing facility.”</p> <p>The facility has not acquired or made a substantial expansion or modifications to the existing facility since the last PREA audit in 2023.</p> <p>During the audit interview phase, the Agency Head was asked that when planning substantial modifications to a facility, “How does the agency consider such changes on its ability to protect inmates from sexual abuse?” The Agency Head stated, “When designing facilities, we include multiple-disciplinary groups including those individuals with specific knowledge and understanding of PREA and ADA. We take into consideration camera locations, where doors and security posts are situated and a level of privacy for the inmates.” In addition, the Warden was also asked the same question. The Warden indicated that there had been no changes or current renovations to the facility since the last PREA audit.</p>

	<p>The evidence collected for this provision shows that the agency shall consider the effect of such design to improve the ability to protect inmates from sexual abuse. Therefore, through personal observations, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>115.18 Provision (b)</p> <p>VADOC Operating Procedure 801.1 states in part that; “For new installations or updates to existing video monitoring systems, electronic surveillance systems or other monitoring technologies, the facility shall take into consideration how such technology may enhance their ability to protect inmates from sexual abuse.”</p> <p>During the audit interview phase, the Agency Head was asked how the agency uses monitoring technology. The Agency Head stated that, “The department utilizes cameras extensively throughout their facilities to protect the inmates by limiting blind-spots and help with detection of illegal activities to include sexual abuse.” The Warden was also asked a similar question about how the facility had considered using technology to enhance the inmates’ protection from sexual abuse. The Warden stated that the facility had recently upgraded their camera system in 2023 to over 800 cameras and he is requesting an additional 200 cameras be added. The Warden also indicated that they are looking at the use of a drone system and mechanical dogs to assist in monitoring inmate movement.</p> <p>The evidence collected for this provision shows that the agency has considered how technology may enhance the facility’s ability to protect inmates from sexual abuse. Therefore, through written memorandums, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard addressing upgrade to facilities and technology.</p>
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<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents</p> <p>a) VADOC PREA Operating Procedure 038.3</p>

- b) VADOC Operating Procedure 030.4 Special Investigative Unit
- c) VADOC Operating Procedure 030.1 Evidence Collection and Preservation
- d) VADOC Operating Procedure 720.7 Emergency Medical Equipment and Care
- e) VADOC Operating Procedure 730.2 Screening Assessment & Classification
- f) Code of Virginia 53.1-10
- g) Special Investigations Unit (OLES) Matrix
- h) Virginia Forensic Nurse Examiner Program by Region
- i) Business Contract between Virginia Department of Corrections and the Virginia Sexual and Domestic Action Alliance. (Effective date through 08/31/2026)
- j) NWC Assistant Warden Memorandum dated 2/28/26 indicating no instances of reported allegations of sexual abuse requiring a forensic medical examination during this audit period

#### Interviews

- 1) Interview with SANE/SAFE staff
- 2) Interview with the PREA Compliance Manager
- 3) Interviews with random staff

#### Observations during on-site Facility tour

##### 115.21 Provision (a)

VADOC PREA Operating Procedure 038.3 states in part that; “Unless the Facility Investigator quickly and definitively determines that the allegation is unfounded, allegations of sexual abuse or sexual harassment must be referred for investigation to the Office of Law Enforcement Services (OLES). The Facility Investigator will document all such referrals. OLES conducts investigations into criminal behavior, procedural, or administrative violations, and staff misconduct affecting operations of the DOC.”

VADOC Operating Procedure 030.4, states in part that; “In accordance with COV §53.1-10, the Director has the authority to designate OLES Special Agents with the same power as a law-enforcement officer in the investigation of allegations of criminal behavior affecting the operations of the DOC. Special Agents are authorized to conduct investigations into criminal activity, procedural and administrative violations, and employee misconduct affecting the operations of the DOC.” The policy further states that, “All sworn law enforcement supervisors and special agents are required to be fully certified by the Department of Criminal Justice Services (DCJS) prior to exercising any law enforcement authority. Law enforcement certification must be maintained as required by DCJS. The OLES is authorized to:

- 1. Conduct investigations of allegations of criminal behavior affecting the operations

of the Department. The investigations include allegations involving economic crime and drug/contraband matters.

2. Conduct administrative and/or criminal investigations into allegations of sexual abuse or sexual harassment in DOC facilities in accordance with this operating procedure.

3. Serve as the DOC resource for polygraph examinations, forensics, economic crime investigations, and digital photography.”

VADOC policy 030.4 further states in part that; “OLES has an established uniform evidence protocol which maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.”

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

During the review phase of the Pre-Audit Questionnaire, the Auditor reviewed standard 115.21 and noted that the VADOC Office of Law Enforcement Services (OLES) is responsible for all criminal investigations that occur on the grounds owned and operated by the VADOC. The PREA Regional Analyst was contacted and asked this question. The PREA Regional Analyst explained that the VADOC OLES conducts all criminal sexual assault investigations at the VADOC facilities. The Auditor contacted the VADOC Office of Law Enforcement Services to establish if they did in fact conduct alleged sexual assault criminal investigations at the NWC. Arrangements were made by the Auditor to contact an OLES Assistant Chief Agent via phone call. The Auditor contacted the Assistant Chief with the Special Investigation Unit. He informed the Auditor that they do in fact investigate all criminal sexual assault allegations and acknowledged that the only requirement needed to send an investigator is an official request from the Facility Investigator.

The OLES is responsible for investigating allegations of sexual crimes that occur within the VADOC facilities and is familiar with PREA standard 115.21 pertaining to the investigation of sexual assaults, the collection of evidence, and forensic examinations. Furthermore, the NWC provided VADOC Policy 030.1, Evidence Collection and Preservation which states in part that; “The Sexual Assault Victim Search/Evidence Collection Protocol (see Operating Procedure 038.3, Prison Rape Elimination Act (PREA)) shall be followed for all investigations into allegations of sexual abuse to maximize the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. See Operating Procedure 030.4, Special Investigations Unit, and Operating Procedure 720.7, Emergency Medical Equipment and Care, for additional guidance.”

When the Auditor interviewed random staff, it was determined that all 17 staff were aware of their responsibility to preserve evidence during a sexual abuse allegation. They discussed securing the scene, notifying a supervisor immediately, contacting

medical personnel, writing a detailed report, and not allowing the victim or accuser to eat, drink, bathe, or brush their teeth. Also, when asked who was responsible for investigating criminal and administrative cases, staff members identified the facility investigator or (intel) thirteen times, the PCM four times. All random staff interviewed were aware of the protocol for evidence collection and the majority of sworn staff were able to identify the investigator/intel responsible for conducting the administrative investigations. The facility investigator does conduct an initial inquiry to determine what the allegation is and if it appears to be a legitimate allegation. If the allegation is indeed a sexual abuse allegation then that information is forwarded to the OLES for investigation. If it is determined that the allegation is sexual harassment then the facility investigator is assigned the case.

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

#### 115.21 Provision (b)

The facility did not house youthful inmates in their facility over the last twelve months. The NWC provided VADOC Policy 030.4, which states in part that; "OLES has an established uniform evidence protocol which maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The established protocol is developmentally appropriate for youth and is based on or similar to other comprehensive and authoritative protocols developed after 2011."

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

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

#### 115.21 Provision (c)

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

Any allegations of sexual abuse that appears criminal in nature will be referred to the VADOC OLES for criminal investigation. The alleged victim shall be immediately transported to the Virginia Commonwealth University Medical Center (VCU Medical Center) to be examined by a medical professional who is skilled and experienced in the use of rape kits for the collection of forensic evidence. VCU Medical Center employs Sexual Assault Nurse Examiners (SANE) or a Sexual Assault Forensic Examiners (SAFE). They are available 24 hours a day 7 days a week 365 days a year. This policy also specifically states that treatment services should be provided to the alleged victim without financial costs to the victim.

VCU Medical Center is a licensed health care facility that will provide health care services to inmates housed in a state or local correctional institution. An inmate who is a victim of an alleged sexual abuse may be transported to the VCU Medical Center for a sexual assault forensic examination. The hospital employs staff members trained in sexual assault examination. The hospital agrees that any such examination will be performed by a nurse trained in sexual assault examination under the direction of a physician.

The facility reported no instances during this rating period where an inmate housed at the NWC was transported to the hospital for a forensic medical examination.

During the post-audit phase, an interview was conducted by the Auditor with a Sexual Assault Nurse Examiner (SANE). The interview was conducted by phone with a SANE Nurse employed with the VCU Medical Center in Richmond, VA. A SANE nurse is a highly skilled certified nurse trained in the art of evidence collection and chain of custody. The nurse is considered the subject matter expert in collecting evidence after an alleged sexual assault has occurred. The nurse is also required to provide testimony in court cases related to sexual abuse. The Nurse explained that she is aware that if an inmate from the VADOC is sexually abused then the VCU Medical Center would conduct a medical forensic examination. She explained that the VCU Medical Center conducts SANE exams for the surrounding jurisdictions. She informed the Auditor that when an individual is in need of a forensic medical examination, the inmate would be brought to the hospital, and the SANE Nurse would respond to the emergency room and perform the examination. When asked if the VCU Medical Center is responsible for conducting all forensic medical exams for inmate victims of sexual abuse for Nottoway Work Center, the SANE Nurse stated, "Yes, they are the responsible party that offers forensic medical examinations and would provide those services for the surrounding correctional facilities if requested by law enforcement." When asked if SANE staff is unavailable to conduct forensic medical examinations, then who assumes the responsibility? The SANE Nurse replied that, "Her medical facility is available and that nurses are always on call 7 days a week 365 days a year." If the nurse was unavailable then the inmate would wait until a nurse was available. Therefore, they are always available. However, if for some reason they are unable to conduct the examination then the facility could take the alleged inmate victim to another local hospital that offers the services of a SANE nurse that provides medical forensic examinations. The facility reported no instances during this rating period where a medical forensic examination was required or necessary.

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

#### 115.21 Provision (d)

The facility has provided VADOC PREA Policy 038.3, which states in part that; “The DOC will attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the services of a qualified staff member or a qualified staff member from a community-based organization must be made available.” In addition, VADOC Operating Procedure 730.2 states in part that; “The DOC will attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the DOC must make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member.”

The Facility has provided a business contract between The VADOC and the Virginia Sexual and Domestic Violence Action Alliance with a renewal date until 08/31/2026. The Action Alliance is a victim services advocate that provides confidential support and assistance to sexual assault victims for the entire inmate population incarcerated in the Virginia Department of Corrections. In accordance with 42. USC 14043g (b) (2) (c) the requirements to be considered a “rape crisis center” are as follows:

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

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

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

The PREA Compliance Manager was interviewed by the Auditor and stated that staff would allow access to a victim advocate if the inmate requested. If the inmate

requested an advocate be present during the examination then arrangements would be made with the hospital to provide those services because qualified counselors are made available. However, if the advocate was unavailable for whatever reason then a call would be placed to Action Alliance. Action Alliance would arrange for a rape crisis center advocate be present during the examination. The PREA Compliance Manager also stated that the facility provides access to Action Alliance through the phone. During the on-site facility tour, the Auditor initiated a call to the Action Alliance through the inmate phone system while touring a housing unit to determine the effectiveness and efficiency of the organization. The facility reported no instances of reported alleged sexual abuse at the NWC during this rating period. Therefore, the Auditor did not interview any inmate that had reported sexual abuse at the NWC to obtain their perspective.

During the on-site review, the Auditor spoke to several inmates who confirmed the availability to contact The Action Alliance via phone and the Auditor test called both the reporting sexual abuse number and the requesting advocacy number. This demonstrates the agency's attempt to make available to victims of sexual abuse a victim advocate from a rape crisis center.

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

#### 115.21 Provision (e)

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

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

interviews within a reasonable period of time.”

The facility has reported no instances of a forensic medical examination being conducted during this rating period requiring a victim advocate being present. These services are provided by the hospital if requested. Lastly, when asked how the agency ensures that the advocate meets the qualifications described above, the PREA Compliance Manager stated that the service is coming from an official rape crisis center and that the counselors must be licensed.

The evidence collected for this provision shows that the agency has demonstrated that they do allow victim advocates to accompany and support alleged victims of sexual assault during the forensic examination and during the investigatory interview. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.21 Provision (f)

The agency is responsible for conducting administrative and criminal sexual abuse investigations; Therefore, this provision is not applicable to the NWC.

The evidence collected for this provision shows that the agency conducts their own administrative and criminal sexual abuse investigation, and therefore, this provision is not applicable to this facility.

#### Conclusion

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency to provide evidence protocols and forensic medical evaluations.

115.22	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>  The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:  Documents:  a) VADOC PREA Operating Procedure 038.3  b) VADOC Operating Procedure 030.4 Special Investigative Unit  c) Investigations Matrix  d) VADOC Public Website

Interviews:

- 1) Interview with Agency Head
- 2) Interview with Investigative Staff

Observations made during the On-site Phase of the Audit.

115.22 Provision (a)

VADOC PREA Operating Procedure 038.3 states in part that; “An administrative or criminal investigation conducted in accordance with PREA standards must be completed and documented for all allegations of sexual abuse and sexual harassment. If the alleged abuser is staff, the staff member must be reassigned to a post with no inmate direct contact with the alleged victim, suspended, or placed on pre-disciplinary leave with pay based on circumstance or situation, pending completion of the investigation as outlined in Operating Procedure. Upon receipt of an allegation of sexual abuse or sexual harassment, investigative staff will have 30 days to complete an administrative investigation into the allegation. The initial investigation will be conducted by the Facility Investigator or other staff members who has received the required specialized training to conduct sexual abuse investigations. If it is determined that the investigation will not be completed within 30 days, the Facility Investigator must contact the Regional PREA Analyst to discuss an extension. When the Regional PREA Analyst determines that an extension is needed, periodic updates must be provided at an interval deemed appropriate by the Regional PREA Analyst. If a determination is made that the sexual abuse allegation will be handled by OLES, the Facility Investigator will notify the Regional PREA Analyst.”

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

In the past twelve months, NWC reported that they have received 0 allegations of sexual abuse and sexual harassment.

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

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

115.22 Provision (b)

VADOC PREA Operating Procedure 038.3 states in part that; “Unless the Facility Investigator quickly and definitively determines that the allegation is unfounded, allegations of sexual abuse or sexual harassment must be referred for investigation to OLES. The facility investigator will document all such referrals. OLES conducts investigations into criminal behavior, procedural or administrative violations, and staff misconduct affecting the operations of the DOC.” In addition, VADOC Operating Procedure 030.4 states in part that; “Unless the facility investigator quickly and definitively determines that the allegation is unfounded, allegations of sexual abuse or sexual harassment shall be referred for investigation to the DOC Office of Law Enforcement Services who has the legal authority to conduct criminal investigations.” The agency PREA Policy 038.3 can be found in its entirety on the agency website.

