

PREA Facility Audit Report: Final

Name of Facility: Patrick Henry Correctional Unit

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 11/13/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	☐
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	☐
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.	☐
Auditor Full Name as Signed: Chris Sweney	Date of Signature: 11/13/2024

AUDITOR INFORMATION	
Auditor name:	Sweney, Chris
Email:	csweney.prea@gmail.com
Start Date of On-Site Audit:	10/08/2024
End Date of On-Site Audit:	10/09/2024

FACILITY INFORMATION	
Facility name:	Patrick Henry Correctional Unit
Facility physical address:	18155 A L Philpott Highway, Ridgeway, Virginia - 24148
Facility mailing address:	

Primary Contact

Name:	Bridget Grant
Email Address:	ridget.grant@vadoc.virginia.gov
Telephone Number:	(276) 957-7795

Warden/Jail Administrator/Sheriff/Director	
Name:	Bridget Grant
Email Address:	bridget.grant@vadoc.virginia.gov
Telephone Number:	(276) 957-7795

Facility PREA Compliance Manager	
Name:	Dion Yellock
Email Address:	dion.yellock@vadoc.virginia.gov
Telephone Number:	O: 276-957-2234

Facility Health Service Administrator On-site	
Name:	Carrie Mayes
Email Address:	carrie.mayes@vadoc.virginia.gov
Telephone Number:	276) 957-7813

Facility Characteristics	
Designed facility capacity:	100
Current population of facility:	45
Average daily population for the past 12 months:	53
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males

Age range of population:	20-62
Facility security levels/inmate custody levels:	1
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	56
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	15
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	3

AGENCY INFORMATION

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

Agency Chief Executive Officer Information:

Name:	Chadwick Dotson
Email Address:	Chadwick.Dotson@vadoc.virginia.gov
Telephone Number:	804-887-8080

Agency-Wide PREA Coordinator Information

Name:	Tammy Barbetto	Email Address:	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:

3

- 115.31 - Employee training
- 115.33 - Inmate education
- 115.41 - Screening for risk of victimization and abusiveness

Number of standards met:

42

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-10-08
2. End date of the onsite portion of the audit:	2024-10-09

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?	☒ Yes ☐ No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Virginia Sexual and Domestic Violence Action Alliance - (804) 377-0335, Hotline - (808) 838-8238, (#55 from inmate phones) Website - https://vsdvalliance.org/contact/

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	100
15. Average daily population for the past 12 months:	53
16. Number of inmate/resident/detainee housing units:	2
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☐ Yes ☒ No ☐ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	43
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	1
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	2
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	1

44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	1
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	56
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	3

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	15
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	5
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☒ Age ☒ Race ☐ Ethnicity (e.g., Hispanic, Non-Hispanic) ☐ Length of time in the facility ☒ Housing assignment ☐ Gender ☐ Other ☐ None

55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The auditor conducted interviews with random and targeted inmates. The in-house inmate population on the first day of the onsite review was 43. All reasonable efforts were made to conduct the required number of targeted inmate interviews. The auditor selected additional inmates from the available targeted populations and increased the number of random inmate interviews to ensure that the appropriate numbers of inmates were interviewed. There was a total of 10 formal inmate interviews conducted. The auditor selected inmates randomly by using a full roster provided at the beginning of the on-site review. Interviews were conducted with at least one inmate for each living area of the facility.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	5

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".

60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

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).	The facility reported no Inmates who are Blind or have low vision. This was verified during the tour of the facility and confirmed during staff and inmate interviews.
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	The facility reported no Inmates who are Deaf or hard-of-hearing. This was verified during the tour of the facility and confirmed during staff and inmate interviews.
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

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).	The facility reported no Inmates who are Limited English Proficient (LEP). This was verified during the tour of the facility and confirmed during staff and inmate interviews.
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	The facility reported no Inmates who identify as transgender or intersex. This was verified during the tour of the facility and confirmed during staff and inmate interviews.
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	The facility reported there were no Inmates currently in the facility who reported sexual abuse during the audit period. This was verified during the tour of the facility and confirmed during staff interviews.
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	1
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

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).	The facility reported no Inmates who were placed in segregated housing/isolation for risk of sexual victimization. This was verified during the tour of the facility and confirmed during staff and inmate interviews.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	10
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☐ Length of tenure in the facility ☒ Shift assignment ☒ Work assignment ☒ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☒ Yes ☐ No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.

Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):

9

76. Were you able to interview the Agency Head?

☒ Yes

☐ No

77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?

☒ Yes

☐ No

78. Were you able to interview the PREA Coordinator?

☒ Yes

☐ No

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

☒ Yes

☐ No

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

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

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

	☐ Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☐ Yes ☒ No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☐ Medical/dental ☐ Food service ☐ Maintenance/construction ☒ Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

☒ Yes

☐ No

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

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	☒ Yes ☐ No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.
SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY	
Sexual Abuse and Sexual Harassment Allegations and Investigations Overview	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

0

a. Explain why you were unable to review any sexual abuse investigation files:

PHCU reported zero sexual abuse investigations during the audit period. This was verified during staff and inmate interviews.

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	1
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

1

112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☐ No

☒ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

No text provided.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

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

☐ Yes

☒ No

Non-certified Support Staff

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

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

☒ The audited facility or its parent agency

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

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

☐ Other

Standards	
Auditor Overall Determination Definitions	
- Exceeds Standard (Substantially exceeds requirement of standard) - Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) - Does Not Meet Standard (requires corrective actions)	
Auditor Discussion Instructions	
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: - VADOC OP #038.3, Prison Rape Elimination Act (Pg. 3) - VADOC OP #135.2, Rules of Conduct Governing Employee Relationships (Pg. 3) - VADOC Organizational Chart - PHCU Organizational Chart - PHCU PREA Compliance Manager Memo - VADOC PREA Compliance Manager List Interviews: - PREA Compliance Manager/Lieutenant Interview

2. Region PREA Analyst
3. Superintendent Interview

PREA Compliance Manager/Lieutenant and Regional PREA Analyst felt they have enough time to manage all of their PREA related responsibilities. The PREA Compliance Manager/Lieutenant stated she meets regularly with facility leadership and has sufficient authority to implement changes as needed.

The Superintendent indicated during her interview that protection from sexual abuse and harassment is a high priority and that the PREA Compliance Manager/Lieutenant is part of the leadership team and has authority to make changes as needed.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) The Virginia Department of Corrections (VADOC) has an agency wide operating procedure (Prison Rape Elimination Act Operating Procedure #038.3) mandating zero tolerance relating to sexual assault, sexual abuse and sexual harassment.

(b) OP #038.3, Prison Rape Elimination Act discusses the VADOC's approach to training employees, volunteers and contractors preventing, detecting, and responding to sexual assault, sexual abuse and sexual harassment and addresses the staff's duty to report.

(c) VADOC has a designated agency wide PREA/ADA Supervisor who reports to the Corrections Operations Administrator. Under the Agency PREA Supervisor there are three (3) regional PREA Analysts. The Regional PREA Analyst stated she has time and authority to effectively implement and continually monitor the 11 institutions and 3 community corrections facility under her supervision.

(d) VADOC operates thirty-seven (37) facilities across the state. Each facility has a designated PREA Compliance Manager/Lieutenant who reports to their Regional PREA Analyst. PHCU's Correctional Lieutenant is designated as their PREA Compliance Manager/Lieutenant. PHCU's PREA Compliance Manager/Lieutenant reported during her interview that she has sufficient time to develop, implement and oversee the facilities efforts to comply with PREA standards.

The Auditor conducted a thorough review of the agency's policies and procedures, Organizational Chart, and interviewed staff and offenders. The Auditor determined the agency has developed an appropriate zero tolerance policy which includes prevention, detection and response techniques to all allegations of sexual abuse and sexual harassment. An appropriate staff member has been designated to develop, implement, and oversee the agency's and facility's PREA efforts. The VADOC-PHCU has successfully created a zero-tolerance culture towards all forms of sexual abuse and sexual harassment. The Auditor determined the facility's Zero-Tolerance culture resonates with staff and offenders. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #038.3, Prison Rape Elimination Act (Pg. 4) 2. VADOC OP #260.1, Procurement of Goods and Services (Pg. 10) 3. PHCU PREA Audit: Pre-Audit Questionnaire 4. Contracts 5. Contract Renewals 6. Quarterly Facility Site Visits Report 7. Lawrenceville Correctional Center Audit Report Interviews: 1. Regional PREA Analyst 2. Contract Monitor VADOC Policy (#260.1, Procurement of Goods and Services) is written in compliance with the standard and requires confinement of offenders in any new contract or contract renewal includes compliance with PREA standards. VADOC policy requires contracts include a provision for contract monitoring to ensure the contract facility is complying with the PREA standards. Policy does not allow the VADOC to enter a contract with an entity that fails to comply with PREA standards except in emergency situations. The VADOC has included language in all contracts to ensure that contracted facilities comply with PREA Standards. The number of contracts for the confinement of offender that the agency entered into or renewed with private entities or other government agencies since the last PREA audit is one (1). The number of contracts that DID NOT require contractors to adopt and comply with PREA standards is zero (0). The Auditor reviewed the contract between the VADOC and GEO Corrections & Detention, LLC, which was entered into in March 2013. There have been contract extensions and renewals since 2013. Each included requirements for GEO Group to comply with PREA standards. There is a provision in the contract that allows the VADOC to monitor GEO's compliance with PREA. As stated in a Memo from the PREA Coordinator, VADOC has a Private Prison Liaison Officer, who monitors the contract at the private prison to ensure the performance is in accordance with VADOC policy and procedures, mandates and legal requirements. The Private Prison Liaison Officer prepares a monthly report of her operational findings concerning Lawrenceville

	Correctional Center's compliance with the contract requirements. This report is shared with Regional and Facility Administrators as well as the PREA Unit. She receives the PREA Sexual Abuse Hotline Referral emails pertaining to Lawrenceville Correctional Center from the Statewide PREA Hotline Coordinator and she serves as a contact person for the PREA Unit. She also receives a master list, quarterly, of all PREA allegations pertaining to Lawrenceville Correctional Center from the Eastern Region PREA/ADA Analyst. The PREA Unit shares concerns and issues relating to Lawrenceville's PREA compliance. Up until August 1st 2024 the Virginia Department of Corrections contracted for confinement of its offenders with GEO Corrections & Detention, LLC. The GEO Group operated a private prison in Lawrenceville, Virginia. The auditor reviewed the PREA Audit report for Lawrenceville Correctional Center which was submitted in August 2022. The Lawrenceville Correctional Center was found to be in compliance with the PREA standards at that time. The Virginia Department of Corrections houses offenders in local and regional jails across the state. The Code of Virginia allows for the confinement of VADOC offenders in those facilities. There is no contract or written agreement, however each facility housing VADOC offenders is required comply with the PREA standards. PHCU does not house offenders contracted by other entities or contract with other entities to house PHCU offenders. Any contracts for confinement of VADOC offenders is done at the agency level. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP 401.1, Development and Maintenance of Post Orders (Pg. 4-5) 2. VADOC OP 401.2, Security Staffing (Pg. 8) 3. VADOC OP 401.3, (Pg. 4-5) 4. PHCU Duty Rosters 5. PHCU Staffing Plan and Post Audit 6. PHCU Unannounced Rounds/PREA Log 7. PHCU Facility Camera List Interviews

1. Superintendent Interview
2. PREA Compliance Manager/Lieutenant Interview
3. Regional PREA/ADA Analyst
4. Intermediate or higher-level facility staff interviews
5. Offender Interviews

Interviews with the Superintendent, PREA Compliance Manager/Lieutenant and Regional PREA Analyst confirmed that the PHCU has developed a staffing plan and has adopted generally accepted detention and correctional practices. Additionally, the staffing plan is reviewed annually by the Superintendent and submitted to the Regional and Agency PREA Coordinator. All indicated that issues that are identified are prioritized and addressed as needed.

Interviews with Sergeants and Lieutenants confirmed that unannounced rounds are done on all shifts at varied times. Both indicated that rounds are documented in the "Unannounced Rounds/PREA Log".

Random offender interviews confirmed that they regularly see supervisors in the housing units and other areas in the facility.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) The VADOC-PHCU has a policy (401.2, Security Staffing) which requires a staffing plan that includes:

- Generally accepted detention and correctional practices
- Any judicial findings of inadequacy
- Any findings of inadequacy from Federal investigative agencies
- Any findings of inadequacy from internal or external oversight bodies
- All components of the facility's physical plant (including "blind-spots" or areas where staff or offenders may be isolated)
- The composition of the offender population
- The number and placement of supervisory staff
- Institution programs occurring on a particular shift
- Any applicable State or local laws, regulations, or standards
- The prevalence of substantiated and unsubstantiated incidents of sexual abuse
- Any other relevant factors

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.

Information from the assessment is used to determine where additional supervision is necessary, where supervisory coverage is necessary and where additional cameras

may be needed. The PHCU monitors the composition of the offender population on a daily basis and uses this information to justify staffing for coverage for the offender population. The PHCU requires supervisors to visit each housing unit at least once per shift.

Since the last PREA audit the average daily number of offenders was 65.

Since the last PREA audit the average daily number of offenders on which the staffing plan was predicated was 100.

(b) The PHCU listed the most common reasons for deviating from the over the last 12 months as:

- Annual Leave
- Mandatory Training
- Sick Leave
- Covid
- Vacancy
- Military Leave

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.

(c) 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:

- The facility's established staffing plan
- The facility's deployment of video monitoring systems and other monitoring technologies
- 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 forwarding to the Regional PREA Analyst.

PHCU's most recent staffing plan review was completed on January 26, 2024 and submitted and signed off on by the Regional PREA Analyst and Agency PREA Coordinator on January 26, 2024.