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

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

#### Provision (c)

The NWC and OLES are part of the Virginia Department of Corrections and perform their own criminal investigations into sexual abuse and sexual harassment allegations that occur on the prison grounds. The duties and responsibilities of the OLES are outlined in Operating Procedure 038.3 (PREA) and can be found in its entirety on the agency’s public website. Therefore, this provision in the standard is not applicable to this facility.

#### Provision (d)

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

#### Conclusion:

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

	has determined that the facility is fully compliant with this standard requiring the agency to ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.
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<b>115.31</b>	<b>Employee training</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 102.6 Staff Orientation</li> <li>b) VADOC Operating Procedure 350.2 Training &amp; Development</li> <li>c) BCO 2026 PREA Training</li> <li>d) PREA Basics Curriculum Training</li> <li>e) 2025&amp;2026 PREA In-Service Training Outline and Checklist</li> <li>f) PREA &amp; ADA News issues</li> <li>g) NCC/NWC In-service Roster</li> <li>h) 2025 PREA Online In-service Training</li> <li>i) PREA Orientation Training</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1) Interview with Random Staff</li> </ul> <p>Observations made during the On-Site Audit and Document Review</p> <p>115.31 Provision (a)</p> <p>The NWC provides PREA refresher training to all their employees on an annual basis. The facility also trains contractors and volunteers during their initial orientation process and then annually. New hires are trained while in basic training and then on an annual basis. The NWC has provided the PREA BCO Introduction &amp; Checklist along with the PREA Overview Curriculum through on-line services. They have provided PREA In-Service Training rosters along with Agency Policy VADOC Operating Procedure 350.2, which states in part that; "In-service training programs shall include refresher training on current DOC sexual abuse and sexual harassment policies and procedures and will cover the following areas:</p>

- Its zero-tolerance policy for sexual abuse and sexual harassment
- How to fulfill responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures
- Inmates' right to be free from sexual abuse and sexual harassment
- The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment
- The dynamics of sexual abuse and sexual harassment in confinement
- The common reactions of sexual abuse and sexual harassment victims vii. How to detect and respond to signs of threatened and actual sexual abuse
- How to avoid inappropriate relationships with inmates
- How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates
- How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities."

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

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

During the interview process, 17 random staff were asked if they had received PREA training, and if so, when? All 17 officers indicated that they have received PREA training. Annual in-service training was mentioned 14 times; and during orientation/

phase class was mentioned three times. When the Auditor reviewed staff files, it contained the dates of the initial training and proceeding PREA refresher training for those security staff that had been employed for over one year.

The evidence collected for this provision shows that the agency has procedures in place to train all employees on all relevant topics outlined in this standard provision. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.31 Provision (b)

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

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

#### 115.31 Provision (c)

The NWC provides PREA training on a yearly basis. All new employees receive initial training when attending the new-hire orientation and basic training. All new contractors and volunteers receive their initial training during the orientation process as well and then annually. This practice was confirmed by sampling 13 employee training records. The files indicated that all 13 employees received initial PREA training and 10 officers received refresher training. The three officers that had not received refresher training had not been employed for a full two-year period. Finally, NWC provided several PREA training attendance rosters and basic training records documenting the completion of the agency's annual PREA refresher training. The facility also provided a monthly newsletter specific to PREA and ADA with updates and reminders associated with PREA.

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

#### 115.31 Provision (d)

VADOC Operating Procedure 350.2 states in part that; "The agency shall document,

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

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

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

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

Conclusion:

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

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

- c) VADOC PREA Operating Procedure 038.3
- d) VADOC Operating Procedure 027.1 Volunteer and Internship Programs
- e) Contractor and Volunteer PREA Training Acknowledgement
- f) Guide for Maintaining Boundaries Brochure
- g) PREA Contractor/Volunteer Trainer Outline
- h) Contractor/Volunteer PREA Training Rosters & Training Acknowledgement Forms

Interview:

1. Interview with Volunteers
2. Interview with Contractors

115.32 Provision (a)

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

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

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

Volunteers and Contractors are trained during their initial orientation and are required

to acknowledge that they have received the necessary PREA training by signing a Contractor/Volunteer PREA Acknowledgement form. The facility maintains all copies of signed volunteer and contractor acknowledgement forms and the facility provided examples of those forms as evidence of their compliance.

During the interviews with one volunteer and two contractors, the Auditor asked if they had been trained in their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response. The three contractors and volunteer interviewed answered in the affirmative.

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

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

#### 115.32 Provision (b)

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

The facility currently reports 65 contractors and 39 volunteers receiving 100% participation in training. Volunteers and contractors are trained during their initial orientation and are required to acknowledge that they have received the necessary PREA training by signing a Volunteer/Contractor PREA Acknowledgement form. The facility maintains all copies of signed Volunteer and Contractor Acknowledgement forms.

When interviewing the volunteer, he indicated that training consists of watching two different videos discussing professional boundaries, zero-tolerance, and ended with a multiple-choice quiz. When asked who he would report an incident to, the volunteer stated he would go to the first person available or the chaplain. When the contractors

were asked the same question, their responses were that they received the agency training on an annual basis and one contractor indicated that she also receives annual PREA training from her company. They explained that the training consisted of if someone tells you about sexual abuse then you must immediately notify staff, keeping the inmates separated, and notifying a supervisor or officer. The contractors indicated that if someone made an allegation of sexual abuse to them then they would notify a corrections officer, Watch Commander, or Intel Officer. The PREA training curriculum provided in the PAQ contains information regarding the agency's zero-tolerance towards all sexual abuse and the PREA volunteer and contractor acknowledgement form confirms receipt of that information.

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

115.32 Provision (c)

VADOC Operating Procedure 027.1 states in part that; "Receipt and understanding of these materials will be documented by the volunteer's/intern's signature on the Volunteer/Intern Agreement form 027 F4 and on the Prison Rape Elimination Act (PREA) Training Acknowledgement attachment to Operating Procedure 038.3, Prison Rape Elimination Act." Also, the facility provided VADOC Policy 102.6 which states in part that; "The agency will maintain documentation confirming that interns, volunteers, and contractors understand the training they have received."

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

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

Conclusion:

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

<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

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

Documents:

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

Interview:

- 1) Interview with Intake Staff
- 2) Interview with Random Inmates

115.33 Provision (a)

All VADOC inmates arriving at the State Correctional System are initially sent to an Intake Facility. Here the inmates are classified, medically evaluated, and provided with all the necessary education and information needed during their stay. It is at these Intake Facilities that the VADOC inmates initially receive their PREA information along with the more comprehensive PREA education.

The NWC conducts the initial PREA orientation on every inmate that arrives at their facility. New arrivals at Nottoway Work Center are given the zero-tolerance brochure, PREA paperwork, and watch the PREA video. Once completed, the inmates sign the PREA training acknowledgement form.

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

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

NWC identified that there were 180 inmates admitted into their facility in the last twelve months. Of those 180 inmates, all received the initial PREA information during the intake process along with 180 inmates receiving comprehensive PREA educational information from the facility counselor that stayed in the facility for more than 30-days.

During the interview with the Intake Officer, the counselor explained that she provides the inmates with information about the agency’s zero-tolerance policy and how to report sexual abuse and sexual harassment. During intake, all inmates are provided with the PREA brochure and handouts. She stated the inmates sign the PREA Training Acknowledgement form after they watched the PREA video and received the orientation handbook. She also goes over the PREA hotline, third-party reporting, and contact information for the PCM. The Intake Officer provides the inmates with a packet in written format that also goes over the PREA video. Finally, the counselor indicated that there are posters mounted on the walls throughout the facility that explain these same instructions. When the Auditor interviewed 20 random inmates, they were asked if they had received information about the facility’s rules against sexual abuse and harassment. The results indicated that all 20 inmates affirmed and acknowledged that they had received PREA educational information. Of those 20 inmates interviewed, the inmates specifically indicated that they had received the training in the form of video, booklet, brochure, paperwork, and receiving it verbally. These inmates also explained that they received the information either on the first day they arrived or within one to two days following their arrival.

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

#### 115.33 Provision (b)

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

The NWC identified 180 inmates whose length of stay in the facility was over 30 days or more in the last twelve months. Of those 180 inmates, the facility reports that all have received comprehensive PREA education regarding sexual abuse or harassment.

The Auditor interviewed an Intake Officer who stated that PREA information is posted in all of the housing units which provides the definitions of sexual abuse and sexual harassment. The counselor further stated that the inmates must watch the PREA video in its entirety which is shown during the comprehensive educational portion and that the inmates receive both the intake PREA information and comprehensive educational PREA information all at once. When asked how long from the date of arrival inmates were made aware of these rights, the counselor stated that they usually receive the information the day they arrive at the facility.

The Auditor also interviewed 20 inmates. Those inmates were asked if they were told about their right to not be sexually abused, how to report sexual abuse, the right not to be punished for reporting sexual abuse, and how long before they were made aware of these policies? From those inmates asked, all 20 inmates confirmed receiving the PREA information within twenty-four hours or immediately after arriving at the facility.

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

#### 115.33 Provision (c)

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

When the Intake Officer was asked how they ensure that inmates transferred from another facility have been educated on the agency's zero-tolerance policy and sexual abuse; The counselor explained that part of her responsibility as a unit counselor is to provide all arriving inmates with the zero-tolerance policy and how to report sexual abuse. In addition, they have to watch a PREA video. She indicated that all inmates signed a PREA Orientation form acknowledging that the information was provided and that they understood what was presented to them. Twenty-four examples of these signed forms were provided to the Auditor in the PAQ, and the Auditor reviewed 30 inmate files that contained these signed acknowledgement forms.

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

#### 115.33 Provision (d):

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

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

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

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

#### 115.33 Provision (e)

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

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

	<p>115.33 Provision (f)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “In addition to providing such training and education, each facility will ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.” The facility also provided VADOC Operating Procedure 810.2, which states that; “Each institution will ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.”</p> <p>The NWC has posters strategically posted throughout the facility, in each housing unit, and departments (i.e. kitchen, maintenance, water treatment plant, boiler facility, and VCE workshops) to ensure compliance with PREA standards. The Auditor personally observed these posters during the facility site review. All inmates are also issued a NWC Inmate Orientation Handbook which has all PREA related information documented inside.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that information will be continuously and readily available or visible to inmates. Therefore, through written policy and personal observations, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring PREA inmate education.</p>
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<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 030.4 Special Investigative Unit</li> <li>b) VADOC Operating Procedure 350.2 Training and Development</li> <li>c) VADOC 2025 PREA Conference Agenda and Rosters</li> <li>d) Certificate of Completion by the National Institute of Corrections “Investigating Sexual Abuse in Confinement Setting”</li> <li>e) VADOC Institutional Investigator Basic School</li> </ul>

f) PREA Investigations Matrix

Interview:

1) Interview with Investigative staff

115.34 Provision (a)

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

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

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

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

All sexual abuse and sexual harassment investigators who conduct non-criminal investigations at the NWC have received specialized training. This specialized training was through the National Institute of Corrections (NIC). In addition, all VADOC OLES Agents receive the training to conduct both administrative and criminal investigations. The facility provided certificates of completion for the course titled, "Specialized Training: Investigating Sexual Abuse in Correctional Settings Course." The NWC identified 4 facility investigators and 44 active OLES agents. They provided specialized training certificates of completion for all facility investigators and OLES agents.

When interviewing the Investigative staff, the OLES Assistant Chief stated he has received specialized training through DCJS, VADOC, and training through the on-line

course provided by the National Institute of Corrections (NIC). The Assistant Chief stated that the PREA classes dealt with the proper use of Garrity and Miranda in criminal cases, evidence collection, and interview techniques.

The Auditor also interviewed the facility investigator. She explained that she received the PREA investigative training through the NIC and attended the Investigative class put on by the VADOC.

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

#### 115.34 Provision (b)

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

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

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

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

All sexual abuse and sexual harassment investigators who conduct non-criminal investigations at the NWC have received specialized training. This specialized training was through the National Institute of Corrections (NIC). In addition, all VADOC OLES Agents receive the training to conduct both administrative and criminal investigations. The facility provided certificates of completion for the course titled,

“Specialized Training: Investigating Sexual Abuse in Correctional Settings Course.” The NWC identified 4 facility investigators and 44 OLES active agents. They provided specialized training certificates of completion for all facility investigators and OLES agents.

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

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

115.34 Provision (c)

VADOC Operating Procedure 030.4 states in part that; “The PREA Compliance Manager shall maintain documentation that the required specialized training in conducting sexual abuse investigations has been completed by the investigators. In addition, the PREA Regional Analyst also maintains documentation that the agency special agents have completed the required specialized training in conducting sexual abuse and sexual harassment investigations.”

The NWC provided specialized training records for all facility investigators trained to investigate sexual abuse in confinement settings. It also provided records for multiple OLES agents in VADOC’s central district. These records consist of certificates of completion from the National Institute of Corrections.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all staff responsible for investigating sexual abuse have received additional specialized training and maintain the documentation necessary to prove that training. Therefore, through written policy and personal observation by documents provided, the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring specialized training for investigators who perform sexual abuse and sexual harassment investigations.

<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

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

Documents:

- a) National Institute of Corrections (NIC) Medical Health Care for Sexual Assault Victims in a Confinement Setting training modular
- b) VADOC Operating Procedure 038.3 PREA
- c) VADOC Operating Procedure 102.6 Staff Orientation
- d) VADOC Operating Procedure 701.1 Health Services Administration
- e) VADOC Operating Procedure 720.7 Emergency Medical
- f) Specialized PREA Training Medical/Mental Health NIC Certificate of Completion
- g) Log of NIC Training for Mental Health and Medical Staff
- h) Email from the PREA Coordinator identifying alternative training through the National Commission on Correctional Health Care (NCCHC)
- i) Signed Training Acknowledgement forms from the PREA Resource Center NCCHC Conference

Interview:

- 1) Interview with Medical & Mental Health Staff

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

115.35 Provision (a)

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

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

The facility reported that there are 33 medical health staff and 14 mental health professionals employed by the NCC/NWC who work regularly with inmates and have

received specialized training as required by the agency's policy. During the pre-audit phase, the Auditor was provided with copies of certificates of completion showing that medical staff and mental health staff had completed the online NIC specialized courses or attended the NCCHC Conference where the PRC provided specialized training from medical and mental health professionals.

When interviewing the medical and mental health staff, they informed the Auditor that they had previously received initial training when they first started work and received annual PREA refresher training. The mental health professional stated that he also received additional training on the above-listed topics by going online and taking PREA online classes through the National Institute of Corrections. The Health Services Administrator (HSA) indicated that she received the required training through the NCCHC.

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

#### 115.35 Provision (b)

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

VCU Medical Center Forensics Specialists perform forensic medical exams for this facility. Medical staff at this facility do not conduct forensic medical examinations. This practice was confirmed during the interview conducted with the HSA and Mental Health Professional who stated that they do not perform forensic medical examinations. Therefore, this provision of the standard is not applicable to the NWC.

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

#### 115.35 Provision (c)

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

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

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

	<p>115.35 Provision (d)</p> <p>VADOC Operating Procedure 102.6 states in part that; “Medical and mental health care providers must also receive the training mandated for employees or for contractors, interns, and volunteers depending upon the provider’s status in the DOC.” In addition, the facility provided VADOC 350.2, which states that; “Medical and mental health care practitioners shall also receive the training mandated for employees or for contractors and volunteers depending upon the practitioner’s status in the DOC.”</p> <p>During the pre-auditing phase, the agency provided copies of training logs indicating that medical staff receive the same in-service annual PREA training that security staff receives. In addition, while interviewing medical and mental health staff, the Auditor was told that they receive PREA training on an annual basis which includes the security staff PREA training.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that all medical staff receive the same PREA training that volunteers, contractors, and security staff receive. In addition, they receive this training on an annual basis. Therefore, through written policy and documents provided, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring specialized training for Medical and Mental health care.</p>
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<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC 810.2 Transferred Inmate Receiving Orientation</li> <li>b) VADOC 810.1 Inmate Reception &amp; Classification</li> <li>c) VADOC 730.2 Mental Health Services</li> <li>d) VADOC 861.1 Inmate Discipline</li> <li>e) HRSA and HRSV Logs</li> </ul>

- f) Classification Assessment Scoring
- g) Classification Assessment Details
- h) PREA Reassessment Forms

Interviews:

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

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

115.41 Provision (a)

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

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

During the Intake Counselor interview, the Auditor reviewed the risk screening process and asked whether inmates are screened for risk of sexual victimization upon arrival or transfer from another facility. The counselor confirmed that they are. In interviews with 20 random inmates, 17 recalled being asked the specific questions listed below; two did not recall, and one stated that he had not been asked those questions. The Auditor also reviewed the Classification Assessment History risk assessment questionnaire and confirmed that the screening form included the following:

- First incarceration?
- Does the inmate have a history of being a victim?
- Did they identify with being LGBT?

- Do you feel vulnerable to being sexually victimized?
- Do you consider yourself to be homosexual/bisexual/LGBTI, or gender nonconforming?

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

#### 115.41 Provision (b)

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

The facility reported that they received 180 inmates into their facility during the last twelve months that had a length of stay of more than 72 hours. The facility reports that 100% of the inmates received a risk screening assessment for risk of being sexually abused during incarceration.

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

When conducting the interview with staff responsible for performing risk-screening assessments, the Intake Counselor stated that she does conduct the risk screening process within 24 hours of the inmate being transferred to the facility. As stated in the previous provision, the Auditor interviewed 20 inmates, for which 17 inmates indicated that they had been questioned about sexual victimization within 72 hours of arriving at the facility. When conducting the inmate file review, the Auditor sampled 30 inmate files which indicated that all 30 inmates had a risk screening performed within the first 72 hours of arriving at the facility. Furthermore, the facility provided an additional 24 inmate files in the OAS of risk screening forms.

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

#### 115.41 Provision (c)

The risk screening assessment includes 29 yes-or-no questions, 13 of which address sexual victimization or aggression. The facility also provided classification assessment instructions explaining that certain “yes” responses may classify an inmate as a potential victim or aggressor. According to the instructions, an inmate who answers “yes” to four or more sexual victimization questions is identified as at heightened risk of sexual victimization (HRSV). An inmate who answers “yes” to four or more sexual aggression questions is identified as at heightened risk of sexual aggression (HRSA). As a result, the assessment is objective rather than subjective.

When interviewed, the Intake Counselor explained that the initial risk screening considers factors such as a history of prior sexual abuse, sexual relations, being a past victim of sexual abuse, and other relevant issues. The counselor asks the PREA questions, records the responses and enters them into the computer. VACORIS then uses the information to determine whether the inmate may be a potential victim or aggressor. She also noted that some questions include space for counselor comments.

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

#### 115.41 Provision (d)

VADOC Agency Classification Assessment Form (Risk Screening Tool) takes into consideration at the minimum the following:

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

The staff member responsible for performing risk-screening assessments Intake Counselor was asked what risk screening is considered and what is the process for conducting these assessments. The counselor stated the assessment asks questions

such as has the inmate been sexually abused in a confinement facility in the past, sexual violence, gender identity, and the age and stature of the inmate. Finally, the counselor stated that the screening is conducted face to face and the software in VACORIS assists in identifying potential inmate-victims or aggressors. She also stated that mental health makes the determination related to if the inmate suffers from mental or developmental disability issues.

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

#### 115.41 Provision (e)

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

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

#### 115.41 Provision (f)

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

During the pre-audit, the facility reported 180 inmates that entered the facility over the last twelve months and stayed more than 30 days. Out of those inmates, the agency reported that all 180 inmates were reassessed 21 days after their arrival at the facility for risk of sexual victimization based upon any additional relevant information received since intake over the last twelve months.

When asked how long after arrival inmates' risk levels are reassessed, the Intake Counselor stated that reassessments occur between 14 and 21 days after arrival at the facility. During interviews with 20 inmates, the Auditor asked whether staff had

asked PREA-related questions again during their incarceration. Thirteen inmates stated that they had, six stated that they had not, and one could not recall. The facility provided a reassessment screening form that includes questions related to sexual safety and victimization. During the inmate file review, the Auditor reviewed 30 inmate files, as well as 24 additional files submitted with the PAQ. The Auditor observed documentation of 30-day reassessments in all applicable files.

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

#### 115.41 Provision (g)

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

When interviewing the staff responsible for conducting risk screening the counselor indicated that they do reassess when warranted due to additional information received about the inmate’s sexual safety. The NWC has reported no instances where these types of reassessments have been conducted during this rating period.

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

#### 115.41 Provision (h)

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

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

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

	<p>115.41 (i)</p> <p>VADOC Operating Procedure 810.1 states in part that; “In order to ensure that sensitive information is not exploited to the inmate’s detriment by staff or other inmates, responses to Classification Assessment questions regarding an inmate’s risk of sexual victimization and abusiveness will only be disseminated in accordance with this operating procedure.”</p> <p>When interviewing the PREA Coordinator, she was asked who has access to the inmates’ risk screening information. The coordinator explained that treatment staff at each facility is responsible for meeting with the inmates and preparing the Classification Assessments. OP 810.2 states, “In order to ensure that sensitive information is not exploited to the inmate’s detriment by staff or other inmates, responses to Classification Assessment questions regarding an inmate’s risk of sexual victimization and abusiveness shall only be disseminated in accordance with OP 810.2 (shift commander or unit managers for bed assignments and mental health staff for follow-ups).” The PCM indicated that he can see the risk assessments along with the Unit Managers, Intake Counselors, Chief of Housing, and mental health professionals can also view risk assessments. The counselor stated that, “The screening is placed in CORIS, and the Assistant Warden (AW) determines and approves who has permissions in CORIS to view the screening.”</p> <p>The evidence collected for this provision shows that the agency has procedures in place to control access to risk screening information collected by the facility and that the information is not exploited. Therefore, through document review and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring screening for risk of victimization and abusiveness.</p>
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<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 425.4 Management of Bed &amp; Cell Assignments</li> </ul>

- c) VADOC Operating Procedure 810.1 Inmate Reception and Classification
- d) VADOC Operating Procedure 810.2 Transferred Inmate/Receiving and Orientation
- e) Memorandum dated 04/28/2023 by the PREA Coordinator regarding Housing assignments for transgender and intersex inmates.
- f) NWC Assistant Warden memorandum of record dated 02/28/2026, indicating no instances of housing a transgender inmate at the NWC during this rating period.

Interviews:

- 1) Interview with Staff performing Risk Screening
- 2) Interview with PREA Compliance Manager

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

115.42 Provision (a)

VADOC PREA Operating Procedure 038.3 states in part that; "Utilizing the results of the Classification Assessment in VACORIS and available inmate records, all inmates are screened for potential vulnerabilities or tendencies for acting out with sexually aggressive or other violent behavior at intake, transfer, and as needed. Staff will use information from the Classification Assessment in determining appropriate housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at considerable risk of being sexually victimized from those at high risk of being sexually abusive." In addition, the facility provided Operating Procedure 810.1 which states in part that; "Information from the inmate's Classification Assessment will be used by institutional staff in determining appropriate housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at elevated risk of being sexually victimized from those at high risk of being sexually abusive."

The PREA Compliance Manager stated during the interview that risk screening is part of the classification process and that they use the tool to make housing assignments so that they can keep potential inmate-victims from potential inmate-aggressors. The staff member responsible for conducting risk screening stated during her interview that the assessment is used to gather information to determine where to put an inmate into housing and assignments appropriately. She further indicated that the tool is used to identify high-risk aggressors and high-risk victims so that they can be housed separately.

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

115.42 Provision (b)

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

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

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

115.42 Provision (c)

No Longer Applicable

115.42 Provision (d)

No Longer Applicable

115.42 Provision (e)

No Longer Applicable

115.42 Provision (f)

No Longer Applicable

115.42 Provision (g)

No Longer Applicable

Conclusion:

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

	of screening information.
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<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 425.4 Management of Bed &amp; Cell Assignments</li> <li>b) VADOC Operating Procedure 810.1 Inmate Reception &amp; Classification</li> <li>c) VADOC Operating Procedure 810.2 Transferred Inmate Receiving &amp; Orientation</li> <li>d) VADOC Operating Procedure 830.5 Transfers, Institution Re-assignments</li> <li>e) Alternative Assessment Form</li> <li>f) NCC/NWC Warden memorandum regarding no incidents of High-Risk Sexual Victims (HRSV) requiring involuntary placement in Restorative Housing</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1) Interview with Warden</li> <li>2) Interview with Staff who supervise inmates in segregated housing</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.43 Provision (a)</p> <p>VADOC Operating Procedure 425.4 states in part that; “Inmates identified as HRSV or inmates alleged to have suffered sexual abuse or sexual harassment will not be placed in the restorative housing unit without their consent unless an assessment of all available alternatives has been made, and it has been determined by the Psychology Associate in consultation with the Shift Commander and Regional PREA Analyst that there are no available alternative means of separation from likely abusers.” Additionally, VADOC Operating Procedure 810.1 states in part that; “Inmates identified as HRSV will not be placed in the Restorative Housing Unit without their consent unless an assessment of all available alternatives has been made, and it has been determined by the Psychology Associate, in consultation with the Shift Commander and Regional PREA Analyst, that there is no available alternative means</p>

of separation from likely abusers.”

It should be noted that the Nottoway Work Center does not have the ability/location to house an inmate requiring involuntary segregated housing. If this was to occur, the inmate would be transferred to the Nottoway Correctional Center. Therefore, this standard is not applicable to the NWC.

The Warden stated during his interview, that they would try to find safe housing before ever placing an inmate at high risk of sexual victimization in involuntary segregated housing unless all other possibilities are unavailable. He also provided a memorandum confirming that the facility has not experienced a situation where an inmate at high risk of sexual victimization was housed in involuntary segregation over the last twelve months.

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

#### 115.43 Provision (b)

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

- a) Commissary purchases
- b) Correspondence
- c) Counseling
- d) Education
- e) Exercise / Recreation
- f) Legal Services / Law Library
- g) Medical Services
- h) Orientation
- i) Personal Property

- j) Telephone Calls
- k) Visitation
- l) Work Assignments.”

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

During an interview with an RHU staff member, the Auditor asked whether inmates placed in segregation, because they were at risk of sexual abuse, receive the same privileges and access to programs as other inmates. The staff member stated that these inmates are provided out-of-cell time and programs; however, intake inmates do not receive programming or work assignments. The Auditor did not interview any inmate housed in segregated housing due to possible victimization because the facility reported no such cases, and the Auditor found no evidence that this had occurred.

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

#### 115.43 Provision (c)

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

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

The Warden was interviewed and stated that his facility would only place the inmate in RHU to keep the inmate safe and only long enough to have the inmate transferred to another facility or a different housing unit. The Warden also indicated that, at most, an inmate would stay in segregation for no more than 24 hours before other arrangements would be made. The officer assigned to the RHU stated that an investigation would be completed and that the Multi-Disciplinary-Team (MDT) meets with the inmate every three days and they can transfer the inmate.

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

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

#### 115.43 Provision (d)

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

The officer assigned to RHU indicated that the facility supervisor would clearly document the basis for their concern for the inmate’s safety and the reason why no alternative could be found if they experienced such an event. This would be documented on a “Denial of Activity” form that can only be approved by the Unit Head. There was no such event that occurred during this audit period.

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

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

#### 115.43 Provision (e)

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

During the interview with the officer assigned to the RHU, he was asked, once an inmate is assigned to involuntary segregation does the facility review the inmate’s situation every 30 days to determine if the housing assignment is still appropriate. The officer stated, “Yes, the Multi-disciplinary Team (MDT) meets three times within 30-days. The first meeting is within the first three business days, 10 days later, and then finally at the 30-day mark.”

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

#### Conclusion:

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

<b>115.51</b>	<b>Inmate reporting</b>
	<p data-bbox="256 188 959 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 340 1458 416">The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p data-bbox="256 454 432 488">Documents:</p> <ol data-bbox="256 526 1437 1133" style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 801.6 Inmate Services</li> <li>c) VADOC Operating Procedure 803.3 Inmate Telephone Services</li> <li>d) VADOC Operating Procedure 866.1 Inmate Grievance Procedure</li> <li>e) PREA Poster in both English and Spanish</li> <li>f) PREA Zero Tolerance Hotline Poster in English, Spanish, and Hearing Impaired</li> <li>g) Memorandum of Understanding between the VADOC and Action Alliance</li> <li>h) Third-Party Visitation Poster</li> <li>i) NWC Orientation Handbook</li> </ol> <p data-bbox="256 1171 416 1205">Interviews:</p> <ol data-bbox="256 1243 932 1420" style="list-style-type: none"> <li>1) Interviews with Random Staff</li> <li>2) Interviews with Random Inmates</li> <li>3) Interview with PREA Compliance Manager</li> </ol> <p data-bbox="256 1458 1198 1491">Observations made during the on-site audit and document review.</p> <p data-bbox="256 1529 544 1563">115.51 Provision (a)</p> <p data-bbox="256 1601 1481 2056">The facility has provided multiple ways to report a sexual abuse or sexual harassment allegations in a private setting. These reporting options are listed in written policy, confirmed through interviews, and observed through posters and handouts. VADOC PREA Operating Procedure 038.3 specifically addresses four ways to report an allegation of sexual abuse or harassment. Those include making a verbal or written report to any staff member or by submitting in writing: a Facility Request, Informal Complaint, or Grievance Form. Also, having a 3rd party make a report for the alleged victim or calling the outside reporting authority promoted by the phone system and dialing (#55). The contact information and phone number are provided in the NWC handbook. In addition, PREA posters and painted murals with the information displayed throughout the facility both in English and in Spanish listing the ways an</p>

individual can report an allegation of sexual abuse. The staff training curricula consists of classroom instruction and an online training portal that provides staff ways to report. These ways are verbally to any supervisor, PREA Coordinator/PREA Regional Analyst, submit a written report, or to contact the outside reporting agency via hotline.