(d) VADOC OP 401.1, Development and Maintenance of Post Orders (Pg. 4-5) states

	that “Staff assigned to any post are prohibited from alerting other employees that a supervisor is conducting rounds to identify and deter sexual abuse and sexual harassment. (§115.13[d]).” (e) The PHCU provided copies of their “Unannounced Rounds/PREA Log” with the pre-audit documentation which shows this as a regular practice. Staff were seen in all housing and common areas. Supervisors were also present. Offenders in each unit were in the dayrooms available to speak with the Auditor. The Auditor concluded the facility has a staffing plan to ensure the protection of offenders from sexual abuse. The Auditor reviewed policies, procedures, the Staffing Plan, Staffing Plan Review, facility logbooks, shift rosters, made observations, and conducted interviews with staff and offenders. The facility conducts an annual staffing plan review as required by this standard. The Auditor determined the agency meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #425.4 (Pg. 4) 2. PHCU’s PREA Audit: Pre-Audit Questionnaire 3. PHCU Youthful Offender Memo Interviews: 1. Superintendent Interview 2. PREA Compliance Manager/Lieutenant Interview 3. Regional PREA/ADA Analyst During interviews, the Superintendent, PREA Compliance Manager/Lieutenant and Region PREA/ADA Analyst confirmed the PHCU does not house youthful offenders under the age of eighteen. Site Review Observations: 1. Observations during on-site review of physical plan

	VADOC OP #425.4 (Pg. 4) states that a youthful offender shall not be placed in a housing unit in which the youthful offender will have sight, sound, or physical contact with any adult offender through use of a shared dayroom or other common space, shower area, or sleeping quarters. Direct supervision is always required when a youthful offender and an adult offender have sight, sound, or physical contact with one another In the past 12 months, the number of housing units to which youthful offenders are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters was zero (0). In the past 12 months, the number of youthful offenders placed in SAME HOUSING UNIT as adults at this facility was zero (0). PHCU provided documentation showing their youngest offender is eighteen years old. In the past 12 months, the number of youthful offenders who have been placed in isolation in order to separate them from adult offenders was zero (0). Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: VADOC OP #350.2 (Pg. 9) VADOC OP #401.1, Development and Maintenance of Post Orders (Pg. 6) VADOC OP #401.2, Security Staffing (Pg. 7) VADOC OP #445.4 (Pg. 15-20) VADOC OP #720.2 (Pg. 6) VADOC OP #801.1 (Pg. 3) PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) 8. PHCU Unannounced Rounds/PREA Log – (Female Staff Announcement) VADOC Staff Training Academy Outline – Searches VADOC Cross-Gender Strip Search Memo (August 1, 2024) Facility Shift Rosters

Interviews:

PREA Compliance Manager Interview

Random Staff Interviews

Random Offender Interviews

The PREA Compliance Manager indicated during his interview that he meets with transgender offenders to determine their preference of staff to be searched by.

Random staff interviews reiterated that they have not conducted cross-gender strip searches or cross gender visual body cavity searches. Staff interviews confirmed that they announce themselves or will announce staff of a different gender prior to entering the housing unit and note the announcement in the PREA Log Book.

Random offender interviews confirmed they have not been strip searched or visual body cavity searched by a staff member of the opposite sex. Offender interviews indicated that announcements by staff are being made when staff enter housing areas.

Site Review Observations:

Observations during on-site review of physical plant

(a) VADOC policy #445.4 Screenings and Searches of Persons states:

One Corrections Officer and one other DOC employee both of whom are of the same gender as the offender or CCAP probationer/parolee or of the gender indicated on the approved Strip Search Deviation Request will accompany the offender or CCAP probationer/parolee into an appropriate area where privacy can be ensured.

- No person of the opposite gender can be present or witness the strip search.
- The offender or CCAP probationer/parolee will remove every article of clothing including wigs, dentures, etc. and give them to the Corrections Officer for inspection.
- While the offender or CCAP probationer/parolee is disrobed, DOC employees will conduct a visual inspection of the offender's or CCAP probationer's/parolee's head, hair, mouth, torso, pelvic area, legs, and feet.
- The offender or CCAP probationer/parolee 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 offender or CCAP probationer/parolee or conduct any physical intrusion into the individual's rectal or vaginal cavities

- The offender or CCAP probationer/parolee must be allowed to dress immediately after the search.

Strip searches of offenders and CCAP probationers/parolees by DOC employees of the opposite gender from the offender or probationer/parolee 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;

In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of offenders was zero (0)

(b) The VADOC-PHCU does not house female offenders.

(c) The VADOC-PHCU does not house female offenders.

(d) VADOC OP #801.1 (Pg. 3) and VADOC OP #401.1, Development and Maintenance of Post Orders (Pg. 5) states the PHCU has policies and procedures that enable offenders to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. VADOC Policy requires staff to announce their presence when entering housing units with offenders of a different gender. Staff interviews reiterated that they announce themselves or will announce staff of a different gender prior to entering the housing unit. Offender interviews indicated that announcements by staff are done on a consistent basis.

	(e) VADOC OP #445.4 states: “DOC employees will not search or physically examine a transgender or intersex inmate or CCAP probationer/parolee for the sole purpose of determining the individual’s genital status. If the genital status is unknown, it may be determined through conversation with the inmate or CCAP probationer/parolee, 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.” VADOC-PHCU also provided a memo signed by the Superintendent stating that no such searches have been conducted. (f) VADOC OP #445.4 states: <i>“Corrections Officers are trained on how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates and CCAP probationers/parolees in a professional and respectful manner, and in the least intrusive manner possible consistent with security needs.</i> <i>Female Corrections Officers will frisk search transgender and intersex inmates and probationers/parolee unless exigent circumstances or an approved Strip Search Deviation Request are present and documented; exceptions to this requirement should be referred to the facility Treatment Team.”</i> During the tour and during offender interviews it was confirmed that female staff announce when entering the housing units. The Auditor concluded staff had been appropriately trained to conduct cross-gender searches and make opposite gender announcements when entering offender housing units. Offenders can shower, change clothing, and use the restroom without non medical staff of the opposite gender seeing them do so. Staff has been trained to treat transgender and intersex offenders professionally and respectfully. The Auditor reviewed the agency’s policies and procedures, training documents, shift rosters, made observations, and interviewed staff and offenders and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit

(PHCU) provided the following documents to assist the auditor in determining compliance with the standard:

1. VADOC OP #038.3, Prison Rape Elimination Act (Pg. 7)
2. Propio Language Contract (Prior to April 2024)
3. Homeland Language Services (Started April 2024)
4. Purple Language Contract
5. Optimal Interpreter Services
6. VLS Interpreter Service
7. Braille PREA Handbook
8. VADOC Zero Tolerance Postings (English, Spanish)
9. PHCU Offender Training Acknowledgement (English, Spanish)

Interviews:

1. PREA Compliance Manager Interview
2. Counselor Interviews (Intake and Orientation)
3. Random Staff Interviews

During interviews with random staff, they stated each offender is provided PREA information upon arrival. Counselors and the PREA Compliance Manager were asked how the facility ensures offenders who are disabled or do not speak English benefit from the agency's information and education. They stated that intake and orientation materials were available in English and Spanish and translation services were available if needed. They also indicated they set down individually with offenders that need additional help understanding the information for themselves.

Random staff were asked about the use offender interpreters. Each stated they do not use offenders to interpret information to offenders. Staff informed the auditor they have select staff who are bilingual and have access to an interpretation service by phone.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) As previously stated, the VADOC-PHCU has a written policy, mandating zero tolerance relating to sexual abuse and sexual harassment. The PHCU utilizes the following services to ensure that limited English-speaking offender, offenders with disabilities, and those who have a speech disability have an equal opportunity to participate in PREA education.

- PREA Handbook in Braille - This handbook has been transcribed by Virginia Correctional Enterprises Braille / Fluvanna Correctional Center for Women.
- Spanish-Offender Training Acknowledgement - This form is utilized for Spanish Speaking offenders to acknowledge their receiving PREA information.

	• VLS Interpreter Service - Vernacular Language Services is a Foreign Language Telephone Interpreter Service. • Zero Tolerance – English / Hearing Impaired / Spanish - This Handout includes information on Reporting and Knowing Your Rights • Optimal Interpreter Services / Stratus (Formerly Optimal Interpreter Services) • Propio Language Contract (Prior to April 2024) • Homeland Language Services (Started April 2024) • Purple Language Service (b) The PHCU takes 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. (c) The PHCU refrains from relying on offender interpreters, offender readers or other types of offender assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender’s safety. Staff interviews reaffirmed the use of a contract interpretive service or another staff member to interpret with a limited English-speaking offender. Facility staff provided the auditor a tour of the facility. The auditor observed PREA posters and pamphlets posted in housing units and various other common areas. All posted materials were maintained in English and Spanish. Additionally, offender tablets and kiosks are also available in English and Spanish. The auditor concluded the agency provides information that ensures equal opportunities to offenders who are disabled. The agency takes reasonable steps to provide offenders who are limited English proficient meaningful access to all aspects of the agency's prevention, detection and response policies towards sexual abuse and sexual harassment. The auditor conducted a review of VADOC policies, procedures, training form, interviewed staff and offenders and determined the agency meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP # 102.2 (Pg. 5)

2. VADOC OP # 102.3 (Pg. 4)
3. VADOC OP # 102.7 (Pg. 6)
4. VADOC OP # 135.1 (Pg. 15)
5. VADOC OP # 145.2 (Pg. 6)
6. VADOC OP # 260.1 (Pg. 10)
7. PHCU New Hire Applications
8. PHCU Promotion Applications
9. Contractor VCIN Log
10. Employee VCIN Log
11. Contract Employees VCIN Log
12. Volunteer VCIN Log

Interviews:

1. Superintendent Interview
2. Human Resources Staff Interview

During her interview, the Superintendent indicated she makes the final decisions on all new hires and promotions. In doing so, she reviews the entire hiring packet including applications and background checks.

Human Resources staff confirmed during their interview that they complete background checks and prior employment verifications during the hiring process including asking about prior allegations of sexual abuse. Additionally, they indicated they also complete criminal history and VCN checks on all current staff, contractors and volunteers every three years.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) The VADOC-PHCU conducts background investigations for new hires as well as for staff being considered for a promotion. VADOC OP # 102.3 (Pg. 4) states:

The DOC shall conduct criminal background records checks (VCIN) at least every five years of current employees and contractors. A criminal background records check (VCIN) will be conducted annually for sensitive specialist assignments.

- The Human Resources Officer for each organizational unit shall ensure criminal background records checks (VCIN) are conducted and documented as required. (§115.17[e], §115.217[e])
- The Human Resource Officer shall document in the Access Employee Database that the criminal records check (VCIN) was conducted..

(b) VADOC OP #102.2 (Pg. 5) indicates that: *"The DOC shall consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with incarcerated offenders."*

(c) VADOC OP #102.3 states:

Before hiring new employees, who may have contact with offenders, the DOC shall: (§115.17[c], §115.217[c])

- Perform a criminal background records check (VCIN)
- 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.

In the past 12 months, the number of persons hired who may have contact with offenders who have had criminal background record checks was 7.

(d) VADOC OP # 102.3 (Pg. 4) requires a criminal background records check before enlisting the services of any contractor who may have contact with offenders

In the past 12 months, the number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with offenders was 18.

(e) VADOC OP # 102.3 (Pg. 4) requires criminal background records checks every five years of current employees and each year for contractors who may have contact with offenders.

(f) VADOC asks all applicants and employees who may have contact with offenders directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions

VADOC asks all applicants and employees who may have contact with offenders 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

(g) VADOC OP #135.1 (Pg. 15) states *“Material omissions regarding convictions or charges of sexual abuse or sexual harassment in an institutional setting, sexual activity by force or coercion (or if the victim could not or did not consent), civil or administrative adjudication for sexual activity by force shall be grounds for termination. (§115.17[g], §115.217[g]).”*

VADOC OP #102.7 (Pg. 6) allows the HR staff to 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.

The auditor concluded the VADOC-PHCU is taking appropriate steps to identify previous acts of sexual misconduct prior to hiring staff, enlisting the services of contractors, and before promoting staff members. The auditor conducted a thorough review of the agency's policies, procedures, employment records, forms, interviewed staff and determined the agency meets the requirements of this standard. Based

	upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #801.1 2. PHCU Facility Diagrams 3. PHCU Updated Camera List 4. Facility Tour Interviews: 1. Superintendent Interview 2. PREA Compliance Manager Interview Both the Superintendent and PREA Compliance Manager indicated during their interviews that they are aware of the PREA standard requiring their participation in considering the affects of designing new or updating existing facilities on the PREA Standards. Site Review Observations: Observations during on-site review of physical plant (a,b) VADOC OP #801.1 requires the consideration of any new design, acquisition, expansion, or modification on the agency’s ability to protect offenders from sexual abuse. The PREA Compliance Manager is aware of the PREA standard requiring his participation in considering the affects when designing new or updating existing facilities. The auditor has established the PREA Compliance Manager considers design affects and camera placements to protect offenders from sexual abuse. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.21	Evidence protocol and forensic medical examinations
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Auditor Overall Determination: Meets Standard

Auditor Discussion

The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard:

1. VADOC OP #030.4 (Pg. 10-11)
2. VADOC OP #038.3 Prison Rape Elimination Act (Pg. 13)
3. VADOC OP #720.7 Emergency Medical Equipment and Care (Pg. 8)
4. VADOC OP #730.2 (Pg. 8)
5. Action Alliance Contract
6. Forensic Nurse Examiner Contact Form

Interviews:

1. Random Staff
2. PREA Compliance Manager
3. Medical Staff Interview

Random staff interviews indicated staff are trained and understand their responsibilities to preserve, collect and properly handle evidence.

Interviews with the PREA Compliance Manager and Medical staff reiterated that all victims of sexual abuse are offered forensic examinations. Forensic medical examinations are completed on site or at Sovah Health by qualified Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). The PREA Compliance Manager and Medical staff reiterated that if requested by the victim, a victim advocate or agency staff member will accompany the victim through the forensic medical examination process and investigatory interviews.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) The VADOC is responsible for administrative and criminal investigations and follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence.

(b) VADOC protocol is appropriate for youth; however, the PHCU does not generally house youthful offenders.