During the on-site audit, the Auditor performed 17 random staff interviews and 20 inmate interviews. Of the 17 random staff that were interviewed: 1 officer identified four ways to report, 7 staff members could identify three ways, and 5 staff members could identify two ways to report. Of the 20 inmates that were interviewed: 3 inmates could offer three ways to report sexual abuse, 13 inmates identified two ways, and 4 inmates provided at least one way to report.

During the on-site review, the Auditor observed and documented PREA posters and painted murals posted in both housing units and in public areas throughout the facility. The Auditor contacted Just Detention International and confirmed that they had not received any sexual abuse allegations during this rating period. The Auditor test-called the outside reporting entity while conducting the on-site facility tour. Finally, the Auditor had multiple conversations with inmates during the facility tour asking them if they knew how to report sexual abuse. Those inmates indicated by utilizing the PREA hotline phone number, verbally to staff, and/or writing the tipline on the kiosk.

The NWC reported no instances of inmates alleging sexual abuse or sexual harassment during this rating period.

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

#### 115.51 Provision (b)

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

VADOC PREA Operating Procedure 038.3 states in part that; "Inmates can choose to

report abuse and harassment to an advocate with the Action Alliance, a non-DOC organization, who is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to the DOC while allowing the inmate to remain anonymous upon request.

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

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

NWC does not detain inmates solely for civil immigration purposes. The Virginia Department of Corrections only houses those inmates that have been convicted of a crime under the Virginia Criminal Code.

When conducting interviews with 20 inmates; 16 inmates acknowledged being aware that a sexual abuse allegation can be made anonymously, while 3 stated that they did not know they could report anonymously, and 1 inmate stated that you couldn't. When interviewing the PREA Compliance Manager, he was asked how the facility provides a way for an inmate to report sexual abuse to a public or private entity that is not part of the agency. The PREA Compliance Manager (PCM) confirmed the use of Action Alliance as their method of providing a hotline service. The PCM also confirmed that the calls can remain anonymous, and that the information is immediately emailed to the Warden, Facility Investigator, and PREA Regional Analyst.

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

#### 115.51 Provision (c)

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

During staff interviews, the officers explained that their duties were to immediately write a report recording the verbal sexual abuse allegation. When interviewing inmates, several explained that they could notify a supervisor or security officer to make a sexual abuse allegation. The officers also indicated that the report would be documented immediately. When further questioned about the term "immediate" the officers stated no later than by the end of their shift. The PREA Compliance Manager was interviewed and asked to define what "immediately" meant according to the protocol. The PREA Compliance Manager explained that immediately is defined as at least before the end of the officer's tour of duty for that day. In addition, all the PREA

	<p>posters displayed throughout the facility state that an allegation of sexual abuse can be reported verbally. When interviewing the inmates, 13 inmates acknowledged being able to report verbally, 5 inmates referenced reporting in writing, and 2 inmates mentioned via third-party reporting.</p> <p>The evidence collected for this provision shows that the agency has demonstrated that they accept, and document sexual abuse reports verbally, in writing, and from third parties. It has also been determined that these reports have been handled in a timely fashion. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>115.51 Provision (d)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “Staff can privately report the sexual abuse and sexual harassment of inmates through the established reporting hotline at 855-602-7001.” The NWC staff may also privately report sexual abuse or sexual harassment of inmates to their supervisor or any other facility supervisor. Staff are also encouraged to report sexual abuse or sexual harassment to the PREA Compliance Manager. Of the 17 randomly selected staff interviewed about private reporting methods; ten identified the hotline, three identified OLES/Intel, one identified Human Resources, and one identified the PREA Compliance Manager. Two officers were unsure how to report privately.</p> <p>The evidence collected for this provision shows that the agency has demonstrated that they do provide staff with a private method of reporting sexual abuse or sexual harassment of inmates. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring the agency provide multiple internal ways for inmates to privately report sexual abuse or sexual harassment.</p>
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<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <p>a) VADOC Operating Procedure 866.1 Inmate Grievance Procedure</p>

- b) VADOC PREA Operating Procedure 038.3
- c) Virginia Department of Corrections (VADOC) Inmate Orientation Manual (Facility Handbook)
- d) NWC Assistant Warden memorandum of record dated 02/28/2026 indicating no reports of sexual abuse or sexual harassment reported via regular grievance, emergency grievance, or by a third-party during the audit period.

Interviews:

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

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

The agency has a policy that places limitations on what allegations can be handled through the grievance process. The agency's procedure is that emergency grievances received about sexual abuse and sexual harassment will be accepted and reviewed regardless of when the incident took place. The agency protocol is if a PREA allegation through an emergency grievance is received, it must immediately be directed to the Unit Head or PREA Compliance Manager. These individuals will further the investigation into the allegation. The emergency grievance process is immediately stopped, and an administrative investigation is immediately initiated. The NWC reported no instances of an inmate utilizing the emergency grievance procedure to report an alleged sexual abuse or harassment report during this audit period. When one is received, the emergency grievance process would immediately stop, and the allegation would be turned over for investigation as all other allegations of sexual abuse or harassment.

115.52 Provision (a)

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

The NWC Orientation Handbook defines an emergency grievance as a situation or condition that may place an inmate at immediate risk of serious personal injury or irreparable harm. Staff must respond within eight (8) hours after the inmate receives a receipt for the emergency grievance. You will not be charged for filing a grievance regarding sexual abuse or sexual harassment unless it is determined that you filed the report in bad faith.

115.52 Provision (b)

VADOC Operating Procedure 866.1 states in part that; "There is no time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse or sexual harassment. Otherwise-applicable time limits apply to any portion of a grievance that does not allege an incident of sexual abuse. An inmate is not required to use the informal complaint process or otherwise attempt to resolve with staff any alleged incident of sexual abuse or sexual harassment." The NWC Inmate Orientation Manual states in part that; "There is no time limit on when you may file a grievance regarding an allegation of sexual abuse or sexual harassment. You are not required to resolve an incident of sexual abuse or sexual harassment with staff or submit the grievance to the staff member who is the subject of your sexual abuse or sexual harassment allegation."

During the facility tour, the Auditor requested an emergency grievance form on multiple housing units to ensure the forms were readily available to the inmates if requested.

115.52 Provision (c)

VADOC Operating Procedure 866.1 states in part that; "Staff who are the subject of a complaint alleging staff misconduct, sexual abuse or sexual harassment of an inmate, or any possible violation of the Standards of Conduct must not be the respondent to the Written Complaint but may offer information during the investigation of the complaint." The NWC Orientation Manual states in part that; "You are not required to resolve an incident of sexual abuse or sexual harassment with staff or submit the grievance to the staff member who is the subject of your sexual abuse or sexual harassment allegation. Grievances regarding sexual abuse or sexual harassment will not be referred to the staff member who is the subject of the grievance."

The NWC Orientation Handbook states in part that; "Grievances regarding sexual abuse or sexual harassment will not be referred to the staff member who is the subject of the grievance."

115.52 Provision (d)

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

information from other facilities, divisions, or agencies.”

The NWC has reported no instances of receiving an emergency grievance during this audit period alleging sexual harassment or sexual abuse.

115.52 Provision (e)

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

115.52 Provision (f)

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

The facility has reported no instances of receiving any type of grievance alleging sexual abuse or sexual harassment during this rating period.

115.52 Provision (g)

VADOC Operating Procedure 866.1 states in part that; “An inmate’s use of the grievance procedure to resolve their issues is not normally cause for disciplinary

action, unless, the written grievance document or related inmate action are subject to disciplinary action as outlined in Operating Procedure 861.1, Inmate Discipline, Institutions. Disciplinary action may include but is not limited to Disciplinary Offense Code 212, 222,141 or filing a grievance of alleged sexual abuse proven to be in bad faith.”

**Conclusion**

The agency has a policy that places limitations on what allegations can be handled through the grievance process. The agency’s procedure is that emergency grievances received about sexual assault and sexual harassment will be accepted and reviewed regardless of when the incident took place. The agency protocol is if the Facility Head or PREA Compliance Manager receives an emergency grievance alleging sexual abuse or sexual harassment by staff or sexual abuse by an inmate, the emergency grievance is immediately handled as a PREA complaint and investigated as such, to include assigning it to a PREA Investigator for further investigation. The emergency grievance process is immediately stopped, and an administrative investigation is immediately initiated. The regular grievance process is to serve as a vehicle to provide due process in certain situational incidents in a confinement setting. The emergency grievance is a method to receive PREA allegations in a written format and is used for reporting or investigating a sexual abuse or sexual harassment allegation in this facility. Therefore, an inmate can use the “emergency grievance” process as a means of reporting sexual abuse allegations. The inmates can also use the regular grievance process to oppose the finding of a sexual abuse investigation as part of their due process and administrative remedies.

<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) Memorandum of Understanding between VADOC and Action Alliance</li> <li>c) PREA Poster in both English and Spanish. The poster is labeled “Zero-Tolerance” and provides the contact information either by phone or mailing address to the Rape Crisis Center Advocate.</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1) Interviews with Random Inmates</li> </ul>

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

115.53 Provision (a)

VADOC PREA Operating Procedure 038.3 states in part that; “Inmates should contact their facility PREA Compliance Manager, Unit Manager, or Mental Health staff for information on accessing outside victim advocates for free emotional support services related to sexual abuse or may utilize the Sexual Abuse Hotline (#55), Option 2. The facility will enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.”

The agency has entered into a Memorandum of Agreement (MOU) with “Action Alliance” of Virginia to provide outside victim advocacy related to sexual abuse. Stated in the MOU, the VADOC has agreed to provide telephone numbers and mailing addresses to incarcerated victims who request sexual violence crisis intervention services, emotional support, and/or supportive counseling. The Action Alliance services are provided by mail, a phone hotline, and in person upon request. Action Alliance also provides sexual assault educational materials in areas accessible to inmates. The contact information for Action Alliance is located on the posters displayed in the housing units. The Auditor observed these posters during the facility tour. In addition, every inmate that is transferred to the NWC receives a Sexual Abuse Training Orientation. During this orientation, the inmate is once again provided contact information for the rape crisis center. This procedure is documented and acknowledged by signature from the inmate. The hotline phone call is free of charge to the inmate. Outgoing facility mail is not scanned, opened, or read. The crisis intervention services are confidential, and Action Alliance has no duty to report unless it involves a juvenile or vulnerable adult or if the inmate chooses to report.

During the on-site audit, the Auditor performed 20 inmate interviews. From those interviewed, 12 inmates were aware that services are available outside the facility for dealing with sexual abuse, 8 inmates indicated they were not sure or they were unaware of such services. Those inmates that were aware of the services also knew how to contact the crisis center using the phone. They were also cognizant that the communication with the crisis advocate is confidential. During the facility tour, the Auditor did initiate a call to the advocate from a housing unit and spoke to the call-taker about the services she would provide and how she would provide them to an inmate.

The Auditor did not interview any inmate that reported sexual abuse or sexual harassment at the facility. The facility reported no instances of inmates reporting sexual abuse or sexual harassment during this rating period.

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

115.53 Provision (b)

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

The NWC informs inmates through a pre-recorded phone message that their calls may be monitored before making every call. The inmate sexual abuse information orientation also informs the inmates that their calls are subject to monitoring and may be referred out for investigation. The MOU between the VADOC and Action Alliance states that; “The statewide hotline shall provide confidential crisis intervention and emotional support services related to all sexual abuse or assault victims.” The PREA Regional Analyst confirmed to the Auditor that the phone number provided to inmates for private advocate counseling to Action Alliance is not monitored or recorded. Therefore, communication between inmates and Action Alliance remains confidential when the inmate calls the toll-free number and not #55 to report an allegation of sexual abuse. In addition, confidentiality and recording privacy notification is posted on every Zero-Tolerance poster in every block.

The Auditor performed 20 inmate interviews. In those interviews, 16 inmates believed or assumed the victim advocacy service interaction and conversation would remain private and confidential. In addition, 4 inmates believed the phone conversations would be recorded.

The evidence collected for this provision shows that the facility does inform inmates of the extent to which their communications are being monitored. Therefore, through agency procedures, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.53 Provision (c)

VADOC PREA Operating Procedure 038.3 states in part that; “The DOC maintains a Memorandum of Understanding (MOU) with a community service provider who can provide inmates with access to free confidential emotional support services related to sexual abuse. A copy of this agreement is available from the PREA/ADA Supervisor.”

The facility has provided a copy of a MOU Contract Renewal between the VADOC and The Action Alliance Center of Virginia dated 09/01/2025 through 08/31/26, and the previous MOU extension date of 08/27/2024 through 08/31/25 as proof that confidential emotional support services are being provided to the inmates at the NWC during the entire rating period.

The evidence collected for this provision shows that the agency has entered into a Memorandum of Understanding Contract Renewal with an outside advocacy group to provide the inmates emotional support as it relates to sexual abuse. Therefore, through the signed MOU and personal observation the facility has demonstrated that it meets this provision.

#### Conclusion

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

	determined that the facility is fully compliant with this standard requiring the facility provide inmate access to outside confidential support services.
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<b>115.54</b>	<b>Third-party reporting</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) Third-Party Reporting form in English and Spanish</li> <li>c) VADOC Public Website</li> <li>d) Visitation Posters</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.54 Provision (a)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “Contact information on how to report sexual abuse and sexual harassment on behalf of an inmate is provided on the DOC public web site.”</p> <p>The NWC has the following information published on their VADOC agency website explaining how someone would report sexual abuse on behalf of an inmate currently housed at the NWC.</p> <p>Under the “Contact” tab from the VADOC website homepage the public can list their personal and contact information when sending a message. There is a drop-down window to select a topic which includes a PREA option. Then the public can articulate their message in the body of the document. Also, Under the PREA information it states the following:</p> <p>If you were or someone you know was sexually abused or sexual harassed while in the custody or under the supervision of the VADOC please:</p> <ul style="list-style-type: none"> <li>• Call the 24/7 confidential reporting hotline at 1-855-602-7001</li> <li>• Send an email to <a href="mailto:PREAGrievance@vadoc.virginia.gov">PREAGrievance@vadoc.virginia.gov</a></li> </ul> <p>Finally, if the public was to go to the “General Public” tab and select “Prison Rape Elimination Act Reports” there is an information banner that states, “REPORT ABUSE,</p>

	<p>if you or someone you know has been sexually abused or harassed under state custody or supervision, learn how to file a PREA complaint.”</p> <p>The words “file a PREA complaint” is a hyperlink to the Third Party-Reporting Form that the public can fill out and mail to a PO Box in Richmond, VA.</p> <p>During the post-audit phase, the Auditor used the Contact tab to send an email and mailed a Third-Party Reporting Form to test the effectiveness and efficiency of the agency’s third-party reporting procedures. Shortly afterward, the Auditor received an email acknowledging receipt of the submission.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to address third-party reports of sexual abuse or harassment both formally and publicly. Therefore, through document review and personal observations, the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring a method to receive third-party reports alleging sexual abuse and distribute that information publicly.</p>
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<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 730.2 Mental Health Services</li> <li>c) VADOC Operating Procedure 801.6 Inmate Services</li> <li>d) VADOC Operating Procedure 030.4 Special Investigative Unit</li> <li>e) VADOC Operating Procedure 720.2 Medical Screening</li> <li>f) VADOC Operating Procedure 038.1 Reporting Serious or Unusual Incidents</li> <li>g) Assistant Warden memorandum of record dated 02/28/2026 indicating no instances of reported allegations of sexual abuse or sexual harassment to medical or mental health, anonymous and by a 3rd Party during this audit period.</li> </ul>

Interviews:

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

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

115.61 Provision (a)

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

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

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

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

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

During the interview process, the Auditor interviewed 17 random staff. All 17 staff members stated that they must immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to their supervisor. The facility has reported no instances of a written, verbal, and third-party report of sexual abuse that was reported and investigated.

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

115.61 Provision (b)

VADOC PREA Operating Procedure 038.3 states in part that; “Apart from reporting to designated supervisors or officials, any information related to a sexual abuse report shall not be revealed to anyone other than to the extent necessary, as specified in

operating procedures, to make treatment, investigation, and other security and management decisions.” Operating Procedure 801.6 states in part that; “Staff must not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in operating procedures, to make treatment, investigation, and other security and management decisions.”

During the interview process, the Auditor interviewed 17 random staff. All 17 staff members stated that they must immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to their supervisor and must only relay information on a ‘need to know’ basis.

The facility has reported no instances involving verbal reports to staff or in writing.

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

#### 115.61 Provision (c)

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

The Auditor interviewed the Health Services Administrator (HSA). The HSA stated that they do notify the inmates of the duty to report sexual abuse allegations and the limitations surrounding confidentiality and this is documented in the electronic health records (EHR). She also stated that they have a duty to report all suspicions, knowledge, or information regarding sexual abuse. In addition, the HSA stated that she has experienced several situations where an inmate was brought to her at the infirmary to be examined for any type of serious medical issue and they personally reported sexual abuse to her. When interviewing the Mental Health Supervisor, he confirmed the same practices and informed the Auditor that he had experienced a situation where he met with an inmate who alleged to be sexually abused during that inmate’s 14-day follow-up meeting. He explained that he made the appropriate notification to both the facility investigator and medical personnel. It should be noted that this question is broad and may expand to one’s entire career and experiences. Therefore, the response by the mental health supervisor and HSA may not have occurred at the NWC or had occurred within this audit period. The question does show a level of knowledge and experience as to how to react in these circumstances.

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

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

#### 115.61 Provision (d)

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

When the Warden was interviewed, he stated that the NWC does not house any juveniles. The Warden indicated that if notified of such a situation where a vulnerable adult alleges being sexually abused, it is the OLES detective’s responsibility to make notification to the local Social Services Department. When interviewing the PREA Coordinator, she indicated that if the alleged victim is under the age of 18 or is an inmate or probationer/parolee receiving services from a Licensed VADOC Mental Health Program then the Facility Unit Head, or Administrative Duty Officer in their absence, is required to report immediately any alleged abuse to the local Department of Social Services.

The facility reported no instances where a referral was made to the Department of Social Services during this rating period.

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

#### 115.61 Provision (e)

VADOC Operating Procedure 030.4 states in part that; “All allegations of sexual abuse and sexual harassment, including third-party and anonymous reports must be immediately reported to the facility designated investigator who will conduct an initial investigation and will immediately notify the PREA Analyst of the allegation.”

The NWC has reported no instances of alleged sexual abuse or sexual harassment that have been received during this rating period.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all allegations of sexual abuse are turned over to a PREA designated investigator to initiate an inquiry. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.

#### Conclusion

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

	has determined that the facility is fully compliant with this standard requiring staff and agency reporting duties.
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<b>115.62</b>	<b>Agency protection duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 730.2 Mental Health Services</li> <li>c) VADOC Operating Procedure 830.6 Inmate Keep Separate Management</li> <li>d) Assistant Warden memorandum dated 03/31/2026</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1) Interviews with Random Staff</li> <li>2) Interview with Warden</li> <li>3) Interview with Agency Head</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.62 Provision (a)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; "When a staff member, volunteer, or contractor learns that an inmate is subject to a substantial risk of imminent sexual abuse, the individual must notify their supervisor, or Commander so that immediate action can be taken to protect the inmate." Also, Operating Procedure 730.2 states in part that; "The Psychology Associate will immediately consult with the Facility Unit Head or designee and recommend housing interventions or other immediate action to protect an inmate when it is determined that the inmate is subject to a substantial risk of imminent sexual abuse or is considered at risk for additional sexual victimization."</p> <p>Interviews were conducted with 12 random staff. Of those staff interviewed, all 17 staff members stated that they would immediately remove the inmate from the situation, block, or housing unit. In addition, they stated that they would immediately notify a supervisor. The Warden was also interviewed. In that interview, it was stated that the individual would be placed in a secure area. After that, an investigator would</p>

	<p>look into the issue, and he would call a multi-disciplinary team meeting to discuss how to address the situation. The Agency Head stated that the Unit Head must protect that inmate. The Agency Head indicated that the Warden has options when they learn that an inmate is subject to the risk of imminent sexual abuse. He stated that they can place the inmate into another housing unit or facility if necessary. Finally, the Agency Head explained that this process should take place within hours to protect that inmate.</p> <p>The facility reported no instances requiring immediate action be taken to protect an inmate from sexual abuse occurring during this rating period. The facility provided a memorandum of record dated 03/31/2026 indicating such.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to address when an inmate is subject to a substantial risk of sexual abuse and immediate action is taken to protect that inmate. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring agency protection duties.</p>
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<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 030.4 Special Investigation Unit</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1) Interview with Warden</li> <li>2) Interview with Agency Head</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.63 Provision (a), (b), and (c)</p>

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

The NWC reported no instances over the last twelve months where notification was made to another confinement facility about receiving an allegation of sexual abuse at their facility.

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

#### 115.63 Provision (d)

VADOC PREA Operating Procedure 038.3 states in part that; “The facility head or agency office that receives the notification is responsible for ensuring that the allegation is investigated in accordance with the requirements of the Prison Rape Elimination Act.” In addition, VADOC Operating Procedure 030.4 states in part that; “When the Facility Unit Head receives notification from another facility that an inmate was sexually abused while confined at that facility, they shall ensure that the allegation is investigated in accordance with the PREA Standards.”

The NWC reported no instances of receiving allegations of sexual abuse or sexual harassment from other confinement facilities during the past 12 months.

The evidence collected for this provision shows that the agency does have a policy in place to address when an allegation of sexual abuse is received from another agency. Also, they have policy in place to govern when and how to handle allegations received by their agency regarding sexual abuse allegations made that occurred at another outside confinement facility. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it does meet this provision.

#### Conclusion

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the reporting to other confinement facilities and investigating reports from other confinement facilities.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

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

Documents:

- a) VADOC PREA Operating Procedure 038.3
- b) VADOC Operating Procedure 030.4 Special Investigation Unit

Interviews:

- 1) Interview with Security Staff First Responders
- 2) Interviews Non-Security Staff
- 3) Interviews with Random Staff

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

115.64 Provision (a)

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

- a. All staff in the immediate area at the time of a serious incident will be identified and directed to record their observations in an Internal Incident Report.
- b. All inmates/probationers/parolees in the area will be identified, separated, and secured.
- c. Upon learning of an allegation that an inmate or CCAP probationer/parolee was sexually abused, the first security staff member to respond to the report will be required to:
  - i. Separate the alleged victim and abuser.
  - ii. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
  - iii. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
  - iv. If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that

could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

d. The OLES Agent is responsible for the management of evidence at the crime scene.”

The facility has reported no instances of alleged sexual abuse or sexual harassment over the last twelve months.

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

#### 115.64 Provision (b)

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

The facility reported no instances of alleged sexual abuse where the first responder was not a security staff member. When conducting interviews, 17 random staff were questioned about their responsibilities when confronted with an allegation of inmate sexual abuse. The responses were broken down in the following ways. As a side note, the Auditor has incorporated the staff’s multiple responses into the listed general topics.

- 16 staff members stated they would separate the victim and abuser
- 8 staff members would also contact a supervisor
- 2 staff members mentioned contacting medical personnel
- 3 staff members cited preserving evidence
- 1 staff member said they would secure the scene

In addition, the Auditor interviewed two contractors and one volunteer during this audit and all three non-security staff stated that they would immediately notify a security staff member.

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

Conclusion

	Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring staff first responder duties.
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115.65	Coordinated response
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ol style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Sexual Assault Response Checklist</li> <li>c) 2025 NCC-NWC PREA Coordinated Response Plan (PREA Plan)</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1) Interview with Warden</li> </ol> <p>Observations made during the on-site audit and document review.</p> <p>115.65 Provision (a)</p> <p>The VADOC Operating Procedure 038.3 states in part that; “Each Facility Unit Head or designee will develop a written plan to coordinate the actions taken by staff first responders, medical and mental health practitioners, Psychology Associates, investigators, and facility leadership in response to a sexual abuse incident.”</p> <p>The NWC provided an outlined coordinated response plan in the form of a three-page institutional plan for the facility to follow when confronted with an inmate sexual abuse incident. The document outlines the procedures/steps to follow and includes the actions of the security first responders, shift commander, facility investigator, medical &amp; mental health practitioners, Administration, and the PREA Compliance Manager. In an interview with the Warden, it was confirmed that the facility uses a coordinated response plan to follow when dealing with incidents of alleged inmate sexual abuse.</p> <p>The evidence collected for this provision shows that the facility has a coordinated response plan to follow during incidents of alleged inmate sexual abuse. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p>

	Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring a coordinated response.
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents</p> <ul style="list-style-type: none"> <li>a) Code of Virginia 40.1-57.2 (Prohibition against Collective Bargaining)</li> <li>b) VADOC PREA Coordinator Memorandum to all Wardens and Superintendents dated 11/01/2024 stating how the agency does not participate in collective bargaining and providing Code of Virginia regarding such.</li> <li>c) VADOC Operating Procedure 135.1 Standards of Conduct</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1) Interview with Agency Head</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.66 Provision (a)</p> <p>Employees in the Commonwealth of Virginia do not have collective bargaining rights per the Code of Virginia 40.1-57.2. There has been no collective bargaining agreement entered into since August 2012. In addition, the facility directed the Auditor to the Virginia State code that states; “No state, county, city, town, or like governmental officer, agent, or governing body is vested with or possesses any authority to recognize any labor union or other employee association as a bargaining agent of any public officers or employees, or to collectively bargain or enter into any collective bargaining contract with any such union or association or its agents with respect to any matter relating to them or their employment or service unless, in the case of a county, city, or town, such authority is provided for or permitted by a local ordinance or by a resolution.”</p> <p>The Auditor confirmed this during the interview with the Agency Head. In addition, the agency provided a memorandum from the agency’s PREA Coordinator which confirms that the NWC has not entered into or renewed any collective bargaining agreements, nor is it a part of a union.</p>

	<p>The evidence collected for this provision shows that this standard is not applicable to this facility or any confinement facility in the Commonwealth of Virginia if it chooses not to engage in collective bargaining. Therefore, through state law and conducted interviews, the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that this standard is not applicable to this facility.</p>
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<b>115.67 Agency protection against retaliation</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 135.2 Rules of Conduct</li> <li>c) VADOC Operating Procedure 135.1 Standards of Conduct</li> <li>d) VADOC Operating Procedure 075.7 Critical Incident Peer Support Team</li> <li>e) Retaliation Monitoring Forms</li> <li>f) Assistant Warden memorandum of record dated 02/28/2026, indicating the NWC did not have any reported allegations of sexual abuse during the audit period that warranted monitoring for retaliation.</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1) Interview with Agency Head</li> <li>2) Interview with Warden</li> <li>3) Interview with Staff Member charged with Monitoring Retaliation</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.67 Provision (a)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “All staff and inmates who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations will be protected from retaliation by other inmates</p>

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

The designated staff member charged with monitoring possible retaliation at the NWC is the PREA Intel Supervisor. The facility provided copies of retaliation monitoring forms as evidence in the PAQ. The facility has reported no instances of retaliation monitoring at the NWC during this rating period.

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

#### 115.67 Provision (b)

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

In his interview, the Warden stated that the facility may use several measures to protect inmates and staff from retaliation, including intelligence monitoring, transfers, disciplinary action, removal of staff from affected areas, and housing changes. The Agency Head similarly cited housing and facility transfers, removal of staff from their current posts, and 90 days of retaliation monitoring by staff. The staff member responsible for monitoring retaliation stated that he ensures the safety of the inmate being monitored and has conversations with the inmate. He also indicated that he makes rounds every day in the restricted housing unit.

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

#### 115.67 Provision (c)

VADOC PREA Operating Procedure 038.3 states in part that; “For at least 90 days after a report of sexual abuse, the PREA Compliance Manager or other designated facility staff will monitor the conduct and treatment of inmates and staff who reported sexual abuse, cooperated with a sexual abuse investigation, or were reported to have suffered sexual abuse for any changes that may indicate possible retaliation by inmates or staff. Staff will act promptly to address any such retaliation. Monitoring includes inmate disciplinary reports, housing or program changes, and negative staff

performance reviews or reassignments. The PREA Compliance Manager must continue monitoring beyond 90 days if the initial review shows an ongoing need.” Policy 075.7 further states, “Staff who fear retaliation for reporting or cooperating with investigations into sexual abuse or sexual harassment, and who need or request emotional support services, should be referred to the EAP.”