(c) VADOC-PHCU offers all victims of sexual abuse access to forensic medical examinations either on site or at Sovah Health in Martinsville VA. Victims are provided services at no charge.

The number of forensic medical exams conducted during the past 12 months was

	zero (0). The number of exams performed by SANEs/SAFEs during the past 12 months was zero (0). The number of exams performed by a qualified medical practitioner during the past 12 months was zero (0). (d) VADOC-PHCU has an agreement with Action Alliance to provide the victim with a victim advocate. (e) Interviews conducted with the PREA Compliance Manager and Medical staff reiterated that as requested by the victim, victim advocate, agency staff member, or community-based organization the victim will receive support through the forensic medical examination process and investigatory interviews. The victim advocate may also provide on-going emotional support, crisis intervention, and referrals for other services (f) This provision is Not Applicable; the VADOC is responsible for administrative and criminal investigations. (g) The auditor is not required to audit this provision (h) This provision is Not Applicable; VADOC-PHCU refers these services to Action Alliance for access to a victim advocate. The Auditor determined an appropriate uniform evidence protocol is used when collecting evidence following a sexual abuse incident. The VADOC-PHCU utilizes the VADOC Special Investigations Unit to conduct Criminal investigations. The VADOC-PHCU has an MOU to provide offenders access to victim advocates through Action Alliance. The facility also ensures access to a Sexual Assault Nurse Exam, conducted by trained medical staff either on-site or at Sovah Health. The Auditor reviewed the agency's policies, procedures, MOUs, investigative files and conducted interviews with investigators, victim advocates and medical personnel. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard:

1. VADOC OP #030.4 (Pg. 3)
2. VADOC OP #030.4 (Pg. 10)
3. VADOC OP #038.3 Prison Rape Elimination Act (Pg. 11-12)
4. VADOC Website - <https://vadoc.virginia.gov/offender-resources/prison-rape-elimination-act/>
5. Investigation File Reviews

Interviews:

1. PREA Compliance Manager Interview
2. Western Region PREA/ADA Analyst
3. Facility Investigator Interview
4. SIU Investigator Interview

The PREA Compliance Manager and Regional PREA Analyst indicated they receive all allegations and forward them to the appropriate investigators. Both indicated they ensure compliance with the standard through the investigative process by utilizing a Sexual Assault Response Checklist.

During interviews with the Facility Investigator and SIU Investigators they indicated that they receive and investigate all allegations of sexual misconduct and refer criminal allegations for prosecution.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) VADOC OP #038.3 ensures that all allegations of sexual abuse and sexual harassment are investigated.

In the past 12 months, the number of allegations of sexual abuse and sexual harassment that were received was one (1).

In the past 12 months, the number of allegations resulting in an administrative investigation was one (1).

In the past 12 months, the number of allegations referred for criminal investigation was zero (0).

(b) The VADOC Sexual Assault/Abuse Policy is on their website (<https://vadoc.virginia.gov/offender-resources/prison-rape-elimination-act/>) stating that all offenders have the right to be safe from sexual abuse and harassment. Their policy discusses how staff will receive allegations and who is responsible for investigations.

VADOC OP #038.3 requires staff to document all incidents of sexual abuse and forward them to the PHCU PREA Coordinator.

(c) Information on the VADOC website clearly explains who is responsible for investigations.

How a PREA Complaint is processed

When we receive a message on the confidential hotline or a PREA third party reporting form, the complaint goes through the following process:

- *A PREA complaint is reported.*

A PREA Hotline Coordinator receives, reviews, and documents a PREA complaint.

- *The PREA complaint is forwarded to the right contacts.*

A PREA Hotline Coordinator will notify the correct facility and PREA Unit. The victim and alleged perpetrator(s) are separated. The victim is offered medical and mental health services.

- *An investigation is conducted.*

The Institutional Investigator and/or the Special Investigations Unit conduct an investigation once they receive a claim of sexual misconduct or sexual harassment against a staff member or offender.

- *A disposition can be substantiated, unsubstantiated, or unfounded.*

Substantiated: the allegation was investigated and was determined to have occurred.

Unsubstantiated: there was not enough evidence determine whether or not the allegation occurred.

Unfounded: the allegation was determined to not have occurred.

- *Termination is the presumptive discipline for staff members who are found to have engaged in sexual abuse.*

Violators of the VADOC's Zero-Tolerance Policy are ineligible for rehire and prosecuted to the fullest extent of the law.

- *If an offender withdraws an allegation of sexual abuse or sexual harassment, the investigation must continue.*

If the allegation is substantiated or unsubstantiated, we recommend not charging the offender since we either proved the offender's statement was true, or were unable to prove whether the statement was false and made in "bad faith.

If the investigation concludes that the allegation was unfounded, and it can be proven

	that the offender made a false allegation in “bad faith,” the offender may receive a disciplinary charge if approved by the Regional PREA Analyst. (d,e) Auditor is not required to audit these provisions The Auditor concluded the VADOC-PHCU appropriately refers criminal allegations of sexual abuse and sexual harassment to the VADOC Special Investigations Unit (SIU). The SIU has the legal authority to conduct such investigations. The Auditor observed evidence the facility investigates all allegations of sexual abuse and sexual harassment. After reviewing agency policies, procedures, the VADOC website, investigative files and interviewed staff and offenders. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard
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115.31	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #102.6 (Pg. 4) 2. VADOC OP #350.2 (Pg. 11 – 12) 3. PREA/ADA Newsletters 4. PREA Training Curriculum 5. New Hire Orientation 6. In-Service Training Interviews: 1. PREA Compliance Manager Interview 2. Regional PREA/ADA Analyst 3. Random Staff Interviews During the Regional PREA Analyst and PREA Compliance Manager’s interviews they explained that PREA training is provided before new staff, contact staff or volunteers can have contact with offenders and again each year as part of their in-service training. Additionally, they explained that staff receive training to deal with both male and female offenders and are tested on information they receive. Random staff were asked questions related to training topics listed in the agency's lesson plan. Staff appeared knowledgeable of all topics. Staff understood their responsibilities, understood the dynamics of sexual abuse and articulated common

reactions of sexual abuse victims. Staff had been trained to avoid inappropriate relationships with offenders. Staff understood the agency's reporting requirements and how to comply with relevant laws. Additionally, security staff member understood their responsibilities as first responders.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) During Phase One of new hire training, the VADOC-PHCU provides all staff with a four-hour PREA training which includes the following topics and a written exam.

- History of PREA
- The "Nine Purposes of PREA"
- Definitions
- Zero-Tolerance Policy
- Rules of Conduct Governing Employees Relationships with Offenders
- Common Myths
- The Dynamics of Sexual Abuse and Sexual Harassment in Confinement
- Common Reactions of Sexual Abuse and Sexual Harassment Victims
- Detection Strategies
- Responding to Signs of Threatened and Actual Sexual Abuse
- Avoiding Inappropriate Relationships with Offenders
- Communicating Effectively and Professionally with Offenders
- Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Offenders
- Transgender, Intersex and Cross-Gender Searches

Additionally, a PREA refresher training is part of the department's annual in-service training curriculum which includes:

- Dynamics of sexual abuse in a confinement setting including common reactions to sexual abuse.
- Professional boundaries and communicate effectively with offenders.
- Detection, prevention, and response to sexual abuse in a VADOC confinement facility.
- Rules of Conduct Governing Employees Relationships with Offenders, improprieties, fraternization, and associations treated as a Group III offense.
- VADOC's Zero Tolerance policy.
- Common characteristics of offender victims (both male and female) of sexual violence.
- Detection strategies.

Pre-Audit documentation was provided to the auditor which included both new hire and annual in-service training. Additional training records were reviewed during the onsite audit.

(b) VADOC-PHCU staff receives training tailored to the gender of the offenders, All

	staff receives this training regardless of whether or not they are reassigned from another facility. (c) All current employees who have contact with offenders have received training. A review of the staff training records and random staff interviews confirm training was received. (d) VADOC-PHCU maintains completion reports which verify they have received the training and understand the training they have received. Upon completion of the lesson plan, staff is required to complete a test over the material. Additionally, the VADOC publishes a monthly PREA/ADA newsletter with updates and news about the agency's PREA and ADA compliance efforts. The newsletter is distributed to all VADOC employees across the state. The Auditor concluded the VADOC-PHCU has appropriately trained staff and documented the employees' understanding of the training received. All facility staff interviewed were knowledgeable and retained the information provided through agency training efforts. The Auditor reviewed agency policies, procedures, lesson plans, training records, acknowledgement forms, and interviewed staff. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #027.1 (Pg. 7-8) 2. VADOC OP #038.3 Prison Rape Elimination Act (Pg. 5) 3. VADOC OP #102.6 Staff Orientation (Pg. 6) 4. VADOC OP #350.2 (Pg. 8) 5. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) 6. Volunteer PREA Acknowledgement Form 7. Maintaining Boundaries Guide 8. VADOC Volunteer Orientation Training Interviews: 1. PREA Compliance Manager Interview 2. Regional PREA Analyst

3. Contract Staff Interview – VDOT Supervisor
4. Volunteer Interview

During the PREA Compliance Manager and Regional PREA Analyst interviews they explained that PREA training is provided before contract staff or volunteers can have contact with offenders and again each year. Additionally, they explained that contract staff or volunteers receive training based on the type of services they provide and the amount of contact they will have with the offender population.

During interviews with contract staff and volunteers. The Auditor asked each if they had been provided training by the facility prior to having contact with offenders. Each informed the Auditor they attended an orientation prior to beginning work in the facility. The Auditor questioned each regarding specific requirements of this standard to gain an understanding of the training provided to determine if the training was retained. Contractors and volunteers were able to articulate their responsibilities under the agency's sexual abuse and sexual harassment policies, how to report allegations, and were aware of the agency's zero-tolerance policy.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) VADOC-PHCU ensures that all volunteers and contractors who have contact with offenders have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. All volunteers and contractors are provided information based on the level of services they provide and the level of contact that they will have with the offenders. Interviews conducted confirmed that volunteers and contractors received this information prior to entering the facility.

The number of volunteers and contractors, who may have contact with offenders, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response is 18.

(b) All volunteers and contractors who have contact with offenders have been notified of the agency's zero-tolerance policy regarding sexual abuse and harassment. Volunteers and contractors are informed how to report such incidents.

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 offenders and their training is tailored during orientation. The VADOC has assigned the following definitions when determining the level and type of training provided to volunteers and contractors.

Level 1 (Contractors, Interns and Program Visitors who have no contact with offenders and CCAP probationers/parolees) Under this level they are informed of their responsibilities to prevent, detect, monitor, and report all allegations and incidents of sexual abuse and sexual harassment of offenders and CCAP probationers/parolee. Additionally, they are provided a copy of the brochure titled "A Guide to Maintaining

	Appropriate Boundaries with Offenders for Contractors and Volunteers of the Virginia Department of Corrections” and are required to review Operating Procedure 038.3, Prison Rape Elimination Act (PREA). Level 2 (Contractors, Interns, and Volunteers whose duties do not require contact with offenders and CCAP probationers/parolees, but the possibility for contact exists) Under this level they are informed of their responsibilities to prevent, detect, monitor, and report allegations and incidents of sexual abuse and sexual harassment of offenders and CCAP probationers/parolees. Additionally, they are provided a copy of the brochure “A Guide to Maintaining Appropriate Boundaries with Offenders for Contractors and Volunteers of the Virginia Department of Corrections” and are required to review Operating Procedure 038.3, Prison Rape Elimination Act (PREA) and Operating Procedure 135.2, Rules of Conduct Governing Employees Relationships with Offenders. Level 3 (Contractors, Interns, and Volunteers whose duties require contact with offenders or CCAP probationers/parolees) Under this level they are informed of their responsibilities to prevent, detect, monitor, and report allegations and incidents of sexual abuse and sexual harassment of offenders and CCAP probationers/parolees. Additionally, they are required to view a Prison Rape Elimination Act (PREA) Power Point Presentation and receive copy of the brochure “A Guide to Maintaining Appropriate Boundaries with Offenders for Contractors and Volunteers of the Virginia Department of Corrections” and review Operating Procedure 038.3, Prison Rape Elimination Act (PREA) and Operating Procedure 135.2, Rules of Conduct Governing Employees Relationships with Offenders. (c) VADOC-PHCU maintains documentation confirming that volunteers and contractors understand the training they have received. Upon receipt of the PREA information, volunteers and contractors are required sign and acknowledge they understand the material. The Auditor concluded the agency provides appropriate training to volunteers and contract staff. The agency's training curriculum is appropriate to ensure compliance with this standard. The agency maintains documentation that volunteers and contractors have received training. The Auditor reviewed the agency's policies, training curriculum, training records, and interviewed contractors and volunteers. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.33	Inmate education
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining

compliance with the standard:

1. VADOC OP #038.3 Prison Rape Elimination Act (Pg. 5 - 6)
2. VADOC OP #810.2 Transferred Offender Receiving and Orientation (Pg. 7)
3. VADOC-PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
4. VADOC-PHCU Offender Training Intake
5. VADOC-PHCU Offender Training Comprehensive
6. VADOC-PHCU Offender PREA Training Acknowledgement Form
7. VADOC Zero Tolerance Poster (English and Spanish)
8. VADOC Braille PREA information

Interviews:

1. Reception Staff Interviews
2. Random Offender Interviews

During interviews with Reception staff who conduct the initial education and facility orientation they explained that initial education is provided to each offender as they arrive at the facility and how accommodations can be made if needed. Specifically, information could be read to individuals who are blind or cannot read the information themselves. They also stated that materials were available in Spanish and that interpretive services are available if needed.

During offender interviews, all indicated they received PREA information during the intake process and signed for the information they received. Additionally, all offenders interviewed were knowledgeable of the agency's zero-tolerance policy, how to report abuse, and services that were available.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) During intake, offenders receive and sign for PREA documentation explaining the agency's zero-tolerance policy towards sexual abuse and sexual harassment.

The number of offenders admitted during past 12 months who were given this information at intake was 69.