The Warden stated that when retaliation is suspected, the facility separates the victim from the alleged abuser and refers the matter for investigation. If the allegation is substantiated, inmates may face disciplinary action, criminal charges, or transfer to another facility. Staff involved may be reassigned or disciplined, up to and including termination, for violating standards of conduct. The staff member responsible for retaliation monitoring stated that individuals are monitored for at least 90 days or longer if needed. The Intel Supervisor stated that monitoring ends if the allegation is determined to be unfounded.

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

#### 115.67 Provision (d)

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

When conducting the interview with the staff member responsible for monitoring retaliation, he stated that he monitors the situation by checking disciplinary reports, changes in housing, and conversations with the inmate. He also stated that he would meet with the individuals involved, face-to-face once or twice, every thirty days in a 90-day period.

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

#### 115.67 Provision (e)

VADOC PREA Operating Procedure 038.3 states in part that; “If any other individual who cooperates with an investigation expresses a fear of retaliation, the Facility Unit Head must take appropriate measures to protect that individual against retaliation.”

When conducting the interview with the Agency Head, he stated that it depends on the alleged PREA complaint and that they have policies in place to protect those individuals. An investigation would be initiated and may be assigned to the Facility Investigator or an OLES Agent. The names of those involved are not released, and if they are an inmate and they wish to transfer to a different wing, institution, or moved into protective custody, then that would be an option. The Warden stated that the Intel Supervisor monitors those situations and that an inmate engaging in retaliation may be disciplined after the investigation is completed. The Warden also indicated

	<p>that if staff were engaged in retaliation, then the staff member would be dealt with using the disciplinary process.</p> <p>The evidence collected for this provision shows that the facility has procedures in place to address protection for other individuals who cooperate with PREA investigations from retaliation. Therefore, through written policy the facility has demonstrated that it meets this provision.</p> <p>115.67 Provision (f)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “The obligation to monitor for retaliation terminates if the investigation determines that the allegation is unfounded.” During the interview with the Intel Supervisor, he indicated that the retaliation monitoring would terminate if the investigation determined the alleged incident was unfounded.</p> <p>The evidence collected for this provision shows that the facility has procedures in place to address the agency’s obligation to continue monitoring for retaliation if the agency determines the allegation is unfounded. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring agency protection from retaliation.</p>
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 830.5 Transfers, Institution Reassignments</li> <li>b) VADOC Operating Procedure 425.4 Management of Bed and Cell Assignments</li> <li>c) VADOC Sexual Abuse/Sexual Harassment Available Alternatives Assessment</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1) Interview with Warden</li> <li>2) Staff who supervise Inmates in Segregated Housing</li> </ul>

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

115.68 Provision (a)

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

During this audit period, the facility reported that they had not assigned any inmate who alleged to have suffered sexual abuse to involuntary segregated housing, for the purpose of separating that inmate due to no other housing alternatives. During the facility tour, the Auditor noted that the NWC is not equipped with any restorative housing cells. Therefore, if separation was required then the inmate would be transferred to the NCC restorative housing unit.

The Warden stated during his interview, that only in a situation where there were no other possibilities available would an inmate be placed in restorative housing due to alleged sexual abuse victimization. He stated that, if necessary, immediate arrangements would be made to accommodate the alleged inmate-victim. The Warden further indicated if that were the case, the correctional facility would transfer the inmate to another correctional facility located in the state of Virginia.

The staff member working in a segregated housing unit in NCC was interviewed and indicated that if an inmate was transferred to RHU from the NWC due to either being a possible alleged victim or for protection from possible sexual abuse, they would still have access to all the privileges and programs as those inmates assigned to general population but would no longer be assigned to an outside work detail. If they limited access to these programs then they would have to document and explain why the opportunities were limited, the duration, and the reason in the logbook or denial activity. This information will be documented in CORIS. Finally, the staff member that supervises inmates in segregation was asked if the facility reviews the inmate's situation every thirty days to determine if the housing assignment is still needed. The

	<p>staff member that supervises inmates in segregation stated that, “The Multi-Disciplinary Team meets every three days and can transfer those inmates.” In addition, a Multi-disciplinary Team meets with the inmates three times within 30-days. The first meeting occurs within the first three business days, then 10-days later and finally at the 30-day mark.</p> <p>The facility reported that the facility had no instances during this rating period where an inmate was placed in restorative housing due to being a victim of sexual abuse.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that if an inmate is placed in segregation due to alleging sexual abuse then that inmate would retain all the privileges and opportunities that all other inmates are afforded. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring limitation on protective custody.</p>
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<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) VADOC Operating Procedure 030.4 Special Investigations Unit</li> <li>c) Investigations Matrix</li> <li>d) Code of Virginia 53.1-10 Powers and Duties of VADOC Director</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Warden</li> <li>2. Interview with Investigative Staff</li> <li>3. Interview with PREA Coordinator</li> <li>4. Interview with PREA Compliance Manager</li> </ul>

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

115.71 Provision (a)

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

During the interview with the investigative staff, the investigator stated that an administrative investigation is immediately initiated once notification is made, and if involves the hotline notification, that will occur within eight hours of the call. If an extension is necessary, then they must request that extension through the PREA Regional Analyst. The investigator suggested that an investigation would begin immediately once the allegation has been made. The investigator stated that anonymous and third-party reports are handled exactly in the same manner as all other sexual abuse allegations.

The facility stated no instances involving alleged sexual abuse or sexual harassment have been reported during this rating period.

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

115.71 Provision (b)

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

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

The NWC reported that the facility has 4 PREA certified Facility Investigators and VADOC has 44 OLES Special Agents. During the pre-audit phase, the Auditor requested training records for the PREA investigators. The facility provided that information and the Auditor verified that those investigators had received special sexual abuse training in a confinement setting. During the interview process, the OLES agent confirmed that he had received specialized training to conduct sexual abuse investigations in a confinement setting. The PREA Regional Analyst provided certificates of completion for both the OLES Special Agents and Facility Investigators

in the Pre-Audit Questionnaire. The Facility Investigator was also interviewed and indicated that she had taken the basic investigator course through the VADOC and the NIC course online.

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

#### 115.71 Provision (c)

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

When conducting the interview with the OLES Assistant Chief, he stated that usually the Facility Investigator determines what type of incident occurred and notifies the OLES agent. If the allegation looks as if it were criminal in nature, an OLES agent will respond to the facility to take over the investigation. An investigation plan would be created and witnesses located and interviewed. The agent would then begin answering the questions of who, what, when, where, and how. The agent would also collect both physical and circumstantial evidence. The OLES Assistant Chief stated that the agent would collect forensic evidence, crime scene sketches, photographs, Perk Kit, Buccal swab, and interview all witnesses.

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

#### 115.71 Provision (d)

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

There are no examples of investigative reports supporting compelled statements. When asked about compelling staff to answer questions, the OLES Assistant Chief explained that he would first complete the criminal investigation then consult with the Commonwealth Attorney before conducting compelled interviews in order to follow the Garrity Rule. However, if the administrative investigation needs to be completed then he will assign two different agents, one for criminal investigation and one for administrative investigation ensuring neither agent shared nor provided any information that was gathered in their investigations. The Facility Investigator indicated that she would not conduct compelled interviews and that would be the

OLES agent's decision.

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

115.71 Provision (e)

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

The OLES Assistant Chief was interviewed and stated that they treat every allegation the same and handle them in a serious manner. The Agent also stated that polygraphs are not used to determine truthfulness in allegations of sexual abuse. The Auditor did not interview any inmate that reported sexual abuse because the facility has reported no instances of sexual abuse or sexual harassment.

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

115.71 Provision (f)

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

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

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

115.71 Provision (g)

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

The OLES Assistant Chief confirmed that all criminal investigations should be documented and that the evidence located in the file would be the same as what is placed in the administrative file, except for a PERK test kit if the forensic medical examination was performed.

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

#### 115.71 Provision (h)

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

The OLES Assistant Chief indicated that all criminal cases are referred to the Commonwealth Attorney's Office for a decision regarding prosecution. The OLES Assistant Chief explained that he would refer the case for prosecution at the conclusion of the investigation.

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

#### 115.71 Provision (i)

VADOC PREA Operating Procedure 038.3 states in part that; "The Facility Unit Head must ensure that all case records associated with claims of sexual abuse or sexual harassment, including Incident Reports, investigative reports, inmate information, case disposition, medical and counseling evaluation findings, and recommendation for post-release treatment or counseling are retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years."

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

#### 115.71 Provision (j)

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

The OLES Assistant Chief was asked how he would proceed when a staff member alleged to have committed sexual abuse terminates employment prior to a completed investigation. The Chief explained that he would still follow through with the investigation regardless of if the staff member left employment or if the alleged victim was released from VADOC custody. He stated that he would attempt to provide an outcome to the investigation. The Facility Investigator indicated that she would only handle sexual harassment cases and if the inmate was transferred to another facility, then she would reach out to that facility and request assistance to complete her investigation.

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

#### 115.71 Provision (I)

VADOC Operating Procedure 030.4 states in part that; "Under direction of the Chief of Investigations, the OLES will cooperate with special committees or task force groups ordered by the Director to conduct review, assessment, or evaluation of disturbance, escape, and other serious incidents."

Interviews were conducted with the Warden, PREA Coordinator, PREA Compliance Manager, and Investigative Staff about this provision. The PREA Coordinator, PREA Compliance Manager, and Warden were asked who investigates criminal allegations of sexual abuse and how would the agency remain informed of the progress of a criminal sexual abuse case. The PREA Coordinator and Warden responded by stating that the agency's Office of Law Enforcement Services conducts all criminal investigations. The PREA Coordinator also indicated that the Facility Unit Heads and facility investigations assist OLES, as needed, keeping informed of the progress of the investigation. The PREA Compliance Manager stated that an OLES detective would conduct the investigation in all criminal cases. Finally, the OLES Assistant Chief was asked what role his unit plays in a criminal investigation from an outside agency. The Chief explained that no outside agency would investigate sexual abuse allegations in the VADOC. If for some reason police assistance was requested, then he would act in a supportive role and accommodate their requests.

The evidence collected for this provision shows that the agency has procedures in place to try and stay informed about ongoing criminal sexual abuse investigations amongst their own facilities. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.

#### Conclusion:

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

<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 135.2 Rules of conduct</li> <li>b) VADOC Operating Procedure 861.1 Inmate Discipline</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Investigative Staff</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.72 Provision (a)</p> <p>VADOC Operating Procedure 135.2 states in part that; “A preponderance of the evidence will be adequate in determining whether allegations of sexual abuse or sexual harassment are substantiated.”</p> <p>The OLES Agent was asked what evidence is required to substantiate allegations of sexual abuse. He stated that for a criminal case probable cause must be present. In an administrative investigation, the preponderance of the evidence or 51% of the evidence suggests one way or the other. When interviewing the Facility Investigator, she indicated that in determining if an allegation of sexual abuse or sexual harassment is substantiated one must use the preponderance of the evidence standard.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual assault is substantiated. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring evidentiary administrative investigations.</p>

<b>115.73</b>	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard

## Auditor Discussion

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

Documents:

- a) VADOC PREA Operating Procedure 038.3
- b) VADOC Operating Procedure 030.4 Special Investigations Unit
- c) Memorandum of record dated 3/31/2026 from Assistant Warden indicating no instances of notifications made regarding staff.
- d) Memorandum of record dated 3/31/2026 from Assistant Warden indicating no instances of notifications made regarding inmates.

Interviews:

- 1) Interview with Warden
- 2) Interview with Investigative Staff

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

115.73 Provision (a)

VADOC PREA Operating Procedure 038.3 states in part that; "Following an investigation into an inmate's allegation that they suffered sexual abuse or sexual harassment in a DOC facility, the inmate must be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded." In addition, VADOC Operating Procedure 030.4 states in part that; "Upon completion of the investigation, the inmate and CCAP probationer/parolee will be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. SIU OLES should report to the Facility Unit Head to inform the inmate or CCAP probationer/parolee as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded."

NWC reported that there were no investigations of alleged sexual abuse or sexual harassment during the last twelve months that were either completed or are still ongoing.

During the interview with the Facility Investigative staff, the investigator stated that once the investigation has been reviewed, a letter with the investigative findings is given to the inmate in all administrative cases by the PCM. When a PREA case is investigated by the OLES, the Facility Investigator stated that the OLES sends the notification in the mail to the facility and the PCM makes the notification to the inmate. When interviewing the Special Agent, he stated that a written notice with the findings is sent to the facility that is attached to the file so that the facility can provide notification to the inmate. He further explained that the OLES Supervisor will send the notification to the appropriate Warden. During the Warden interview, he

stated that, "Yes, notification is made to the inmate as to the findings of the allegation by the PCM."

The Auditor did not interview any inmate that had reported sexual abuse at this facility.

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

#### 115.73 Provision (b)

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

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

#### 115.73 Provision (c)

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

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

During this rating period, the facility reported no cases in which an inmate alleged sexual abuse by a staff member that required notification that the staff member was no longer assigned to the inmate's unit, no longer employed at the facility, indicted on a charge related to sexual abuse within the facility, or convicted of such a charge.

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

that it meets this provision.

#### 115.73 Provision (d)

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

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

The Assistant Warden provided a memorandum of record indicating there were no instances of sexual abuse committed by an inmate, against an inmate, in the past 12 months that required the facility to inform the victim that the alleged abuser has been indicted on a charge related to sexual abuse within the facility, or that the alleged abuser had been convicted on a charge related to sexual abuse within the facility.

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

#### 115.73 Provision (e)

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

The facility reported no instances of alleged sexual abuse or sexual harassment. Therefore, the Auditor did not review any administrative investigative files and no investigative findings’ and notification being made to an alleged inmate victim.