(b) The VADOC-PHCU provides education to offenders about their rights to be free from sexual abuse and sexual harassment. The education, offender handbook and other materials include:

- rights to be free from retaliation
- reporting such incidents
- services available
- and that sexual abuse and harassment will be referred for administrative and/or criminal investigations.

The number of those inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake was 51.

(a) The VADOC-PHCU provides offender education in formats accessible to all offenders including those who are limited English proficient. Information is also available for offenders who are deaf, those who are visually impaired, those who are otherwise disabled and offenders who have limited reading skills. The PHCU utilizes the following services to ensure that limited English-speaking offender, offenders with disabilities, and those who have a speech disability have an equal opportunity to participate in PREA education.

- PREA Handbook in Braille - This handbook has been transcribed by Virginia Correctional Enterprises Braille / Fluvanna Correctional Center for Women.
- Spanish-Offender Training Acknowledgement - This form is utilized for Spanish Speaking offenders to acknowledge their receiving PREA information.
- VLS Interpreter Service - Vernacular Language Services is a Foreign Language Telephone Interpreter Service.
- Zero Tolerance - English / Hearing Impaired / Spanish - This Handout includes information on Reporting and Knowing Your Rights
- Optimal Interpreter Services / Stratus (Formerly Optimal Interpreter Services)
- Propio Language Contract (Prior to April 2024)
- Homeland Language Services (Started April 2024)
- Purple Language Service

(b) The VADOC-PHCU maintains documentation of offender participation in the PREA education in the offender file. During the onsite audit 10 random offender files were reviewed and found to contain completed "Preventing Sexual Abuse and Assault Training Acknowledgment" forms in each file. Documentation of offender education was dated and signed by both the staff member providing the information and the offender.

(c) The VADOC-PHCU provides additional educational materials in the housing units in the form of painted posters and offender handbooks. Random interviews and the facility tour confirmed the existence of additional materials in most areas.

During the tour of the facility postings with reporting information and how to access outside services were observed posted on walls in multiple locations including by the phones in offender housing areas, additional information was also available on offender kiosks.

The Auditor concluded the offender population at the VADOC-PHCU is educated in the facility's zero tolerance policy, how to report allegations, their rights to be free from sexual abuse, sexual harassment, retaliation, and the agency's policies. VADOC-PHCU maintains appropriate documentation in the offender file. The Auditor reviewed the agency's policies, procedures, Offender Handbook, orientation, acknowledgement

	form, interviewed staff and offenders. Based on the review and analysis of all of the available evidence, the auditor has determined VADOC-PHCU Facility is fully compliant with this standard.
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #030.4 (Pg. 10) 2. VADOC OP #350.2 (Pg. 14) 3. VADOC-PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) 4. SIU Specialized Training Certificates 5. Basic Training for Institutional Investigators PowerPoint 6. VADOC Investigations Specialized Training Agenda 7. NIC Investigations Specialized Training 8. Regional PREA Training Agenda and Roster Interviews: 1. Facility Investigator 2. Special Investigation Unit (SIU) Investigator Interview (Phone) SIU and Facility Investigator interviews confirmed they have received additional training in accordance with their job responsibilities. Both stated that specialized training included techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral Site Review Observations: 1. Observations during on-site review of physical plant (a) VADOC policy requires special training for staff who conduct sexual abuse investigations. Policy dictates the specialized training include the following topics: • Techniques for interviewing sexual abuse victims; • Proper use of Miranda and Garrity warnings; • Sexual abuse evidence collection in confinement settings; and

	• The criteria and evidence required to substantiate a case for administrative action and prosecution referral. (b) Specialized training includes techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Investigative staff was knowledgeable about the training they received. (c) The VADOC maintains documentation that investigators have completed the required specialized training in conducting sexual abuse investigations. The number of investigators currently employed who have completed the required training is 23 19 SIU Agents 1 Facility Investigator (d) Auditor is not required to audit this provision The Auditor concluded the facility provides appropriate training to investigators that conduct sexual abuse investigations. The Auditor conducted a review of policies, procedures, training records, curriculum, and interviewed investigators and determined the agency is fully compliant with the requirements of this standard.
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #102.6 Staff Orientation (Pg. 7) 2. VADOC OP #350.2 (Pg.12) 3. VADOC OP #701.1 (Pg. 8) 4. VADOC OP #720.7 Emergency Medical Equipment and Care (Pg. 8) 5. VADOC-PHCU PREA Audit: Pre-Audit Questionnaire 6. NIC Medical Health Care for Sexual Assault Victims in a Confinement Setting 7. PHCU Medical Staff Certificates of Completion Interviews:

	1. Medical and Mental Health Staff Interviews Medical and mental health staff interviews verified they receive training from the which includes how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Site Review Observations: 1. Observations during on-site review of physical plant (a) VADOC policy requires that all full- and part-time contract 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. • how to preserve physical evidence of sexual abuse, • how to respond effectively and professionally to victims of sexual abuse and sexual harassment • and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. The number of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy is six (6). The percent of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy is 100% (b) The portion of the standard is Not Applicable as all forensic exams are conducted at Sovah Health in Martinsville or another community hospital. Staff interviews confirmed this information. (c) VADOC-PHCU maintains and provided documentation that medical and mental health staff has received training referenced in this standard either from the agency or elsewhere. Training records were reviewed and compliance has been met. The Auditor concluded medical and mental health staff at the VADOC-PHCU are appropriately trained. The facility maintains documentation that medical and mental health staff have received specialized medical training. The Auditor conducted a review of agency policies, procedures, training curriculum, training records, interviewed medical and mental health staff and determined the agency meets the requirements of this standard.
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Auditor Overall Determination: Exceeds Standard

Auditor Discussion

The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard:

1. VADOC OP #730.2 (Pg. 6)
2. VADOC OP #810.1 (Pg. 5-7)
3. VADOC OP #810.2 Transferred Offender Receiving and Orientation (Pg. 4,6)
4. VADOC OP #861.1 (Pg. 6)
5. General Population-Classification Assessments and PREA Reassessments
6. Receiving-Classification Assessments and PREA Reassessments

Interviews:

1. Counselor interviews
2. PREA Compliance Manager/Lieutenant
3. Offender interviews

During Counselor interviews they indicated that during the intake and classification process they utilize the Classification Assessment to determine the offender's vulnerability risk level or propensity toward predatory behavior. Information is utilized to determine housing placement. Counselor stated they go over questions with the offender in private and forward information to their assigned Counselor.

During the PREA Compliance Manager interview he indicated he reviews all offender's initial PREA screenings. Additionally, he stated he reassess offender's PREA status within 14 to 21 days of the offender's arrival at the facility and document it on a PREA Reassessment form.

During offender interviews it was confirmed that staff ask PREA screening questions within the first few hours upon arrival at the facility and that questions are asked individually in a private location. Offenders also confirmed that the PREA Compliance Manager/Lieutenant asked PREA screening questions again within the first few weeks.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) During the intake process Counselor ask questions to assess offenders for their risk of being sexually abused or sexually abusive toward others.

(b) Interviews conducted with staff indicate intake screenings are typically completed within two hours of arrival but always take place within 72 hours of arrival at the facility.

VADOC-PHCU reported the number of offenders entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other offenders within 72 hours of their entry into the facility was 68.

(c) The PREA screening assessments are conducted using an objective screening instrument which was verified by the auditor during the onsite visit.

(d) VADOC-PHCU intake screening instrument considers:

- whether the offender has a mental, physical, or developmental disability
- whether the offender is at risk of sexual victimization
- the age of the offender
- the physical build of the offender
- whether the offender has previously been incarcerated
- whether the offender's criminal history is exclusively nonviolent
- whether the offender has prior convictions for sex offenses against an adult or child
- whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming
- has previously experienced sexual victimization
- the offenders' own perception of vulnerability

(e) When assessing offenders for risk of being sexually abusive, the offender's initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, history of prior institutional violence or sexual abuse.

(f) Within 14 to 21 days from the offender's arrival at the facility, the offender's assigned Counselor reassess the offender's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening. It was confirmed during Counselor and Offender interviews that this reassessment is being completed as required by policy.

VADOC-PHCU reported the number of offenders entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake was 51.

(g) VADOC-PHCU reassesses a offender's risk level when warranted due to a: referral, request, or incident of sexual abuse and receipt of additional information that bears on the offender's risk of sexual victimization or abusiveness.

(h) VADOC-PHCU does not discipline offenders for refusing to answer, or for not disclosing complete information in response to the risk screening questions. Interviews conducted with staff reiterated that offenders would be not disciplined for refusing to answer the screening questions.

	(i) VADOC-PHCU has 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. Information is maintained in the Offender file and kept in the Counselor's office and is only accessible to authorized staff. Entry's completed on the computer in CORIS are password protected. Ten (10) file reviews were completed, Initial screening questions and PREA Reassessment forms were found to be properly completed and filed. VADOC-PHCU asks screening questions to discover each offenders level of risk of sexual victimization or sexual predation during the intake process and again within 14 to 21 days. Additionally, reassessments are completes based upon any new additional information, an incident or referrals. The Auditor reviewed the agency's policies, procedures, Initial Classification and PREA Screenings, PREA Reassessment Forms, Offender Files and interviewed staff and offenders. Based on the review and analysis of all of the available evidence, the auditor has determined the VADOC-PHCU is fully compliant with this standard.
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #730.2 (Pg. 6) 2. VADOC OP #810.1 (Pg. 5-7) 3. VADOC OP #810.2 Transferred Offender Receiving and Orientation (Pg. 4,6) 4. VADOC OP #861.1 (Pg. 6) 5. Memos - Transgender and Intersex Offenders 6. HRSA/HRSV Housing Reports Interviews: 1. Receiving and Classification Staff Interviews 2. Counselor interviews 3. PREA Compliance Manager During Receiving and Classification staff interviews they confirmed that during the intake process they utilize the Initial PREA Screening information as part of the intake process and use information from the screening to determine where to house offenders in the facility to insure vulnerable offenders are housed away potential

predators.

During Counselor interviews they indicated that they review the PREA Screening with the offender with offenders during their initial meeting and offer resources to those that disclose prior abuse and make referrals to mental health when needed.

During the PREA Compliance Manager interview, he explained that he reviews all PREA Screenings. Additionally, he indicated that screening information is used to insure offenders who may be vulnerable are kept separate from those that may take advantage of them. He also indicated that transgender and intersex offender's housing and programming assignments are reassessed, at least twice each year, to ensure the assignments remain appropriate and no threats to the offenders has occurred.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) VADOC-PHCU uses information from the risk screening required by § 115.241, with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: housing assignments, bed assignments, work assignments, education assignments and program assignments.

VADOC-PHCU provided the auditor a report which indicated the housing location of offenders who are assessed to be High Risk of Sexual Victimization (HRSV) or High Risk of Sexual Abusiveness (HRSV). It was explained that these reports and "Alerts" within the Offender Management System help prevent vulnerable offenders from coming into contact with predatory offenders.

(b) VADOC-PHCU Receiving and Classification staff reviews the Initial PREA Screening and utilizes the information to make an individualized, case-by-case determination about how to ensure the safety of each offender while housed at the facility.

(c) When deciding where to assign transgender or intersex offender the PREA Compliance Manager along with facility leadership and medical and mental health staff determines the offenders housing assignment after meeting with the offender, taking into consideration the offenders own views of where they would prefer to be housed.

(d) VADOC-PHCU policy requires that placement and programming assignments for each transgender or intersex offender is reassessed at least once per year.

(e) The PREA Compliance Manager meets with transgender or intersex individuals to discuss the offenders' own views with respect to his or her own safety and will give serious consideration when making facility and housing placement decisions and programming assignments.

(f) Transgender offenders at the VADOC-PHCU have the opportunity to shower

	separately from other offenders. (g) VADOC-PHCU does not place lesbian, gay, bisexual, transgender, or intersex offenders in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such offenders. The VADOC-PHCU does not have a dedicated unit or wing solely on the basis of identification or status. Information is maintained in the Offender file and kept in the Counselor's office and is only accessible to authorized staff. Entry's completed on the computer in CORIS are password protected. Ten (10) file reviews were completed, Initial screening questions and PREA Reassessment forms were found to be properly completed and filed. The Auditor concluded VADOC-PHCU makes individualized determinations when assigning offender's housing, bed, work, programming and education assignments. VADOC-PHCU has appropriate policies, procedures and practices in place to protect vulnerable offenders from those identified as potential abusers. The Auditor conducted a thorough review of policies, procedures, records, PREA Screenings, interviewed staff and offenders. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.43 Protective Custody	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #425.4 (Pg. 5,6,21) 2. VADOC OP #810.1 (Pg. 5) 3. VADOC OP #810.2 (Pg. 4-5) 4. VADOC OP #830.5 (Pg. 8-9) 5. VADOC-PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) 6. Sexual Abuse/Sexual Harassment Available Alternatives Assessment Form 7. PHCU Quarterly Memos Interviews: 1. PREA Compliance Manager Interview 2. Counselor Interviews 3. Offender interviews

Site Review Observations:

1. Observations during on-site review of physical plant

(a) VADOC OP #830.5 States:

When an offender's need for personal protection is documented and no alternatives exist, the Shift Commander may authorize an offender's assignment to General Detention and placement in the restrictive Restorative Housing Unit pending review for protective custody assignments; see Operating Procedure 425.4, Management of Bed and Cell Assignments (Restricted), and Operating Procedure 841.4, Restrictive Restorative Housing Units.

- *Offenders identified as HRSV or offenders alleged to have suffered sexual abuse should not normally be placed in a restrictive Restorative Housing Unit without their consent unless it has been determined by a Psychology Associate, in consultation with the Shift Commander and Regional PREA Analyst, that there are no available alternative means of separation from likely abusers. (§115.43[a], §115.68)*
- *The ICA or MDT should clearly document on the Institutional Classification Authority Hearing report the basis for the institution's concern for the offender's safety and the reason why no alternative means of separation can be arranged. (§115.43[d], §115.68)*
- *Involuntary assignment to a restrictive Restorative Housing Unit will only be made until an alternative means of separation from likely abusers can be arranged. (§115.43[c], §115.68)*
- *This assignment to restrictive restorative housing will not ordinarily exceed a period of 30 days (§115.43[c], §115.68)*
- *Mental Health staff will advise the ICA on whether the offender can be released to general population or whether they must be assigned to restrictive restorative housing and/or transferred to the DOC Protective Custody Unit. (§115.43[c], §115.68)*
- *The Regional PREA Analyst must be notified of this assignment and kept informed of any changes in the offender's status. (§115.43[a], §115.68)*

The number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was zero (0).

(b) The Offenders placed in segregated housing have access to programs, privileges, education, and work opportunities.

(c) VADOC-PHCU does not assign offenders at high risk of sexual victimization to involuntary segregated housing, once information is gathered from the risk screening tool an immediate referral is made to the PREA Compliance Manager or designee to assess the offenders housing as an alternative means of separation from likely abusers. (OP #830.52) *This assignment to restrictive restorative housing will not*

	<i>ordinarily exceed a period of 30 days (§115.43[c], §115.68)</i> In the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement was zero (0). (d) If an offender is requesting protective custody the offender will be interviewed and their request will be documented and forwarded to the PREA Compliance Manager. The PREA Compliance Manager will review the request and document their recommendations including why alternative means of separation could not be arranged. From a review of case files of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged was zero (0). (e) VADOC Policy states: <i>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 RHU to monitor the appropriateness of the inmate's status.</i> <i>All inmates identified as HRSV or as an alleged victim of sexual abuse will be listed on the Restorative Housing Status Review Report and reviewed to determine whether there is a continuing need for separation from general population. (§115.43[e], §115.68)</i> The facility has appropriate procedures in place to ensure inmates identified at high risk of sexual victimization has access to work, program, education and privileges when housed in involuntary protective custody. Policies require reviews of all inmates housed in the segregation housing unit. The Auditor reviewed the agency's policies, procedures, housing records, classification records, interviewed staff and inmates and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining

compliance with the standard:

1. VADOC OP #038.1 (Pg. 5)
2. VADOC OP #038.3 (Pg. 8-9)
3. VADOC OP #801.6 Offender Services (Pg. 1)
4. VADOC OP #803.3 (Pg. 7)
5. VADOC OP #866.1 (Pg. 2,7,8,12)
6. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
7. MOU with Action Alliance
8. Investigation Files
9. PREA Postings (English & Spanish)

Interviews:

1. Random Staff Interview
2. Random Offender Interviews

Interviews with multiple staff verified that there are numerous ways to make PREA complaints by both staff and offenders, including the use of the offender phone system, anonymous letters, as well as third party reporting by family and friends.

During offender interviews, they were able to articulate the different reporting mechanisms such as reporting to staff in writing or directly speaking with them, contacting a supervisor, calling “#55”, or telling a family member. Random offender interviews revealed that they feel that the staff at PHCU would take any report seriously and act immediately, regardless of the source of the information.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) VADOC policy #038.3 Prison Rape Elimination Act (PREA) states:

Offenders and CCAP probationers/parolees can report sexual abuse and sexual harassment, offender and CCAP probationer/parolee retaliation for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents to any staff member including chaplains, medical, mental health or counseling staff, security staff, or administrators.

(5-ACI-3D-15, §115.51[a], §115.251[a])

1. Any offender or CCAP probationer/parolee who is sexually assaulted should immediately notify staff that the sexual assault occurred.
2. Any offender or CCAP probationer/parolee who observes, is involved in, or has any knowledge or suspicion of a sexual assault or an unauthorized relationship should immediately notify staff.
3. Offenders and CCAP probationers/parolees will not be required to report sexual assault to the immediate point-of-contact line officer only; an offender

or CCAP probationer/parolee may report a sexual assault to any staff member using any available method to include: (§115.51[a],§115.251[a])

- Verbally in person to a staff member or through another third party who can assist the offender or CCAP probationer/parolee in filing requests for administrative remedies
 - Verbally through the offender and CCAP probationer/parolee telephone system sexual assault hotline number #55
 - Written using a Facility Request 801_F3 or other type of written document; see Operating Procedure 801.6, Offender and CCAP Probationer/Parolee Services.
1. Offenders can submit a written report through the Offender Grievance Procedure using the Written Complaint 866_F3, Regular Grievance 866_F1, or Emergency Grievance 866_F4; see Operating Procedure 866.1, Offender Grievance Procedure.
 2. CCAP probationers/parolees can submit a written report through the complaint process; see Offender Complaints, Community Corrections.

(b) The VADOC has an MOU with Action Alliance to operate a statewide hotline (#55) accessible to all offenders and offenders in VADOC facilities. Offenders at PHCU are informed of how to access the hotline. When the hotline is called the offender is given two option. Option #1 is for reporting and option #2 for emotional support services.

During the onsite audit the hotline was tested by the auditor. The hotline was called from “B” pod using a phone accessible to offenders. Following the phone test an issue was identified with Version where calls were going out but not being received. The issue was corrected and a follow up test was conducted.

(c) The VADOC-PHCU offender handbook instructs offenders that they may contact any custody staff, volunteer, contractor, or medical or mental health staff, report to the PREA Compliance Manager, tell a family member, friend, legal counsel, or anyone else outside the facility or Action Alliance and they can report on your behalf by calling the facility. During the site review, the auditor observed reporting information adjacent to all offender telephones which was both posted and painted on the walls.

(d) The VADOC-PHCU accepts reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Staff promptly responds to any reports of sexual abuse. Staff interviews confirmed that they report immediately to supervisors upon learning of any sexual abuse and/or harassment.

(e) VADOC Policy (0.38.3 Prison Rape Elimination Act (PREA)) allows staff to privately report sexual abuse and sexual harassment of offenders. *“Staff, contractors, volunteers, and interns can privately report the sexual abuse and sexual harassment of offenders and CCAP probationers/parolees through the established reporting hotline at 855-602-7001.”*

The facility provides multiple ways for offenders to report allegations of sexual abuse and sexual harassment, staff neglect and retaliation, including an outside private

	entity. The facility requires staff to accept, report, and document all allegations of sexual abuse and sexual harassment. The Auditor reviewed the agency's policies, procedures, Offender Handbook, Offender education materials, staff training materials, Zero-Tolerance Poster, Memorandum of Understanding, Investigative records, training records, and interviewed staff and offenders. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #038.3, (Pg. 8) 2. VADOC OP #861.1, (Pg. 7, 8, 10) 3. VADOC OP #866.1, (Pg. 2-4, 7-12) 4. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) Interviews: 1. Random Staff Interview 2. Random Offender Interviews 3. PREA Compliance Manager Interviews with random offenders and staff confirmed multiple ways an offender could report allegations of sexual abuse or sexual harassment including submitting a grievance. None of the offenders interviewed indicated they had filed a grievance regarding an allegation of sexual abuse or sexual harassment. The PREA Compliance Manager explained during his interview that all offender grievances regarding PREA came to him for a final decision and understood the timeframes for responding to a PREA related grievance. Site Review Observations: 1. Observations during on-site review of physical plant (a) VADOC-PHCU permits offenders to submit grievances regarding allegations of sexual abuse without any type of time limits.

(b) VADOC-PHCU policy states:

(OP 038.3.) There is no time limit on when an offender or CCAP probationer/parolee may submit a Complaint, Written Complaint, or Regular Grievance, regarding an allegation of sexual abuse; see Operating Procedure 866.1, Offender Grievance Procedure and Operating Procedure 866.2, Offender Complaints, Community Corrections. (§115.52[b], §115.252[b])

(OP 866.1) There is no time limit on when an offender inmate may submit a grievance regarding an allegation of sexual abuse or sexual harassment. (§115.52[b(1)]) (changed 6/1/22) (a) Otherwise-applicable time limits apply to any portion of a grievance that does not allege an incident of sexual abuse. (§115.52[b(2)])

(c) VADOC-PHCU policy states:

(OP 866.1) Staff who are the subject of a complaint alleging staff misconduct, sexual abuse or sexual harassment of an offender inmate, or any possible violation of the Standards of Conduct must not be the respondent to the Written Complaint but may offer factual information during the investigation of the complaint. (§115.52[c(1)], §115.52[c(2)])

(d) VADOC-PHCU policy states:

(OP 866.1) PRISON The total time allowed from initiation of a complaint to resolution through the regular grievance process is 180 days including authorized continuances; see Attachment 2, Grievance Process – Timetable

a. Within 30 days of issuance of the Grievance Receipt, each accepted grievance must be investigated, reviewed, completed, and the Offender Grievance Response - Level I returned to the offender inmate unless a continuance is authorized. (§115.52[d(1)], §115.52[d(2)])

If the Offender Grievance Response- Level I is not returned to the inmate within 30 days and an authorized continuance was not issued, the inmate can appeal to the Regional Ombudsman in writing, including copies of the grievance receipt and other supporting documentation.

Prior to appealing to the Regional Ombudsman, the inmate may contact the Institutional Ombudsman to ascertain the status of the grievance response and await disposition.

b. Authorized Continuances (§115.52[d(3)])

- 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:

- The principal(s) or key staff involved are unavailable to provide essential information due to escape, disturbance, or emergency.*
- Awaiting results of Special Investigation Unit or information from other facilities, divisions, or agencies*

c. Prior to expiration of the time limit, the Institutional Ombudsman must print the VACORIS Grievance Continuance Receipt and deliver it to the offender as notification of the continuance.

Regardless of the staff respondent or subject matter, staff must complete the appeal and provide a response to the offender inmate within 20 working days after receipt of the appeal. (§115.52[d(1)], §115.52[d(2)], (§115.52[d(3)]))

a. An appeal may be continued for up to a maximum of 30 days beyond the 20-day time limit for an authorized continuance.

- The respondent must document the continuance in VACORIS and set a new date of completion.*
- Prior to expiration of the time limit, the respondent must print the VACORIS Grievance Continuance Receipt and deliver it to the offender as notification of the continuance.*

b. If the Offender Grievance Response- Level II is not returned to the inmate within 20 working days and an authorized continuance is not issued, the inmate may then seek judicial relief.

c. Prior to seeking judicial relief, the inmate may contact the Institutional Ombudsman to ascertain the status of the grievance response and await disposition.

The Regional Administrator will be the final level of appeal for complaints regarding the Unit Head and allegations of sexual abuse and sexual harassment. Written response should be provided within 30 days. (§115.252[d(1)])

- A final decision on the merits of any portion of a complaint made in a CCAP alleging sexual abuse must be issued within 90 days of the initial filing of the complaint. (§115.252[d])*
- The 90-day time limit will not include time used by the CCAP probationer/parolee in preparing any administrative appeal.*
- If the normal time period for response is insufficient to make an appropriate decision, the CCAP may claim an extension of time to respond of up to 70 days.*
- The CCAP will notify the CCAP probationer/parolee in writing of the extension and provide a date by which a decision will be made.*
- Expiration of the 30-day time limit at any level of response or failure to*

provide notice of an extension will be considered a denial at that level and will qualify the complaint for appeal to the next level of review. (§115.252[d(4)])

In the past 12 months, the number of grievances filed that alleged sexual abuse was zero (0)

In the past 12 months, the number of grievances alleging sexual abuse that reached final decision within 90 days after being filed was zero (0)

In the past 12 months, the number of grievances alleging sexual abuse that involved extensions because final decision was not reached within 90 days was zero (0)

(e) VADOC-PHCU policy states:

(OP 038.3.) Third parties including other offenders, CCAP probationers/parolees, staff members, family members, attorneys, and outside advocates are permitted to assist an offender and CCAP probationer/parolee in filing their request for an administrative remedy relating to allegations of sexual abuse. (5-ACI-3D15; §115.52[e], §115.54, §115.252[e], §115.254)

Third parties are also permitted to file such requests on behalf of an offender or CCAP probationer/parolee.

- If a third-party files such a request on behalf of an offender or CCAP probationer/parolee, the alleged victim 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 pursue personally any subsequent steps in the administrative remedy process.*
- If the offender or CCAP probationer/parolee declines to have the request processed on their behalf, staff must document the offender's or CCAP probationer's/parolee's decision.*

(OP 866.1) Third Party Assistance - Third parties must be able to assist offenders in completing grievances relating to allegations of sexual abuse and sexual harassment and must be permitted to file such requests on behalf of offenders. (§115.51[c], §115.52[e])

a. If a third party files such a request on behalf of an offender, the offender must agree to have the request filed on their behalf.

- If the offender does not agree, staff must document the decision and the grievance must not be accepted.*
- If the offender does agree, assistance from fellow offenders or staff members may continue through all stages that remain.*

b. Any third party filing of a request related to allegations of sexual abuse or sexual harassment must be forwarded to the PREA Compliance Manager. c. For all other grievances, third parties are permitted to assist only in the completion of the Regular

	<i>Grievance 866_F1.</i> The number of grievances alleging sexual abuse filed by offenders in the past 12 months in which the offender declined third-party assistance, containing documentation of the offender's decision to decline was zero (0) (f) VADOC-PHCU policy states: <i>(OP 940.4.) Disciplinary action may be brought against a CCAP probationer/parolee for filing a complaint/grievance related to alleged sexual abuse only where the CCAP demonstrates that the CCAP probationer/parolee filed the grievance in bad faith; in consultation with the Regional PREA Analyst. (§115.252[g])</i> In the past 12 months, the number of offender grievances alleging sexual abuse that resulted in disciplinary action by the agency against the offender for having filed the grievance in bad faith was zero (0) VADOC-PHCU provides multiple ways for offenders to report allegations of sexual abuse and sexual harassment including a formal grievance process. The Auditor reviewed the agency's policies and procedures, and interviewed staff and offenders. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #038.3, (Pg. 13) 2. Action Alliance MOU 3. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) 4. Zero Tolerance PREA Postings (English & Spanish) Interviews: 1. PREA Compliance Manager 2. Action Alliance Interview 3. Random offender interviews The Auditor conducted a formal interview with the PREA Compliance Manager. The

PREA Compliance Manager stated victim advocates may accompany victim of sexual abuse during the forensics examination, during interviews and meet with offenders as needed for follow-up care.

During a phone interview with Action Alliance they revealed that victim advocates can accompany the victim when requested by the victim and the advocate is contacted by the facility, law enforcement or hospital to accompany the victim. The Auditor asked the advocate if other supportive services are provided to offenders. The advocate stated other crisis intervention and supportive services are offered including one-on-one counseling. The advocate stated offenders can and do contact Action Alliance through the hotline or by confidential written correspondence.

The Auditor conducted formal interviews with offenders. Each was asked if the facility provides them with contact information of a community organization that provides emotional support services to sexual abuse victims. Not all offenders interviewed were aware of the community support services. The offenders who stated they were not aware were asked if they have seen posters on the walls in the living units and other areas in the facility. The offenders had noticed information posted on the walls and stated they have not read them. Those offenders were also asked if they were provided information during the intake process and if they received Handbook.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) VADOC-PHCU provides offenders with access to outside victim advocates for emotional support services related to sexual abuse by giving offenders mailing addresses and telephone numbers, including toll-free hotline numbers, of local, State, or national victim advocacy or rape crisis organizations, this information is located in the PHCU Handbook and on printed and painted posters in each housing unit and in other common areas. "ZERO TOLERANCE for Sexual Abuse and Sexual Harassment" posters include the following information for accessing outside services.

How do I get help? What if I just want to talk to someone?

- Meet with a Psychology Associate at this facility (note: they are required to report if you disclose abuse)
- To contact an outside advocate for free emotional support dial #55 (option 2) or write to Action Alliance, P.O. Box 17115, Richmond, VA 23226

Calls to the outside advocate are confidential and DOC does not have access to the recordings

During the site review, the auditor observed mail drop boxes in various locations throughout the facility. Interviews with staff revealed that outgoing mail is not opened or searched and there are no restrictions on offenders sending mail to external reporting entities, outside emotional support services, and/or legal mail.

	(b) VADOC-PHCU policy states: <i>(OP #038.3) Staff will inform offenders and CCAP probationers/parolees, prior to giving them access to free outside confidential support services, 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. (§115.53[b], §115.253[b])</i> (c) The VADOC-PHCU is covered by a department wide MOU with the Virginia Sexual and Domestic Violence Action Alliance (VSDVAA) which states they agree to provide a Hotline with contact information, Social Services and Victim advocates, which also includes participation in forensic exams, investigations and may also include follow-up visits or communications. The Auditor was provided a copy of the MOU and verified the agreement for services. The auditor verified the availability of services with Action Alliance staff, as well as facility mental health staff. The Auditor also placed a test call to the hotline from the facility to verify this was a viable method for the offenders to utilize. The Auditor reviewed the agency's policies, procedures, Offender Handbook, Offender education materials, staff training materials, Zero-Tolerance Poster, Memorandum of Understanding, training records, and interviewed staff and offenders and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #038.3, (Pg 8) 2. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) 3. VADOC Third Party Reporting Form 4. VADOC website - https://vadoc.virginia.gov/offender-resources/prison-rape-elimination-act/ Interviews: 1. Random staff interviews 2. Random offender interviews

Staff were asked during interviews if they were required to accept third-party reports of sexual abuse or sexual harassment. Each staff member informed the Auditor they are required to accept all allegations of sexual abuse and sexual harassment. Staff informed the Auditor they accept the report, immediately inform a supervisor, and promptly document the allegation on a report.

The Auditor asked offenders if they understood they could have a family member, other offender or any other person report an allegation on their behalf; offenders understood they could.

Site Review Observations:

1. Observations during on-site review of physical plant

(a,b) VADOC-PHCU policy

(OP #038.3) Third parties including other offenders, CCAP probationers/parolees, staff members,

family members, attorneys, and outside advocates are permitted to assist an offender and CCAP probationer/parolee in filing their request for an administrative remedy relating to allegations of sexual abuse. (5-ACI-3D15; §115.52[e], §115.54, §115.252[e], §115.254)

a. Third parties are also permitted to file such requests on behalf of an offender or CCAP probationer/parolee.

i. If a third party files such a request on behalf of an offender or CCAP probationer/parolee, the alleged victim 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 pursue personally any subsequent steps in the administrative remedy process.

ii. If the offender or CCAP probationer/parolee declines to have the request processed on their behalf, staff must document the offender's or CCAP probationer's/parolee's decision.

b. The DOC public web site provides contact information on how to report sexual abuse and sexual harassment on behalf of an offender or CCAP probationer/parolee. (§115.54, §115.254)

The VADOC website (<https://vadoc.virginia.gov/offenders-and-probationers/prison-rape-elimination-act/>) contained the following information for making a third-party report.

Report Abuse

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

	• Call the 24/7 confidential reporting hotline at 1-855-602-7001 • File a complaint by completing the Third-Party Reporting Form. The form is also available in Spanish. • Send an email to PREAGrievance@vadoc.virginia.gov You can find more details in Operating Procedure 866.2 Offender Complaints - Community Corrections. The Auditor determined the VADOC-PHCU accepts all reports, including third-party reports, of sexual abuse and sexual harassment. The public is informed through the facility's website how to make third-party reports on behalf of offenders. The Auditor reviewed the agency's policies, procedures, website, investigative reports, training and education documents, Offender Handbook, posters, conducted interviews with staff, contractors and offenders and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #030.4 (Pg.10) 2. VADOC OP #038.1, (Pg 5) 3. VADOC OP #038.3, (Pg 9) 4. VADOC OP #720.2, (Pg 3) 5. VADOC OP #720.7, (Pg 8) 6. VADOC OP #730.2, (Pgs 7-8) 7. VADOC OP #801.6, (Pg 1) 8. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) Interviews: 1. Superintendent Interview 2. PREA Compliance Manager Interview 3. Random Staff Interviews Site Review Observations:

1. Observations during on-site review of physical plant

(a) VADOC-PHCU requires 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. It also requires staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against offenders or staff who reported an incident of sexual abuse or sexual harassment. Lastly, staff must report immediately and according to 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. Interviews conducted with staff showed they understood their duty to report any instances or suspected instances of sexual abuse. Staff was also aware of their duty not to discuss the allegations with anyone not directly involved in the response and investigation.

(b) Apart from reporting to designated supervisors or officials, the PHCU staff refrains 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. The staff was able to clearly articulate during the interviews the importance of keeping the information confidential.

(c) VADOC-PHCU medical and mental health staff inform offenders of their duty to report, and the limitations of confidentiality, at the initiation of services

(d) VADOC-PHCU does not regularly house offenders under the age of 18, if the victim is considered a vulnerable adult staff must report the allegation to the designated State or local services agency under applicable mandatory reporting laws

(e) PHCU staff report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to their immediate supervisor, Agency PREA Coordinator, or designee for investigation. Staff interviewed were aware of their reporting responsibilities.

The Auditor concluded staff and contractors are aware of the requirement to report any knowledge, suspicion, or information related to sexual abuse and sexual harassment. Staff understands the requirement to maintain confidentiality with the information. Interviews with medical and mental health practitioners reveal they understand the requirements for reporting sexual abuse which occurred in the community, in a confinement setting. The Auditor reviewed agency policies, procedures, investigative reports, training materials, interviewed staff, medical and mental health practitioners and offenders and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #038.3, (Pg 9) 2. VADOC OP #730.2, (Pg 6) 3. VADOC OP #830.6, (Pg 1) 4. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) Interviews: 1. Random Staff Interviews 2. PREA Compliance Manager Interview 3. Superintendent Interview Random staff interviews indicate they are clear about their duty to act immediately if an offender is at risk of sexual abuse. Staff were able to articulate the steps they would take and act immediately to protect the offender. Staff indicated they would immediately remove the offender from the situation, keep them separate and safe, and find an alternate place for them to stay or be housed pending an investigation or further action. Staff stated they would ensure the offender was kept safe, away from the threat and an initial investigation is completed by the supervisor. Classification staff and facility leadership would also be notified. Higher level staff including the Superintendent interviewed by the Auditor were knowledgeable of their responsibility for the protection of offenders identified as being at imminent risk of sexual abuse. Options include relocating the offender to a different housing unit at the facility or transferring the offender to another facility. These actions are determined on a case-by-case basis Site Review Observations: 1. Observations during on-site review of physical plant (a) According to VADOC policy, when the agency learns that an offender is subject to a substantial risk of imminent sexual abuse, the PHCU will take immediate action to protect the offender. The PHCU reported one instance of substantial risk of imminent sexual abuse during the reporting period. The offender was subsequently moved from the unit. Interviews with the Superintendent and PREA Compliance Manager indicated any information received that alleges an offender is at substantial risk of imminent sexual abuse would require immediate removal of the offender and to

	isolate the threat. In the past 12 months, the number of times the agency or facility determined that an offender was subject to a substantial risk of imminent sexual abuse was zero (0) The Auditor concluded the VADOC-PHCU takes immediate and appropriate actions to ensure the protection of offenders who are identified at a substantial risk of imminent sexual abuse. The Auditor reviewed facility policies, procedures, classification records, investigative records, housing records, conducted interviews with staff and offenders, made observations and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #030.4, Pg 10 2. VADOC OP #038.3, Pg 9 Interviews: 1. Superintendent Interview 2. PREA Compliance Manager Interview The Superintendent and PREA Compliance Manager stated that upon receiving an allegation that a offender was assaulted at another facility, the Superintendent would call the Facility Head at the facility where the alleged assault occurred, followed by an email to document the notification. The Superintendent stated she would make the notification within 72 hours of receiving the information but typically would make the notification as soon as he receives it. The Superintendent stated that if she receives notification from another facility that a former offender has alleged sexual abuse while incarcerated at PHCU, he would ensure the facility investigator is notified, and an investigation would immediately be initiated. Site Review Observations: Observations during on-site review of physical plant (a) VADOC policy states that upon receiving an allegation that an offender was

	sexually abused while confined at another facility, the Superintendent/Designee will notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. During the past 12 months, the number of allegations the facility received that a offender was abused while confined at another facility was zero (0). (b) VADOC policy states that within 72 hours of receipt of an allegation an offender was sexually abused while confined at another facility, the receiving Superintendent/designee shall notify the Superintendent/designee where the incident was alleged to have occurred and the agency PREA Coordinator. (c) The VADOC-PHCU documents all such notifications (d) The Agency PREA Coordinator will initiate an investigation on any notifications that they receive from another facility. In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was zero (0). The VADOC-PHCU Superintendent fully understands the requirement to report allegations to other confinement facilities and to ensure allegations received are investigated. Staff members at the VADOC-PHCU understand the agency's requirement to immediately report allegations of sexual abuse and sexual harassment so allegations can be investigated. The Auditor reviewed the agency's policies, procedures, completed notifications and interviewed staff and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #030.4, (Pg. 6) 2. VADOC OP #038.3, (Pg. 10) 3. VADOC OP #075.1, (Pg. 6) 4. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) 5. Staff Training Documents Interviews:

1. Random Staff Interviews
2. Investigator Interview

During random staff interviews, security staff was asked to explain their steps they would take following an alleged sexual abuse reported to them. All staff interviewed said that they would notify their supervisor after separating the offenders and waiting for further instructions. The staff were able to describe their response procedures and the steps they would take, including separating the alleged perpetrator and victim and securing the scene and protecting potential evidence. The Auditor was informed the scene would be sealed and remain so until the assigned Investigator arrived to process the scene.

An interview with the Investigator indicated that once the initial steps were done and the scene was secure, SIU would be notified, depending on the nature of the investigation.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) VADOC-PHCU staff upon learning of an allegation that an offender was sexually abused, and is the first security staff member to respond to the report is required to separate the alleged victim and abuser, preserve and protect any crime scene until appropriate steps can be taken to collect any 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, if the abuse occurred within a time period that still allows for the collection of physical evidence and 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.

In the past 12 months, the number of allegations that an offender was sexually abused was zero (0).

Of these allegations of sexual abuse in the past 12 months, the number of times the first security staff member to respond to the report separated the alleged victim and abuser was one (0).

In the past 12 months, the number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence was zero (0).

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence was zero (0).

	Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report requested 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 was zero (0). Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating was zero (0). (b) If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. Of the allegations that an offender was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was zero (0). Of those allegations responded to first by a non-security staff member, the number of times that staff member requested that the alleged victim not take any actions that could destroy physical evidence was zero (0). Of those allegations responded to first by a non-security staff member, the number of times that staff member notified security staff zero (0). The Auditor determined both security and non-security personnel are knowledgeable in their duties as first responder. The Auditor reviewed agency policies, procedures, investigative records, training records, conducted interviews with staff and contractors and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard
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115.65 Coordinated response	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #038.3, (Pg 10)

	2. VADOC OP #075.1, (Pg 6) 3. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) 4. VADOC Sexual Assault Response Checklist Form 5. PHCU PREA Response Plan 6. PHCU PREA Response Checklist Interviews: 1. Random Staff Interviews 2. PREA Compliance Manager Interview 3. Medical/Mental Health Staff Interviews 4. Investigator Interview The Auditor conducted formal interviews with security staff who act as first responders. Each was asked to explain the actions they take following an incident of sexual abuse. Each staff member understood their responsibilities when responding to an incident of sexual abuse. Staff provided answers consistent with their coordinated response plan. Facility leadership and supervisors articulated their responsibilities in accordance with their coordinated response plan as well. The Auditor conducted formal interviews with facility medical and mental health practitioners. Each explained their responsibilities in response to a sexual abuse incident. Investigators informed the Auditor of their responsibilities while conducting an administrative investigation and coordinating and assisting in criminal investigations. Site Review Observations: 1. Observations during on-site review of physical plant (a) VADOC policy requires a written coordinated response plan for each facility to coordinate actions taken in response to an incident of sexual abuse and the notification procedures among staff first responders, administration, central office, medical and mental health practitioners, investigators, and victim advocate services. The Auditor determined VADOC-PHCU's coordinated response plan includes actions to ensure personnel respond appropriately to incidents of sexual abuse. The Auditor reviewed policies, procedures, investigative records and interviewed staff. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. Memo to all facilities Interviews: 1. Regional PREA/ADA Analyst Site Review Observations: 1. Observations during on-site review of physical plant Memorandum explaining non-applicability <i>"In accordance with the Code of Virginia, collective bargaining is prohibited. Per § 40.1-57.2, "no state, county, municipal, 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."</i> Based upon the review and analysis of all of the available evidence, the auditor has determined that this standard does not apply

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. OP 038.3, pgs 13-14 2. OP 075.7, pg 2 3. OP 135.2, pg 7 4. PREA Retaliation Monitoring Forms 5. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)

Interviews:

1. PREA Compliance Manager Interview

During the interview with the PREA Compliance Manager he indicated that when monitoring for retaliation, he reviews disciplinary charges and Incident Reports and any other actions related to the offender, including documents maintained in the offender's file and their electronic record. He stated that anytime anything changes he will look at those actions. He also indicated he will make referrals to medical and mental health as needed. The monitoring will also include periodic status checks. He indicated that the monitoring period is 90 days but would be extended if needed.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) VADOC policy outlines a process to protect all offenders and staff that report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other offenders or staff, and shall designate which staff members or departments are charged with monitoring retaliation. The PHCU PREA Compliance Manager is responsible for monitoring.

(b) VADOC-PHCU has multiple protection measures, such as housing changes or transfers for offender victims or abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offenders or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

(c) The PREA Compliance Manager will for at least 90 days following a report of sexual abuse, monitor the conduct and treatment of offenders or staff who reported the sexual abuse and of offenders who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by offenders or staff, and shall act promptly to remedy any such retaliation. The PREA Compliance Manager also monitors any offender disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The PREA Compliance Manager may continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

The number of times an incident of retaliation occurred in the past 12 months was zero (0)

(d) The PREA Compliance Manager conducts status checks and ensures that information is documented.

(e) The PREA Compliance Manager also monitors any individual who cooperates with an investigation and who expresses a fear of retaliation, and they will take appropriate measures to protect that individual against retaliation.

	VADOC-PHCU provided “PREA Retaliation Monitoring Forms” for the offenders who had made allegations over the past 12 months with the preaudit documentation. These were also reviewed with the PREA Compliance Manager during the site review. The VADOC-PHCU has designated specific staff (PREA Compliance Manager) responsible for monitoring acts of retaliation against offenders and staff as required by this standard. The staff member responsible for monitoring for retaliation was well educated in her responsibilities of such. The Auditor reviewed the agency’s policies and procedures, investigative reports, monitoring forms and conducted formal interviews with staff and offenders and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP 425.4, (Pg 6,7,12,21) 2. VADOC OP 830.5, (Pg 8,9) 3. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) Interviews: 1. Superintendent Interview 2. PREA Compliance Manager Interview 3. Regional PREA/ADA Analyst Site Review Observations: Observations during on-site review of physical plant (a) VADOC-PHCU policy states that an inmate is admitted into protective custody when there is documentation that protective custody is warranted and no reasonable alternative is available. The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was zero (0).

	The number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement was zero (0). From a review of case files of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged was zero (0). The Auditor concluded the VADOC-PHCU has a policy that includes the elements of PREA standard 115.43 to ensure inmates receive privileges, programming, education, and work opportunities when placed in Protective Custody after suffering sexual abuse. The Auditor reviewed the agency's policies, procedures, classification records, housing records, made observations, and interviewed staff to determine the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC #OP 030.4, (Pg. 10-11) 2. VADOC #OP 038.3, (Pg. 11,12,15) 3. VADOC Investigations Matrix 4. SIU Specialized PREA Training 5. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) 6. Investigative Case Log Report Interviews: 1. Facility Investigator Interview 2. SIU Interview (Phone) The Auditor conducted a formal interview with the facility's designated PREA Investigators. The Auditor asked the Investigators to describe the process when investigating an allegation. She stated she interviews the victim, alleged perpetrator, witnesses, and staff, if applicable. She will review the scene, and preserve any evidence, if necessary. In accordance with the standard, she may gather and preserve

direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. She reviews criminal histories on all offenders involved, disciplinary history, incident reports, and classification actions. The investigator reviews prior reports and complaints of sexual abuse involving the suspected perpetrator. The investigator reviews video footage if applicable, telephone recordings, staff logs, and any other relevant items which could be considered evidence to support the determination. She keeps facility leadership advised of the progress of investigation. If at any point during the investigation she feels there could be potential criminal charges involved, the investigation would be reviewed and forwarded to the Special Investigation Unit (SIU).

During a phone interview with the SIU Investigator he indicated that after being assigned an investigation he would gather and review the initial reports. He stated he interviews the victim, alleged perpetrator, witnesses, and staff, if applicable. He will review the scene, and preserve any evidence, if necessary. In accordance with the standard, he may gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. HE reviews criminal histories on all offenders involved, disciplinary history, incident reports, and classification actions. The investigator reviews prior reports and complaints of sexual abuse involving the suspected perpetrator. The investigator reviews video footage if applicable, telephone recordings, staff logs, and any other relevant items which could be considered evidence to support the determination.

Additionally, if applicable he will contact the Commonwealth Attorney for referral and consultation as warranted. The Investigators stated they begin the investigation immediately after receiving an allegation.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) VADOC policy ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

(b) Where sexual abuse is alleged, the VADOC uses investigators who have received specialized training in sexual abuse investigations as required by 115.34 and the Agency PREA Coordinator will be notified immediately.

(c) VADOC Investigators will gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. All reports will be provided to the VADOC Investigators as soon as possible.

(d) VADOC SIU Investigators are responsible for the criminal investigations that maybe referred for prosecution.

The number of substantiated allegations of conduct that appear to be criminal that

	were referred for prosecution since the last PREA audit was zero (0). (e) An interview conducted with the Facility Investigator confirms that the credibility of an alleged victim, suspect or witness is on an individual basis and not on the basis of that individual's status as an offender or staff. The VADOC investigates all allegations of sexual abuse. (f) VADOC-PHCU conducts administrative investigations in an effort to determine whether staff actions or failures to act contributed to the abuse. All reports include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and finding. (g) VADOC staff provides written report that contains a thorough description of physical, testimonial, and documentary evidence to Investigators. (h) VADOC-PHCU retains all written reports referenced for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. (i) VADOC policy states 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. (j) Auditor not required to audit this provision (k) VADOC staff provides all of their internal reports to the PREA Compliance Manager and Facility Investigator as soon as possible following an allegation. VADOC staff cooperates with investigators as requested. The Auditor determined that VADOC investigators conduct appropriate, objective and thorough sexual abuse and sexual harassment investigations. Facility Investigators have received appropriate training to conduct sexual abuse and sexual harassment investigations in a confinement setting. Each allegation in the previous 12 months, including sexual harassment and sexual abuse, was investigated by a trained facility Investigator. The facility referred all criminal allegations to the VADOC Special Investigation Unit for criminal investigation. The Auditor reviewed facility policy, procedures, investigative records, training records, interviewed staff and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining

	compliance with the standard: 1. VADOC OP #135.2, (Pg. 5) 2. VADOC OP #861.1, (Pg. 32) 3. VADOC Memo Preponderance of Evidence Standard Interviews: 1. Facility Investigator Interview 2. SIU Interview (Phone) During interviews with the Facility investigator and SIU Investigator, the auditor was informed the agency's policy requires investigators use a preponderance of evidence to substantiate an allegation of sexual abuse or sexual harassment. The Investigators were questioned about the meaning of preponderance. Both explained preponderance is more evidence one way or the other. Investigators stated 51 percent would substantiated the allegation. Site Review Observations: 1. Observations during on-site review of physical plant (a) VADOC policy requires that a facility investigate the allegation and indicates a standard of a preponderance of the evidence or a lower standard of proof for determining if allegations are substantiated. The SIU Criminal Investigator and/or the facility's PREA Investigator investigates the allegation and indicates a standard of a preponderance of the evidence or a lower standard of proof for determining if allegations are substantiated, unsubstantiated or unfounded. The Auditor determined facility Investigators utilize a preponderance of evidence as the basis to substantiate sexual abuse and sexual harassment allegations. The Auditor reviewed the agency's policy; procedures, investigative report and interviewed facility investigators. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard:

1. OP 030.4, pg 11
2. OP 038.3, pg 12
3. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
4. Offender PREA Notification Letters

Interviews:

1. Facility Investigator Interview
2. SIU Investigator Interview (Phone)

During interviews, the Facility Investigator informed the Auditor that they notify offenders of the results of an investigation at the conclusion of the investigation. The Auditor asked who informs the victim when criminal charges are placed on the abuser or the abuser has been convicted. The PREA Compliance Manager would make those notifications when they are received from the Special Investigations Unit (SIU). The Auditor was informed by the Facility Investigator that they maintain a good working relationship with the SIU and would have no problem obtaining that information.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) Following an investigation into an offender's allegation that he suffered sexual abuse the PHCU informs the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The notification is in writing regardless of the outcome of the investigation.

The number of criminal and/or administrative investigations of alleged offender sexual abuse that were completed by the agency/facility in the past 12 months was zero (0).

Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of offenders who were notified, verbally or in writing, of the results of the investigation was zero (0).

(b) The facility investigator provides the notification in writing to the offender.

The number of investigations of alleged offender sexual abuse in the facility that were completed by an outside agency in the past 12 months was zero (0).

Of the outside agency investigations of alleged sexual abuse that were completed in the past 12 months, the number of offenders alleging sexual abuse in the facility who were notified verbally or in writing of the results of the investigation was zero (0).

(c) Following an offender's allegation that a staff member has committed sexual abuse against the offender, the facility investigator will subsequently inform the offender whenever: the staff member is no longer posted within the offender's unit, the staff member is no longer employed at the facility, the agency learns that the

	staff member has been indicted on a charge related to sexual abuse within the facility or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. (d) Following an offender's allegation that he has been sexually abused by another offender, the facility investigator will 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 or staff learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. (e) All such notifications or attempted notifications are documented and the notifications are kept in the investigative file. In the past 12 months, the number of notifications to offenders that were provided pursuant to this standard was zero (0). Of those notifications made in the past 12 months, the number that were documented was zero (0). (f) Auditor is not required to audit this provision The Auditor concluded the VADOC informs offenders of investigative findings after the conclusion of an investigation. The Auditor reviewed facility policies, procedures, notifications to offenders and conducted interviews with Investigators. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #135.1, (Pg 11) 2. VADOC OP #135.2, (Pg 5) Interviews: 1. Superintendent Interview 2. Random Staff Interviews During interviews with staff, each staff member was aware of the agency's policy making termination the presumptive disciplinary sanction for engaging in an act of

sexual abuse. The facility's command staff has a zero-tolerance approach and disciplines staff for violating the agency's sexual abuse and sexual harassment policies. Interviews with command staff reveal the facility recommends termination of a staff member who engages in sexual abuse with an offender.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) VADOC policy states that staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse/harassment policies.

(b) VADOC policy states termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse.

In the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies was zero (0).

In the past 12 months, the number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies was zero (0).

(c) VADOC policy states disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall 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.

In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse) was zero (0).

(d) The terminations for violations of agency sexual abuse and harassment or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies was zero (0).

The VADOC has appropriate policies to ensure agency personnel who violate sexual abuse or sexual harassment policies are appropriately disciplined and that appropriate agencies are notified. The Auditor conducted a review of the agency's policies, procedures, investigative files and disciplinary records and interviewed staff.

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

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #027.1, (Pg. 12) 2. VADOC OP #135.2, (Pg. 5) Interviews: 1. Contract Staff Interview 2. Volunteer Interview The Auditor conducted formal interviews with contract staff and volunteers. Each individual interviewed was aware of the agency's zero-tolerance policy and discipline sanctions for violating those policies. Each was aware they would be removed from contact with offenders following an allegation of sexual abuse and would be removed from facility access if found to have engaged in such acts. They were also aware the facility reports such actions to law enforcement for criminal investigation. Site Review Observations: 1. Observations during on-site review of physical plant (a) VADOC policy states contractors and volunteers who engage in sexual abuse are prohibited from contact with offenders and shall be reported to law enforcement agencies and relevant licensing bodies. In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of offenders was zero (0) (b) VADOC policy states contractors and volunteers who engage in sexual abuse are prohibited from contact with offenders and shall be reported to law enforcement agencies and relevant licensing bodies. Volunteers and contract staff are made aware of the agency's sexual abuse and sexual harassment policies during their initial orientation. Training is provided to contractors and volunteers by facility personnel. At the completion of their training each signs an acknowledgement form noting their understanding of the provided training. The training educates volunteers and contract staff that violations of sexual abuse and sexual harassment policies are subject to removal as well as criminal prosecution. The Auditor verified all volunteers and contractors received the training. The VADOC maintains appropriate policies to ensure contract staff and volunteers at

	the VADOC are removed from offender contact after committing an act of sexual abuse or sexual harassment. The Auditor reviewed the agency's policies, procedures, training documents, and conducted formal interviews with contract staff and volunteers. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #038.3, (Pg 4) 2. VADOC OP #038.3, (Pg 8,9) 3. VADOC OP #820.2, (Pg 4,5) 4. VADOC OP #830.3, (Pg 6) 5. VADOC OP #861.1, (Pg 6,8,11,12,15,21) Interviews: 1. Facility Investigator Interview 2. Medical/Mental Health Interviews During the interview with the Facility Investigators the Auditor asked if they had placed disciplinary charges against an offender for violating sexual abuse and sexual harassment policies. They indicated there was one in the last year. Additionally, the Auditor was informed disciplinary charges are placed on offenders following a criminal or administrative finding of sexual abuse or harassment. The Auditor asked the investigators if an offender had ever been disciplined for filing a false allegation. Neither were aware of any. The Auditor conducted formal interviews with medical and mental health practitioners. The Auditor was informed counseling, therapy and other interventions are offered to address and correct underlying reasons or motivations for committing acts of sexual abuse if the offender requests such. The Auditor was informed an offender's participation in such interventions would not hinder the offender's ability to attend programming or other privileges. Mental health staff stated they do try to address underlying issues for perpetrators of sexual abuse when requested. Site Review Observations: Observations during on-site review of physical plant

	(a) Offenders at VADOC-PHCU are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse or following a criminal finding of guilt for offender-on-offender sexual abuse. Offenders are made aware of the disciplinary process which is located in the VADOC-PHCU Offender Handbook. In the past 12 months, the number of administrative findings of offender-on-offender sexual abuse that have occurred at the facility was zero (0) In the past 12 months, the number of criminal findings of guilt for offender-on-offender sexual abuse that have occurred at the facility was zero (0) (b) The VADOC-PHCU Offender Handbook reflects that sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories. (c) The PHCU disciplinary process considers whether an offender's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Medical and Mental Health also discussed during the audit that they have discussed an offender's mental disabilities prior to a sanction being given. (d) The PHCU provides therapy and other counseling services. (e) The VADOC-PHCU will discipline an offender for sexual contact with staff only upon a finding that the staff member did not consent to such contact. (f) For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred does not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. (g) The VADOC-PHCU has a zero-tolerance policy concerning sexual contact. The Auditor discovered the agency maintains policies that align with PREA standard 115.78 Discipline Sanctions for offenders. Facility personnel ensure the policy is applied when choosing whether to discipline an offender for reporting or participating in an act of sexual abuse. The Auditor reviewed the facility's policies, procedures, investigative records, interviewed staff, medical and mental health practitioners. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard:

1. VADOC OP #425.4, (Pg 3)
2. VADOC OP #701.3, (Pg 7)
3. VADOC OP #730.2, (Pg 6)

Interviews:

1. Medical Staff Interview
2. Mental Health Staff Interview

The Auditor conducted formal interviews with medical and mental health staff. Medical practitioners stated they complete a medical screening for every offender during the intake process. The Auditor asked if mental health staff are notified of offender that discloses prior abuse. Both stated mental health does meet with those offenders within 14 days for a follow up.

Medical staff stated they only share victimization information with mental health personnel. The Auditor asked who has access to medical records. The Auditor was informed only medical personnel have access. Each was asked what they would do if they felt they needed to share information regarding victimization. The Auditor was informed medical personnel would ask for written informed consent from the offender before doing so.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) As outlined in the VADOC policy; if an offender indicates during the intake screening process they have experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, PHCU staff ensures the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 days of intake.

In the past 12 months, the percent of inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner is 100%

In the past 12 months, the percent of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow-up meeting with a mental health practitioner is 100%

(b) Any information related to sexual victimization or abusiveness that occurred in an institutional setting is 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. Medical and Mental Health staff are directed to notify VADOC-PHCU security staff immediately upon learning of any information regarding sexual abuse. (c) The PHCU does not regularly house offenders under the age of 18. Medical and Mental Health practitioners obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting. The Auditor concluded offenders are offered a follow-up with a medical or mental health practitioner after reporting they have suffered sexual victimization. Medical and mental health practitioners inform only staff who inform decision regarding information related to sexual victimization or abusiveness. The Auditor reviewed the agency's policies, procedures, offender medical and classification records, conducted interviews with medical and mental health practitioners and offenders. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #038.3, (Pg 10) 2. VADOC OP #075.1, (Pg 6) 3. VADOC OP #720.4, (Pg 5) 4. VADOC OP #720.7, (Pg 7,8) 5. VADOC OP #730.2, (Pg 7) Interviews: 1. Medical Staff Interview 2. Mental Health Staff Interview Site Review Observations 1. Observations during on-site review of physical plant (a) VADOC policy states offender victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment, the nature and scope of which

	are determined by medical and mental health practitioners according to their professional judgment. (b) VADOC-PHCU staff act as security staff first responders, if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, the security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners. (c) VADOC-PHCU staff confirmed that offender victims of sexual abuse while incarcerated are offered timely information about and timely access to sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. (d) Treatment services are 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. The Auditor determined the facility provides offenders access to timely and unimpeded emergency medical services. Medical practitioners provide offender victims with sexually transmitted infections prophylaxis. The Auditor reviewed the agency's policies, procedures, medical records, investigative records, Offender handbook and interviewed staff, victim advocates and offenders. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #720.1, (Pg 3) 2. VADOC OP #720.4, (Pg 5) 3. VADOC OP #720.7, (Pg 9) 4. VADOC OP #730.2, (Pg 7,8) Interviews: 1. Medical Staff Interview 2. Mental Health Staff Interview

Site Review Observations:

1. Observations during on-site review of physical plant

- (a) Whenever an employee knows or suspects, or receives an allegation from any source regarding patient sexual abuse, the employee will immediately notify the Responsible Health Authority.
- (b) Prophylactic treatment and follow-up care for sexually transmitted or other communicable diseases (e.g., HIV, Hepatitis B) are offered to all victims, as appropriate.
- (c) Victims of sexual abuse will be referred to a community facility or local emergency room for treatment or gathering of forensic evidence.
- (d) This portion of the standard is non-applicable; PHCU is an all-male facility.
- (e) This portion of the standard is non-applicable; PHCU is an all-male facility.
- (f) Offender victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.
- (g) Medical co-payment fees are not imposed to offenders for any medical services.
- (h) Mental Health - After any emergency treatment is provided, health care staff will notify mental health staff of event. An immediate referral, including after hours, is the preferred referral format in case of an abuse.

VADOC-PHCU staff had protocols in place to assist in expediting an offender to Sovah Health for emergency services. In an instance that the hospital has an advocate on site they will accompany the victim during the exam. Otherwise, PHCU staff will contact the Regional PREA/ADA Analyst or Action Alliance directly to provide a victim advocate upon request from the offender during the forensic medical examination.

Interviews with the medical staff confirmed that offenders (victims) of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services. Medical staff indicated that services begin immediately upon notification of a victim of sexual abuse from the supervisor or any other staff to contact the hospital and medical practitioner. All notifications are completed to the appropriate individuals and to follow the medical staff's directive regarding any forensic examination. The medical and mental health staff interviews indicated the scope of services is in accordance to their professional judgment, policy and any physician orders or protocols. All orders are documented in the offender's medical/mental health record. Medical staff has a tracking system of documenting all PREA incidents that occur at the facility.

Medical staff's interviews also indicated that a referral could be made to the hospital to begin any sexually transmitted infection prophylaxis treatment/services and orders for follow-up services. Mental health services would begin when the victim is available

	once the forensic examination has been completed at the hospital. Medical staff interviews indicated mental health staff would see the victim no later than 24 hours of an incident and provide one-on-one counseling and make available outside emotional support services and follow-up care. The facility's medical and mental health practitioners offer counseling, treatment, sexually transmitted infection prophylaxis, testing and make referrals for continued care when necessary. The services provided to offender victims are consistent with a community level of care. The Auditor reviewed policies, procedures, medical records, interviewed medical and mental health practitioners and the forensic nurse. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. OP 038.1, pgs 10-12 2. OP 038.3, pg 14 3. PHCU PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) Interviews: 1. Superintendent Interview 2. PREA Compliance Manager Interview 3. Regional PREA/ADA Analyst 4. Facility Investigator 5. Medical Staff Interview Interviews with the PREA Compliance Manager, Facility Investigator and Superintendent confirms if there is an incident that required a review it is completed as required. The staff stated that the review team follows a formatted document to ensure all elements of the standard are considered. The staff stated the incident review team discusses recommendations for improvement and include those recommendations on the final report, which is approved by the Superintendent. An interview with the PCM confirms that a report of the findings, including recommendations for improvement, would be completed, and submitted for inclusion in the file. The Superintendent will review the recommendations. The PCM also stated recommendations would be implemented, or the reasons for not doing so would be

	documented. Site Review Observations: 1. Observations during on-site review of physical plant (a) VADOC policy requires 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. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only “unfounded” incidents was zero (0). (b) Reviews ordinarily occur within 30 days of the conclusion of the investigation. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only “unfounded” incidents was zero (0). (c) The review team includes the Superintendent, PREA Compliance Manager, Regional PREA/ADA Analyst, facility investigator, medical and mental health staff. (d) The review team considers whether the allegation and/or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility. The review team examines the area of the facility where the incident occurred to assess whether physical barriers in the area may enable abuse. The review team assesses the adequacy of staffing levels in that area during different shifts and whether monitoring technology should be deployed or augmented to supplement supervision by staff. (e) VADOC policy requires the implementation of recommendations or documents its reasons for not doing so. VADOC-PHCU reported zero (0) incidents which required a PREA Report Incident Review which occurred in the facility during the reporting period. The Auditor determined the facility does conduct incident reviews within 30 days of the conclusion of each substantiated and unsubstantiated sexual abuse investigation. The Incident Review Team documents the performance of each incident review. The Auditor reviewed the agency’s policies, procedures, Incident Review reports, training records, investigative record and conducted interviews with staff. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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Auditor Overall Determination: Meets Standard

Auditor Discussion

The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard:

1. VADOC OP #038.3, (Pg 19)
2. VADOC-PHCU Annual Reports
3. BJS Surveys

Interviews:

1. PREA Compliance Manager Interview
2. Regional PREA/ADA Analyst

Site Review Observations:

1. Observations during on-site review of physical plant

(a) The VADOC-PHCU collects accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions.

(b) The Facility PREA Compliance Manager aggregates the incident-based sexual abuse data at least annually and submits it to the Region PREA/ADA Analyst and posts it on the VADOC website. <https://vadoc.virginia.gov/general-public/prison-rape-elimination-act-reports/>

(c) The incident-based data includes data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

(d) VADOC maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

(e) VADOC obtains incident-based, aggregated data from all facilities which it contracts with for the confinement of its offenders.

(OP #038.3) Incident-based and aggregated data is collected from every private facility with which the DOC contracts for the confinement of offenders and CCAP probationers/parolees. (§115.87[e], §115.287[e])

(f) VADOC upon request provides all such data from the previous calendar year to the Department of Justice.

The last request for data was provided to the DOJ in 2023.

	The Auditor observed evidence the facility collects and aggregates and analyses sexual abuse data annually. The reported data is derived from a standardized set of definitions. The Auditor reviewed the agency’s policies, procedures, website, Annual Report and interviewed staff. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #038.3, (Pg 14,15) 2. VADOC-PHCU Annual Reports 3. VADOC website - https://vadoc.virginia.gov/general-public/prison-rape-elimination-act-reports/ Interviews: 1. PREA Compliance Manager Interview 2. Regional PREA/ADA Analyst Site Review Observations: 1. Observations during on-site review of physical plant (a) The Regional PREA/ADA Analyst collects, reviews and aggregates data pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training by identifying problem areas, taking corrective action on an ongoing basis and prepares an annual report of its findings (b) VADOC-PHCU annual report includes 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 (c) The PHCU’s annual report is prepared by the Regional PREA/ADA Analyst and approved by the Director of Corrections and made available to the public on the VADOC website. https://vadoc.virginia.gov/general-public/prison-rape-elimination-act-reports/

	(d) VADOC indicates the reasons for material redacted when it redacts information from the reports were the publication would present a clear and specific threat to the safety and security of a facility. The Auditor concluded the agency completes an annual review of collected and aggregated sexual abuse data and includes such data from the review in an annual report. The facility attempts to addresses problem areas and corrective actions taken on an annual basis. The annual report is approved by the Sheriff and published on the agency's website. The Auditor reviewed the agency's policies, procedures, website, Annual Report and interviewed staff. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Virginia Department of Corrections (VADOC) Patrick Henry Correctional Unit (PHCU) provided the following documents to assist the auditor in determining compliance with the standard: 1. VADOC OP #038.3, (Pg15) 2. VADOC website - https://vadoc.virginia.gov/general-public/prison-rape-elimination-act-reports/ Interviews: 1. Regional PREA/ADA Analyst Site Review Observations: 1. Observations during on-site review of physical plant (a) VADOC-PHCU has policies that protect the security of information. Policy OP 038.3 the PREA policy states "All data collected on allegations of sexual abuse at DOC facilities must securely retained. " Policy OP 050.1 Offender Records Management governs the establishment, utilization, content, privacy, secure placement, preservation, and security of offender records; the dissemination of information from these records, and instructions for retiring or destroying inactive records (b) VADOC-PHCU makes all aggregated sexual abuse data readily available to the public at least annually through its website. - https://vadoc.virginia.gov/general-public/prison-rape-elimination-act-reports/

	(c) VADOC removes all personal identifiers before making aggregated sexual abuse data publicly available. (d) VADOC maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection. The Auditor reviewed the facility's policy, procedures, website, annual report, interviewed staff. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed the Virginia Department of Corrections (VADOC) web page https://vadoc.virginia.gov/general-public/prison-rape-elimination-act-reports/. The page has posted audit reports for their forty-six (46) facilities. The auditor had access to the entire facility and was able to conduct confidential staff and offender interviews and was provided documentation as need to assess compliance with the standards. Offenders were aware they could send confidential correspondence to the auditor. Pre-audit postings were seen in all areas of the facility. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed the Virginia Department of Corrections (VADOC) web page https://vadoc.virginia.gov/general-public/prison-rape-elimination-act-reports/. The page has posted audit reports for their forty-six (46) facilities. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

Appendix: Provision Findings**115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
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Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
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115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Has the agency employed or designated an agency-wide PREA Coordinator?	yes
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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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
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115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
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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
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115.12 (a) Contracting with other entities for the confinement of inmates

If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
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115.12 (b) Contracting with other entities for the confinement of inmates

Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes
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	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

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

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	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
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	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
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	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.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	yes

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	Audit contents and findings	

(f)			
	<table><tr><td data-bbox="316 174 1289 568">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.)</td><td data-bbox="1289 174 1490 568">yes</td></tr></table>	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
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