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

#### Conclusion:

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

<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<p data-bbox="256 188 959 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 340 1458 414">The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p data-bbox="256 456 432 490">Documents:</p> <ul style="list-style-type: none"> <li data-bbox="256 524 1078 557">a) VADOC Operating Procedure 135.2 Rules of Conduct</li> <li data-bbox="256 595 1134 629">b) VADOC Operating Procedure 135.1 Standard of Conduct</li> </ul> <p data-bbox="256 667 1198 701">Observations made during the on-site audit and document review.</p> <p data-bbox="256 739 544 772">115.76 Provision (a)</p> <p data-bbox="256 810 1474 1137">VADOC Operating Procedure 135.2 states in part that; “Any behavior of a sexual nature between employees, contract employees, or volunteers and inmates, inmate's immediate family, or a close friend of the inmate is prohibited. Behavior of a sexual nature includes sexual abuse, sexual assault, sexual harassment, physical conduct of a sexual nature, sexual obscenity, and conversations or correspondence of an emotional, romantic, or intimate nature. Sexual misconduct will be treated as a Group III offense subject to disciplinary sanctions up to and including termination under Operating Procedure, Standards of Conduct.”</p> <p data-bbox="256 1176 1437 1249">The facility has reported no instances of disciplinary sanctions for staff for violating the agency’s PREA operating procedures.</p> <p data-bbox="256 1288 1445 1451">The evidence collected for this provision shows that the agency has procedures in place to ensure staff will be subject to disciplinary actions for violating the agency’s sexual abuse and sexual harassment policies. Therefore, through written policy the facility has demonstrated that it meets this provision.</p> <p data-bbox="256 1489 544 1523">115.76 Provision (b)</p> <p data-bbox="256 1561 1474 1843">VADOC Operating Procedure 135.2 states in part that; “Any behavior of a sexual nature between employees, contract employees, or volunteers and inmates, inmate's immediate family, or a close friend of the inmate is prohibited. Behavior of a sexual nature includes sexual abuse, sexual assault, sexual harassment, physical conduct of a sexual nature, sexual obscenity, and conversations or correspondence of an emotional, romantic, or intimate nature. Termination will be the presumptive disciplinary sanction for employees who have engaged in sexual abuse.”</p> <p data-bbox="256 1881 1458 1955">The facility reported no disciplinary sanctions against staff for violating the agency’s PREA operating procedures.</p> <p data-bbox="256 1993 1422 2067">The evidence collected for this provision shows that the agency has procedures in place to ensure that termination should be the presumptive disciplinary action for</p>

staff who have engaged in sexual abuse. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

#### 115.76 Provision (c)

VADOC Operating Procedure 135.2 states in part that; “Disciplinary sanctions for violations of DOC policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) will be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.”

The facility has reported no substantiated case where a staff member was involved in sexual abuse or sexual harassment of an inmate during this rating period.

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

#### 115.76 Provision (d)

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

The facility has reported no substantiated case where a staff member was involved in sexual abuse or sexual harassment of an inmate during this rating period.

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

#### Conclusion:

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

**Auditor Overall Determination: Meets Standard**

**Auditor Discussion**

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

Documents:

- a) VADOC Operating Procedure 135.2 Rules of Conduct
- b) VADOC Operating Procedure 027.1 Volunteer and Internship
- c) Assistant Warden Memorandum dated 03/31/2026 regarding (no contractors or volunteers have been disciplined or terminated based on PREA policy violations or notifications made to law enforcement and/or relevant licensing bodies.)

Interviews:

- 1) Interview with Warden

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

115.77 Provision (a)

VADOC Operating Procedure 135.2 states in part that; "Any behavior of a sexual nature between employees, contract employees, or volunteers and inmates, inmate's immediate family, or a close friend of the inmate is prohibited. Behavior of a sexual nature includes sexual abuse, sexual assault, sexual harassment, physical conduct of a sexual nature, sexual obscenity, and conversations or correspondence of an emotional, romantic, or intimate nature. Any contractor or volunteer who engages in sexual abuse of inmates must be prohibited from contact with inmates and must be reported to any relevant licensing bodies by the DOC PREA Coordinator, and to law enforcement agencies, unless the activity was clearly not criminal."

The facility provided a memorandum authored by the Assistant Warden indicating that Nottoway Correctional Center and Work Center did not have any allegations involving contractors or volunteers, and therefore had no referrals to law enforcement, no referrals to licensing bodies, and no remedial measures were necessary.

The evidence collected for this provision shows that the agency has procedures in place to ensure volunteers or contractors who engage in sexual abuse do not have contact with inmates. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

115.77 Provision (b)

VADOC Operating procedure 135.2 states in part that; "The DOC will take appropriate remedial measures and will consider whether to prohibit further contact with inmates, in the case of any other violation of DOC sexual abuse or sexual harassment policies

by a contractor or volunteer.” In addition, the facility offered VADOC Operating procedure 027.1 which states in part; “Possible grounds for intern dismissal include failure to comply with DOC procedures, federal or state laws, or unit rules. Every effort should be made to provide appropriate internship training and supervision to help avoid violations and possible termination.”

The facility provided a memorandum from Assistant Warden indicating that the Nottoway Correctional Center and Work Center did not have any allegations involving contractors or volunteers, and therefore had no referrals to law enforcement, no referrals to licensing bodies, and no remedial measures were necessary.

The Auditor interviewed the Warden, and he indicated that if a contractor or volunteer were accused of violating the agency’s sexual abuse or sexual harassment policy then that individual would be informed that they were not allowed to enter the facility, or any facility operated by the VADOC, until the investigation was complete. The case would then be turned over to the OLES to investigate.

The evidence collected for this provision shows that the agency has procedures in place to address actions to be taken when a contractor or volunteer violates the agency’s PREA policies but does not engage in the sexual abuse of an inmate. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

Conclusion:

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

115.78	Disciplinary sanctions for inmates
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 861.1 Inmate Discipline</li> <li>b) VADOC PREA Operating Procedure 038.3</li> <li>c) VADOC Operating Procedure 820.1</li> <li>d) VADOC Operating Procedure 830.3</li> <li>e) VADOC Operating Procedure 861.1 Attachment 2 Category I Code of Offences</li> </ul>

f) Memorandum of record written by the Assistant Warden indicating (Nottoway Correctional Center/Work Center did not have any substantiated incidents of sexual abuse that warranted disciplinary action against an alleged inmate perpetrator for violation of Operating Procedure 861.1, Inmate Discipline.)

Interviews:

- 1) Interview with Warden
- 2) Medical & Mental Health Staff

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

115.78 Provision (a)

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

Ø An administrative finding that the inmate engaged in inmate-on-inmate sexual abuse

Ø or following a criminal finding of guilt for inmate-on-inmate sexual abuse."

The facility has reported that there have been no inmate-on-inmate sexual abuse incidents at the facility that were substantiated during this audit period.

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

115.78 Provision (b) & (c)

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

- a. Clinical impressions related to the disciplinary offense
- b. Likelihood of understanding the acceptance of a Penalty Offer
- c. Likelihood of effectively participating in the hearing

d. Potential impact of Restorative Housing on inmate's cognitive/mental condition

e. Provide relevant comments and/or recommendations

f. The OIC will ensure that an 'Inmate Mental Health Assessment' is completed and forwarded to the Hearings Officer along with the Disciplinary Offense Report."

When conducting the interview with the Warden, he was asked what disciplinary sanctions inmates are subject to following an investigation that found the inmate had engaged in inmate-on-inmate sexual abuse. In addition, is mental illness considered when determining sanctions? The Warden stated that the inmate could face additional criminal charges, institutional charges, and potentially lose accrued good time credit. The Warden also stated that the mental illness part would have to be determined by the mental health professionals to decide if the inmate did not know what he was doing.

The evidence shows that the agency has procedures to discipline inmates found responsible for inmate-on-inmate sexual abuse. Based on policy, document review, and interviews, the facility has demonstrated compliance with these provisions.

115.78 Provision (d)

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

When conducting interviews with the Medical & Mental Health practitioners, they were asked if the facility offers therapy, counseling, or other intervention services designed to address and correct the underlying reasons for sexual abuse. The HSA stated that she believes this service is offered and available through the mental health services. The Mental Health practitioner stated that, "Yes, they provide these services through the Sex Offender Awareness Program (SOAP) and that they must complete the classes/program." Both health professionals were asked if these services require an inmate's participation as a condition of accessing programming and other benefits. The HSA indicated that she was not sure, but thought inmates could refuse, however it's highly recommended. The Mental Health practitioner stated that, "They must complete the classes/program."

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

115.78 Provision (e)

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

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

#### 115.78 Provision (f)

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

The NWC reported no instances where the inmate was disciplined for making a false sexual abuse or sexual harassment allegation during this rating period.

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

#### 115.78 Provision (g)

VADOC PREA Operating Procedure 038.3 states in part that; "Consensual sexual activity among inmates is prohibited. Inmates who engage in this type of activity will be subject to disciplinary action in accordance with Operating Procedure 861.1 Inmate Discipline."

The evidence collected for this provision shows that the agency has procedures in place to prohibit any type of sexual activity between inmates and will discipline inmates for those activities. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

#### Recommendation:

The Auditor is recommending that the agency add language to their PREA Operating Procedure 038.3 that would address when disciplining an inmate for engaging in consensual sexual activity, the agency may not deem such activity to constitute

	<p>sexual abuse.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring disciplinary sanction for inmates.</p>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 730.2 Mental Health Services</li> <li>b) VADOC Operating Procedure 425.4 Management of Bed &amp; Cell Assignments</li> <li>c) VADOC Operating Procedure 701.3 Health Records</li> <li>d) VADOC Operating Procedure 810.1 Inmate Reception &amp; Classification</li> <li>e) Consent for Release of Confidential Health and/or Mental Health Information Form</li> <li>f) PREA Mental Health Clinician Follow-up notes and Classification Assessment forms</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1) Interview with Staff Responsible for Risk Screening</li> <li>2) Interviews with Medical &amp; Mental Health Staff</li> <li>3) Interviews with Inmates who disclose Sexual Victimization during Risk Screening</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.81 Provision (a)(c)</p> <p>VADOC Operating Procedure 730.2 states in part that; “In institutions, within 14 days of completion of the Classification Assessment, the Psychology Associate will notify those inmates, identified as High-Risk Sexual Aggressor (HRSA) or High-Risk Sexual Victim (HRSV), of the availability for a follow-up meeting with a mental health practitioner and inform the inmate of available relevant treatment and programming.</p>

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

The Auditor did not interview any inmates who reported sexual abuse at the facility, because the facility stated that it received no allegations of sexual abuse or sexual harassment during this rating period.

When conducting the interview with the staff member who is responsible for risk screening, she stated that if an inmate discloses prior sexual victimization during the risk screening process then an email is sent to the mental health professionals for a follow-up meeting that usually occurs within one or two days. The staff member who is responsible for risk screening also indicated that the Warden and Assistant Warden at the NWC would also receive the same email. If the inmate refuses a follow-up meeting, then that information is documented in the notes section of the screening form in CORIS.

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

#### 115.81 Provision (b)

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

Associate Follow-Up.”

During the interview, the staff member responsible for risk screening stated that when an inmate reports prior sexual abuse perpetration during screening, a follow-up meeting with a mental health professional is scheduled and the inmate is usually seen within one to two days. The facility has indicated that no inmates reported prior sexual perpetration during this rating period.

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

115.81 Provision (d)

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

All inmate sexual victimization or abusiveness information is collected and/or stored in the VACORIS jail management system that only staff with a need-to-know status have permissions related to their job by way of sign on procedures. Also, medical staff store information in their electronic medical records that only medical and mental health personnel have access to.

The evidence collected for this provision shows that the agency has procedures in place to ensure that reported sexual victimization that occurred in a confinement setting is strictly limited to selected professionals. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

115.81 Provision (e)

VADOC Operating Procedure 701.3 states in part that; “Medical and mental health practitioners must obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.”

Medical and mental health staff were asked whether they obtain informed consent from inmates before reporting prior sexual victimization and how they would handle cases involving inmates under age 18. The HSA stated that staff obtain consent and document it on a consent-to-release form. She also noted that the facility does not

	<p>house juveniles and therefore has not encountered that situation. The mental health professional likewise stated that NWC does not house juveniles but added that he has a duty to report under Virginia mandatory reporting laws. He further explained that, if the abuse involved a vulnerable adult, he would contact Social Services Adult Protective Services.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure informed consent is obtained from inmates before medical and mental health staff can report those incidents of sexual victimization that did not occur in a confinement setting. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring a medical and mental health screening, history of sexual abuse.</p>
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<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC Operating Procedure 720.7 Emergency Medical Equipment &amp; Care</li> <li>b) VADOC Operating Procedure 720.4 Co-Payment for Health Care Services</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Staff Responsible for Risk Screening</li> <li>2. Interviews with Medical &amp; Mental Health Staff</li> <li>3. Interview with Staff First Responder</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.82 Provision (a)</p> <p>VADOC Operating Procedure 720.7 states in part that; “Inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.”</p>

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

The Auditor did not interview any inmates who reported sexual abuse at the facility because the facility stated that it received no allegations of sexual abuse or sexual harassment during this rating period.

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

#### 115.82 Provision (b)

VADOC Operating Procedure 720.7 states in part that; "If no qualified medical and mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders will take preliminary steps to protect the inmate victim and will immediately notify the appropriate medical and mental health practitioners."

When the Auditor spoke with the PREA Regional Analyst, he advised the Auditor that nursing staff are assigned to the facility 24 hours a day, seven days a week. Therefore, medical attention is always available at NWC.

Interviews were conducted with 17 random staff, and of those staff interviewed, all 17 staff members stated that they would immediately remove the inmate from the situation or housing unit. When interviewing the first responder he explained that he would make the scene safe, report to a supervisor, preserve evidence, contact medical personnel, write a report, and protect the crime scene.

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

#### 115.82 Provision (c)

VADOC Operating Procedure 720.7 states in part that; "Inmate victims of sexual abuse while incarcerated will be offered timely information about and timely access

	<p>to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.”</p> <p>The NWC utilizes the services provided by the Virginia Commonwealth University Medical Center to provide these services. The interview with the SANE Nurse specifically outlined that the Nurse conducting the forensic medical examination would offer information, timely access to emergency contraception, and sexually transmitted infections prophylaxis.</p> <p>When conducting interviews with medical and mental health staff it was indicated that, “Yes, the SANE Nurse at VCU Medical Center would offer those services.”</p> <p>The NWC reported no incidents requiring the services of a SANE nurse to perform a medical forensic examination during this rating period.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates are offered information and access to emergency contraception and sexually transmitted infections prophylaxis after allegations of sexual abuse. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>115.82 Provision (d)</p> <p>VADOC Operating Procedure 720.7 states in part that; “Treatment services will be provided to the victim without financial cost and regardless of whether the inmate victim names the abuser or cooperates with any investigation arising out of the incident.”</p> <p>The Auditor did not interview any inmate that reported sexual abuse at the facility because the NWC indicated that they did not receive any allegations of sexual abuse or sexual harassment during this rating period.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates that report sexual abuse do not incur any financial responsibility due to a sexual abuse allegation. Therefore, through written policy the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring access to emergency medical and mental health services.</p>
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<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

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

Documents:

- a) VADOC Operating Procedure 720.7 Emergency Medical Equipment and Care
- b) VADOC Operating Procedure 730.2 Mental Health Services
- c) Memorandum dated 03/01/2023 by the Deputy Director of Administration rescinding Co-Payments for Healthcare Services

Interviews:

- 1) Interviews with Medical & Mental Health Staff
- 2) Inmates who reported sexual abuse

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

115.83 Provision (a) & (b)

VADOC Operating Procedure 720.7 states in part that; “The facility will offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The evaluation and treatment of such inmate victims will include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. The facility will provide such inmate victims with medical and mental health services consistent with the community level of care.”

The interviews conducted by the Auditor revealed that medical staff would not take the lead on treatment and would consult with the SANE Nurse or an attending physician. The HSA stated that when the inmate returns from the forensic medical examination an appointment would be scheduled with the facility provider to discuss follow-up and lab work. Her staff’s job is the continuity of care which would involve any follow-up blood work and discussions with the discharge nurse. The mental health professional stated that based on the inmate, they would provide follow-up services, therapy, and access to medications. If the inmate was to be released, arrangements could be made with the local Community Service Board (CSB) to provide mental health services if the inmate requested.

The Auditor did not interview any inmates who reported sexual abuse at the facility because the facility stated that it received no allegations of sexual abuse or sexual harassment during this rating period.

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

document review, and interviews conducted, the facility has demonstrated that it meets these provisions.

#### 115.83 Provision (c)

VADOC employs medical professionals who are licensed and registered to practice in Virginia, and they must maintain those credentials as a condition of employment. Mental health professionals are employed by the Virginia Department of Corrections. For this standard, the agency's mental health professional stated, "Yes, the services offered are consistent with those in the community." Accordingly, the medical and mental health services provided by NWC are consistent with the community standard of care.

The Auditor interviewed both medical and mental health staff. In both interviews, staff stated that the medical services provided are consistent with those available in the community.

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

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

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

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

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

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

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

	<p>The Auditor did not interview any inmates who reported sexual abuse at the facility because the facility stated that it received no allegations of sexual abuse or sexual harassment during this rating period.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that inmates that are victims of sexual abuse are offered tests for sexually transmitted infections as appropriate. Therefore, through written policy, the facility has demonstrated that it meets this provision.</p> <p>115.83 Provision (h)</p> <p>VADOC Operating Procedure 730.2 states in part that; “Psychology Associates will attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate. Other than routine monitoring (e.g., in Restorative Housing Unit), mental health and wellness services are not automatically offered to the alleged/founded perpetrator of the sexual assault. If mental health services are provided, e.g., if the alleged/founded perpetrator requests such services, a Psychology Associate other than the Psychology Associate who assessed and/or provided services to the alleged/founded victim of the assault should follow up.”</p> <p>During the interview with the mental health professional, he was asked if they would conduct an interview with all inmate-on-inmate abusers and offer treatment, if appropriate. He was also asked about when these interviews would be conducted. The mental health professional indicated that, “Yes, interviews would be conducted as soon as he was notified but within 60-days.” The HSA was interviewed and stated that this responsibility would fall on the mental health staff.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning such abuse history. Therefore, through written policy the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring ongoing medical and mental health care for sexual abuse victims and abusers.</p>
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<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) VADOC PREA Operating Procedure 038.3
- b) VADOC Operating Procedure 038.1 Reporting Serious Incidents

Interviews:

- 1) Interview with Warden
- 2) Interview with the PREA Coordinator
- 3) Interview with the Incident Review Team Member

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

115.86 Provision (a) & (b)

VADOC Operating Procedure 038.1 states in part that; "A sexual abuse incident review (PREA Report of Incident Review) shall be conducted at the conclusion of every sexual abuse investigation including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. The review for sexual abuse and sexual harassment shall be conducted within 14 days of completion of the investigation on a PREA Report of Incident Review. The PREA Compliance Manager will forward the PREA Report of Incident Review to the Regional PREA Analyst for review and approval, prior to submission to the Regional Office."

The NWC has reported that no Sexual Abuse Incident Reviews have been performed over the last twelve months.

The evidence collected for these provisions shows that the agency has procedures in place to ensure that an incident review is conducted after every sexual abuse investigation excluding those that are unfounded. In addition, the incident review shall occur within 14 days of the conclusion of the investigation. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

115.86 Provision (c)

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

In the interview with the Warden, he was asked who is part of the sexual abuse incident review team? The Warden stated that the team is made up of the Warden, Investigator, PCM, medical and mental health staff, and Unit Manager.

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

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

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

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

- i. Was the incident or allegation motivated by race, ethnicity, gender identity; lesbian, gay, bisexual, transgender or intersex identification, status, or perceived status; or gang affiliation, or was it motivated or otherwise caused by other group dynamics at the facility.
- ii. Assess the adequacy of staffing in that area during different shifts.
- iii. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.
- iv. Determine what can be done to limit the occurrence or reduce the severity of future incidents; consider whether there was a proper application of current procedure, practice, staffing and/or training; or whether there is a need to revise the current procedure, practice, staffing, and/or training.
- v. Examine the area where the incident allegedly occurred to assess whether physical barriers in the area may have contributed to the incident.
- vi. Develop an Action Plan to limit or mitigate similar future incidents. The unit shall implement the recommendations for improvement or shall document its reasons for not doing so.”

The Sexual Abuse Incident Review document form that was reviewed by the Auditor have those factors listed on the form to specifically discuss.

Interviews with the Warden, Incident Review Team Member, and PREA Compliance Manager all revealed that these topics are considered and discussed during the review. The facility forwards all incident review documentation to the PREA Regional Analyst for review.

The evidence collected for this provision shows that the agency has procedures in place to ensure that the incident review team considers all the above-listed criteria when convening their meetings. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.

#### Conclusion:

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

**115.87 Data collection**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

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

Documents:

- a) VADOC PREA Operating Procedure 038.3
- b) VADOC 2014 through 2025 PREA Annual Reports
- c) 2014 through 2024 Bureau of Justice Statistics Surveys

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

115.87 Provision (a)

VADOC Operating Procedure 038.3 states in part that; “The DOC collects accurate, uniform data on every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.”

The facility has provided the last twelve years’ worth of PREA aggregated data in their PREA annual reports and the eleven years’ worth of Bureau of Justice Statistics surveys. The 2025 PREA annual report contains comparisons of the current year’s data and corrective actions from the previous years’ assessment of the agency’s progress.

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

115.87 Provision (b)

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

The facility has provided the last four years’ worth of PREA aggregated data in their annual reports. The 2025 PREA annual report contains comparisons of the current year’s data and corrective actions from the previous three years’ assessment of the agency’s progress.

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

115.87 Provision (c)

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

The facility has provided the 2024 PREA aggregated data in their BJS Survey of Sexual Victimization forms provided to the Department of Justice.

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

115.87 Provision (d)

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

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

115.87 Provision (e)

VADOC Operating Procedure 038.3 states in part that; “Incident-based and aggregated data is collected from every private facility with which with the DOC contracts for the confinement of inmates.”

The facility has provided the last four years’ worth of PREA aggregated data in their annual reports. The 2025 PREA annual report contains comparisons of the current year’s data and corrective actions from the previous four years’ assessment of the agency’s progress. In addition, the facility has provided copies of their agency’s 2024 BJS Survey of Sexual Victimization forms provided to the Department of Justice. The agency collects all the data from each correctional facility in order to develop the agency’s annual report.

The evidence collected for this provision shows that the agency has procedures in place to obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

115.87 Provision (f)

	<p>VADOC PREA Operating Procedure 038.3 states in part that; “Upon request, all such data from the previous calendar year will be provided to the Department of Justice no later than June 30.”</p> <p>The facility has provided copies of their agency’s 2024 BJS Survey of Sexual Victimization forms provided to the Department of Justice.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to submit their annual SSV report to the Department of Justice. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring Data Collection.</p>
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<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) VADOC PREA Operating Procedure 038.3</li> <li>b) Copies of the VADOC 2014 through 2025 PREA Annual Reports</li> <li>c) The VADOC Official Website</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1) Interview with Agency Head</li> <li>2) Interview with PREA Coordinator</li> <li>3) Interview with PREA Compliance Manager</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.88 Provision (a)</p> <p>VADOC PREA Operating Procedure 038.3 states in part that; “The DOC reviews collected and aggregated data in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training,</p>

by:

a.) Identifying problem areas.

b.) Taking corrective action on an ongoing basis.

c.) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.”

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

Interviews conducted with the Agency Head and PREA Coordinator confirmed that an annual report is generated to assess and improve the effectiveness of the agency’s prevention, detection, and response to sexual abuse. The PREA Compliance Manager indicated that the report is used for identifying outliers, specific trends, or problems that may need to be addressed.

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

#### 115.88 Provision (b)

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

The VADOC PREA Annual reports are compared by institution and region. This includes a comparison of the current year’s data and corrective actions with those from prior years and provides an assessment of the agency’s progress in addressing sexual abuse. The 2025 VADOC PREA Annual Report makes comparisons between Inmate-on-Inmate Allegations of Sexual Abuse from 2022 to 2025 and Staff Sexual Misconduct from 2022 to 2025.

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

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

#### 115.88 Provision (c)

VADOC PREA Operating Procedure 038.3 states in part that; “The report must be

made readily available to the public through the DOC Public website. The PREA/ADA Supervisor and the Director must review and approve the annual report before publicly posting it.”

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

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

#### 115.88 Provision (d)

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

The facility reported that the only information redacted from the annual reports are the names of the individuals involved and that there was no material redacted. The PREA Coordinator stated, “VADOC redacts specific material from the reports, such as names and personal identifiable information, when publication would present a clear and specific threat to the safety and security of a facility.”

The evidence collected for this provision shows that the agency has procedures in place to redact only specific information from the PREA Annual Report. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### Conclusion:

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

115.89	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	The PREA Auditor gathered, analyzed, and retained the following evidence related to

this standard:

Documents:

- a) VADOC PREA Operating Procedure 038.3
- b) VADOC 2014-2025 PREA Annual Reports
- c) The VADOC Official Website

Interviews:

- 1) Interview with PREA Coordinator

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

115.89 Provision (a)

VADOC PREA Operating Procedure 038.3 states in part that; "Staff must securely retain all data collected on allegations of sexual abuse at DOC facilities."

The PREA Coordinator was interviewed and asked how the agency ensures that the data collected is securely retained. The PREA Coordinator stated that, "The data is entered and the investigative reports are retained in VADOC's PREA Survey database which is only accessible by VADOC's PREA Unit."

The evidence collected for this provision shows that the agency has a procedure in place to secure collected data regarding sexual abuse allegations. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

115.89 Provision (b) &(c)

VADOC PREA Operating Procedure 038.3 states in part that; "Staff will make sexual abuse aggregated data, from DOC facilities and contract facilities readily available to the public at least annually through the DOC Public website. Before making aggregated sexual abuse data publicly available, all personal identifiers must be removed."

The agency has posted the 2014 through 2025 PREA Annual Reports on their website. This is a public website that provides access to this report. This report can be viewed by going to the agency's website.

The evidence collected for this provision shows that the agency has procedures in place to make the PREA Annual Report public by posting it to their website and that all personal identifiers are redacted prior to publication. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

115.89 Provision (d)

VADOC PREA Operating Procedure 038.3 states in part that; "Staff must maintain all

	<p>sexual abuse data for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.”</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure sexual abuse data is retained for at least 10 years after the date of the initial collection. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring data storage, publication, and destruction.</p>
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<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>PREA Standard 115.401 (a)(b)(h)(i)(m)(n) Frequency and Scope of Audits</p> <p>This is Nottoway Work Center’s third PREA Audit. The initial audit was conducted in October of 2020. In 2023, the facility met 45 PREA standards, exceeded 0 standards, and 0 standards were not met. Each facility, under the direct control of the Virginia Department of Corrections, had been audited at least once during the previous three-year audit cycle. During the previous three-year audit cycle, the Virginia Department of Corrections ensured that at least one-third of its facilities were audited each year. This is the first year of this audit cycle.</p> <p>The Auditor was given full access and observed all areas of the facility without obstruction. The Auditor received all requested documents or copies of relevant materials. The Auditor was also permitted to conduct all interviews in a private setting with both inmates and staff. Finally, the inmates were permitted to send the Auditor confidential correspondence in the same manner that legal mail would be handled. This topic was discussed and documented prior to the audit. The Auditor did not receive any NWC inmate correspondence during this PREA audit.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	PREA Standard 115.403 (f) Audit Contents and Findings

<p>The Nottoway Work Center, which is a correctional facility operated by the Virginia Department of Corrections, has posted the facility's 2020 through 2023 PREA Auditor's Summary report on their agency website. The agency publishes all facility PREA audits on their website and schedules one-third of their facilities to be PREA audited every three years. Therefore, evidence would suggest that this would happen once again after receiving the 2026 PREA audit final report for the NWC.</p>
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<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

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

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

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

	facility does not have female inmates.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.16 (a)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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 with inmates with disabilities including inmates who: Have intellectual disabilities?	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: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	

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

	consent or refuse?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b) Hiring and promotion decisions</b>		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c) Hiring and promotion decisions</b>		
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d) Hiring and promotion decisions</b>		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e) Hiring and promotion decisions</b>		
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
<b>115.17 (f) Hiring and promotion decisions</b>		
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have	yes

	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?	
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the	yes

	agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na

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

	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the agency train all employees who may have contact with	yes

	inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	
<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	

	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
<b>115.33 (d)</b>	<b>Inmate education</b>	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes

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

	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or 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
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental	yes

	health care practitioners who work regularly in its facilities.)	
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following	yes

	criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	
	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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	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
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
<b>115.42 (a)</b>	<b>Use of screening information</b>	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of	yes

	being sexually abusive, to inform: Education Assignments?	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
<b>115.43 (b)</b>	<b>Protective Custody</b>	
	Do inmates who are placed in segregated housing because they	yes

	are at high risk of sexual victimization have access to: Programs to the extent possible?	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
<b>115.43 (c)</b>	<b>Protective Custody</b>	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d)</b>	<b>Protective Custody</b>	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation	yes

	can be arranged?	
<b>115.43 (e)</b>	<b>Protective Custody</b>	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
<b>115.51 (a)</b>	<b>Inmate reporting</b>	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
<b>115.51 (b)</b>	<b>Inmate reporting</b>	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain 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.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	

	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? 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.	yes
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from 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
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision,	yes

	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.)	
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	
	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?	yes

	(N/A if agency is exempt from this standard.)	
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, 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.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of	yes

	understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of	yes

	confidentiality, at the initiation of services?	
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report	yes

	required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate	yes

	with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of 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
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations 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
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	

	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has	yes

	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?	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d) Reporting to inmates</b>		
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually 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
<b>115.73 (e) Reporting to inmates</b>		
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a) Disciplinary sanctions for staff</b>		
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b) Disciplinary sanctions for staff</b>		
	Is termination the presumptive disciplinary sanction for staff who	yes

	have engaged in sexual abuse?	
<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	

	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	

	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph §	na

	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.)	
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	

	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
<b>115.87 (d)</b>	<b>Data collection</b>	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports,	yes

	investigation files, and sexual abuse incident reviews?	
<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
<b>115.87 (f)</b>	<b>Data collection</b>	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant 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
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted	yes

	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?	
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by	na

	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.)	
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes