**PREA Audit Report**  ☑ INTERIM  ☑ FINAL

**JUVENILE FACILITIES**

Date of report: May 17, 2017

<table>
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<tr>
<th>Auditor Information</th>
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<tbody>
<tr>
<td><strong>Auditor name:</strong> Walter Sipple</td>
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<tr>
<td><strong>Address:</strong> Post Office Box 2502, Mount Pleasant, South Carolina 29465</td>
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<td><strong>Email:</strong> <a href="mailto:waltersipple@comcast.net">waltersipple@comcast.net</a></td>
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<tr>
<td><strong>Telephone number:</strong> 843-323-8851</td>
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<tr>
<td><strong>Date of facility visit:</strong> April 20-21, 2017</td>
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<tr>
<th>Facility Information</th>
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<tbody>
<tr>
<td><strong>Facility name:</strong> Lorrie Yeager Jr. Juvenile Detention Center</td>
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<tr>
<td><strong>Facility physical address:</strong> 907 Mission Drive, Parkersburg, West Virginia 26101</td>
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<td><strong>Facility mailing address:</strong> <em>(if different from above)</em> Same as above</td>
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<td><strong>Facility telephone number:</strong> 304-420-4860</td>
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<tr>
<td><strong>The facility is:</strong> ☑ State</td>
<td>☐ County</td>
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<tr>
<td>☐ Federal</td>
<td>☐ Private for profit</td>
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<td>☐ Military</td>
<td>☐ Municipal</td>
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<td>☐ Private not for profit</td>
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<td><strong>Facility type:</strong> ☑ Detention</td>
<td>☐ Other</td>
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<td><strong>Name of facility's Chief Executive Officer:</strong> Travis White</td>
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<tr>
<td><strong>Number of staff assigned to the facility in the last 12 months:</strong> 11 out of 51</td>
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<td><strong>Designed facility capacity:</strong> 25</td>
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<td><strong>Current population of facility:</strong> 19</td>
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<tr>
<td><strong>Facility security levels/inmate custody levels:</strong> Detention and Commitment Offenders</td>
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<td><strong>Age range of the population:</strong> 12-20</td>
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<tr>
<td><strong>Name of PREA Compliance Manager:</strong> Christina Rine</td>
<td><strong>Title:</strong> Correctional Counselor</td>
</tr>
<tr>
<td><strong>Email address:</strong> <a href="mailto:Christina.M.Rine@wv.gov">Christina.M.Rine@wv.gov</a></td>
<td><strong>Telephone number:</strong> 304-420-4860</td>
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| Agency Information |  |
|-------------------|  |
| **Name of agency:** Division of Juvenile Services |  |
| **Governing authority or parent agency:** *(if applicable)* Division of Military Affairs and Public Safety |  |
| **Physical address:** 1200 Quarrier Street, 2nd Floor, Charleston, West Virginia 25301 |  |
| **Mailing address:** *(if different from above)* Same as above |  |
| **Telephone number:** 304-558-9800 |  |

| Agency Chief Executive Officer |  |
|--------------------------------|  |
| **Name:** Stephanie Bond | **Title:** Division Director |
| **Email address:** Stephanie.j.bond@wv.gov | **Telephone number:** 304-558-9800 |

| Agency-Wide PREA Coordinator |  |
|-------------------------------|  |
| **Name:** Tim Harper | **Title:** PREA Coordinator |
| **Email address:** timothy.v.harper@wv.gov | **Telephone number:** 304-558-9800 |
AUDIT FINDINGS

NARRATIVE

The Prison Rape Elimination Act audit of the Lorrie Yeager Jr. Juvenile Center, located at 907 Mission Drive in Parkersburg, West Virginia, was conducted on April 20-21, 2017, to determine continued compliance with the Prison Rape Elimination Act standards of August 20, 2012. The audit was performed by Walter Sipple, United States Department of Justice Prison Rape Elimination Act independent certified juvenile facilities auditor, and no others, operating as an independent contractor with no conflict of interest. The Lorrie Yeager Jr. Juvenile Center is a male and female juvenile detention facility and part of the West Virginia Department of Military Affairs and Public Safety. The agency and facility operates under the jurisdiction of the State of West Virginia. The facility is classified as a level 4 detention, 25 capacity facility, consisting of one housing unit. The housing unit has 18 single rooms, 2 segregation cells, and 4 multiple occupancy cells/rooms.

The pre-audit preparation included a thorough review of all documentation and material submitted by the agency and facility along with data included in the completed Pre-Audit Questionnaire. The auditor received primary documentation which consists of policy and secondary documentation which consists of procedure on a flash drive for review prior to the on-site phase of the audit process. The documentation reviewed also consisted of agency and facility policies, procedures, forms, education materials, training curriculum, organization charts, posters, brochures, quarterly reports, inmate population reports, memorandums of agreement, signed training rosters, community-based contact information, facility schematic, and other Prison Rape Elimination Act related materials that were provided to demonstrate compliance with the Prison Rape Elimination Act standards. This review prompted a series of questions that were reduced to writing and submitted to the Prison Rape Elimination Act Coordinator and Prison Rape Elimination Act Compliance Manager for review. Answers to the questions were submitted by the agency Prison Rape Elimination Act Coordinator and facility Prison Rape Elimination Act Compliance Manager and reviewed by the auditor prior to the on-site phase of the audit process.

The mission statement for the West Virginia Division of Juvenile Services is, as follows: “The Division of Juvenile Services is committed to providing effective, beneficial services to youth in the Juvenile Justice system that promote positive development and accountability, while preserving community safety and sustaining a work environment predicated upon principles of professionalism, with dignity and respect for all.”

An entrance meeting was held with senior level facility staff and the auditor during the first day of the on-site phase of the audit. The following people were in attendance: security head, Prison Rape Elimination Act compliance manager/counselor; and the agency Prison Rape Elimination Act coordinator. The auditor was allowed access to the agency and facility in order to conduct the audit. Following the entrance meeting, the auditor toured and observed operations at the facility. The auditor contact information was posted throughout the facility prior to the on-site phase of the audit. Lorrie Yeager staff was fully cooperative with the auditor and audit process. The auditor was impressed with how the agency incorporated the Prison Rape Elimination Act standards into agency policy to the extent that some policy mirrors the language of the standards.

A map of the facility was provided by the staff which consisted of the resident housing area. A list of staff, volunteers, and contractors to include assignments and roles was provided to the auditor along with listings by room for a random and objective selection of residents for interviews. The auditor reviewed compliance with the Prison Rape Elimination Act standards based on a review of agency policy, procedure, practice, daily activities, documentation, observation, and interviews with staff and residents during the on-site portion of the Prison Rape Elimination Act audit. Interviews were conducted with outside agencies, to include but not limited to, Parkersburg Family Crisis Intervention Center, Prison Rape Elimination Act Resource Center, Just Detention International, Charleston Area Medical Center Women and Children’s Hospital, Camden Clark Memorial Hospital in Parkersburg, the Children’s Listening Center (child advocacy) of Parkersburg, West Virginia.

An objective random sampling of staff, volunteer, resident, and contractor interviews was selected from a series of lists presented to the auditor by the facility. Last names were randomly selected from an alphabetically ordered list. A total of twelve agency and facility staff were interviewed per random sampling from the auditor. The auditor conducted an after-hours visit on April 20, 2017 to interview the night shift staff along with the duty nurse. A total of eight residents were interviewed per random sampling from the auditor, along with special category residents along with a sampling identified during the in-take screening process. An exit interview was conducted at the end of the on-site visit by the auditor with the Prison Rape Elimination Act compliance manager/counselor, director of security, head of medical, and the agency Prison Rape Elimination Act coordinator.
DESCRIPTION OF FACILITY CHARACTERISTICS

The Lorrie Yeager Jr. Juvenile Detention Center is located within a residential area at 907 Mission Drive, in Parkersburg, West Virginia. Parkersburg is a city in and the county seat of Wood County, West Virginia. It is the state’s third-largest city and the largest city in the Parkersburg-Marietta-Vienna Metropolitan Statistical Area. The population was 31,492 according to the 2010 census.

The facility has a rated bed capacity of twenty-five (25) beds, with a current population listed at the time of the on-site portion of the audit of twenty-two (22) residents. The average resident daily population was approximately twenty-one (21) residents. The facility consists of one male and female housing unit that is a direct supervision style in design.

The Lorrie Yeager Jr. Juvenile Detention Center provides several facility programming elements, which includes, but is not limited to the following: Medical services, mental health services, assessments and counseling, voluntary religious services, library services, recreational participation, group activities, and educational services. The education program is operated by the West Virginia State Department of Education through the Office of Institutional Education. The educational program provides the residents with an opportunity to learn both traditional and basic life skills educational components. In addition, educational assessment, classification and counseling services are available to the residents. Medical services include onsite medical services as needed, initial health screening, and a physical examination if needed. Sick call is held at least once per day. Prescribed medications and treatment as well as referral follow-up and outside medical care is available as needed. Mental health services include a screening and intake evaluation, individual counseling and treatment, and psychological evaluations on an as needed basis. Religious services and programs are provided by community volunteers. The facility offers a variety of indoor and outdoor recreational activities.

The Lorrie Yeager Jr. Juvenile Center resident handbook, dated April 5, 2016, includes a specific section on the Prison Rape Elimination Act. The juvenile orientation program utilizes what the agency calls, R.E.S.P.E.C.T., which stands for Reduction, Education, Safety, Planning, Elimination, Compliance, and Treatment. The introduction of the program states, “The Division of Juvenile Services is committed to your safety and the safety of staff. You have the right to serve your sentence with dignity and free from sexual abuse, sexual harassment, and retaliation. The Division of Juvenile Services has zero tolerance regarding sexual abuse and sexual harassment within its facilities. This means we do not tolerate any level of sexual harassment, misconduct, or assault in the facilities. Every effort will be made to prevent sexual abuse and harassment from occurring, every allegation will be investigated, every perpetrator punished, and every victim offered services”. The resident handbook also specifically lists the following reporting options for all residents:

- Facility Prison Rape Elimination Act Counselor.
- Any staff member.
- Facility Prison Rape Elimination Act Compliance Manager.
- Request to see the nurse or counselor.
- Locked facility Prison Rape Elimination Act Box.
- Grievance Box at facility.
- West Virginia State Troopers at (304) 558-7777.
- Child Abuse Hot Line at 1-800-352-6513.
- Division of Juvenile Services Sexual Abuse toll-free hotline at 1-855-366-0015.
- Division of Juvenile Services Website at www.wvdjs.state.wv.us.
- West Virginia Supreme Court Juvenile Commission via United States mail utilizing available pre-addressed envelopes provided at the facility with postage pre-paid.
- Report to anyone you trust, including fellow residents, staff members, family members, attorneys, and outside advocates, shall be permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of residents.
- See your Counselor to call the Division of Juvenile Services hotline at 1-855-366-0015; emailing at DJSPREACoordinator@wv.gov or visiting www.wvdjs.state.wv.us.
SUMMARY OF AUDIT FINDINGS

The Lorrie Yeager Jr. Juvenile Center was initially audited, as part of the first cycle auditing process, from July 23-24, 2015. The results of that audit consisted of 100% of the Prison Rape Elimination Act or 41 standards being met and in compliance. The current audit is part of the second cycle auditing process. The pre-audit preparation included a thorough review of all primary/policy and secondary/practice documentation and materials submitted by the agency and facility along with the data included in the completed Pre-Audit Questionnaire to demonstrate compliance with the standards. The auditor was impressed with the thoroughness of the documentation submitted.

The auditor conducted a thorough facility-wide audit. There were six (6) sexual assault and sexual abuse harassment allegation cases reported during the past 12 month period from the date of the audit. Five (5) were referred for administrative investigation and one (1) was referred for criminal investigation. The criminal investigation conducted by the West Virginia State Police concerning an allegation of an incident prior to placement in any juvenile facility was determined to be unsubstantiated. The auditor received no inquiries or requests for an interview. The auditor commended the agency and facility staff in being proactive in being compliant with the Prison Rape Elimination Act standards.

Overall, the interviews of residents reflected that they were aware of and understood the Prison Rape Elimination Act protections and the agency’s zero tolerance policy. Residents receive written materials at intake that provide detailed information about Prison Rape Elimination Act protections, the multiple ways to report sexual abuse or sexual harassment and ways to protect themselves from abuse. Residents were able to articulate to the auditor what they would do and who they would tell if they were sexually abused. All facility staff interviewed indicated they had received detailed Prison Rape Elimination Act training and could articulate the meaning of the agency’s zero tolerance policy.

The auditor was impressed with the design and location of the facility within an active residential neighborhood in Parkersburg, West Virginia. The facility appeared to blend in with the surrounding homes and neighborhood. The facility had several seasoned or experienced staff that have served together at the same facility for many years creating a good working relationship in fulfilling the overall mission of the Lorrie Yeager Jr. Juvenile Center. The agency and facility staff were very helpful throughout the audit process. The auditor was impressed with the resident handbook that specifically includes a section on the Prison Rape Elimination Act along with different contact information. Overall, the auditor was impressed with the facility and staff.

The auditor determined that the Lorrie Yeager Jr. Juvenile Center is 100% compliant with all of the Prison Rape Elimination Act Standards. The auditor determined that the agency and facility exceeded Standard 115.311 due to the creation of and commitment to Prison Rape Elimination Act Counselors at the facility level in addition to a Compliance Manager and an agency Coordinator; exceeded Standard 115.318 due in part to the facility video monitoring system and number of cameras along with the size and scope of the system when compared to the size and resident capacity of the facility; exceeded Standard 115.332 due to the creation of a thorough and well organized handbook as well as leaflets and training handouts; exceeded Standard 115.351 due to the numerous reporting options and process the agency and facility established for the residents; exceeded Standard 115.388 due to the thoroughness of the agency annual report and commitment to process improvement.

Number of standards exceeded:  5 (115.311, 115.318, 115.332, 115.351, 115.388)

Number of standards met:  36

Number of standards not met:  0

Number of standards not applicable:  0
Standard 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

☑  Exceeds Standard (substantially exceeds requirement of standard)
☐  Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐  Does Not Meet Standard (requires corrective action)

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.

Auditor comments: Specifically in accordance with Prison Rape Elimination Act Standard 115.311(a)-1, (a)-2, (a)-3, (a)-4, (a)-5, the agency Prison Rape Elimination Act policy (151.00) states: “The Division of Juvenile Services has zero tolerance for the sexual misconduct of any staff against any resident in its custody or participating in any Division of Juvenile Services program. This policy is established to help prevent sexually abusive behavior, educate staff to intervene properly and timely, detect incidents, perpetrators and victims of sexually abusive behavior, investigate reported incidents and discipline and/or prosecute perpetrators. This policy applies to both staff-on-resident and resident-on-resident abuse”. Per agency policy 138.00, the agency will ensure progressive discipline for agency employees is consistent with applicable policies, regulations, and statutes.

Pursuant to West Virginia Code of Law 61-8B-10, any person employed by the Division of Juvenile Services who engages in sexual intercourse or sexual intrusion with a person who is incarcerated in the State of West Virginia is guilty of a felony. The agency has a written policy (151.00) toward sexual abuse and sexual harassment and outlines the agency’s approach to preventing, detecting, and responding to such conduct. The agency employs an agency-wide Prison Rape Elimination Act coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the Prison Rape Elimination Act standards. The Prison Rape Elimination Act coordinator reports to the division director of the West Virginia Division of Juvenile Services. The Prison Rape Elimination Act compliance manager for the Lorrie Yeager Jr. Juvenile Center is a counselor and reports directly to the facility director as reflected in the facility organizational chart.

Specifically in accordance with Prison Rape Elimination Act Standard 115.311(b)-1, (b)-2, (b)-3, (c)-1, (c)-2, (c)-3, (c)-4, the Prison Rape Elimination Act coordinator is a senior level agency executive and the facility Prison Rape Elimination Act compliance manager reports to the director of the facility (policy 103.00). The agency policy mandates a zero tolerance policy and an implementation plan is in place outlining how the agency will implement the zero-tolerance approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The agency and facility has an easy to understand organizational chart and the auditor was provided a copy during the pre-audit phase of the audit. Sam Perdue staff acknowledged an understanding of the zero tolerance policy.

The auditor reviewed the agency policies and procedures (policy 151.00, 138.00, and 103.00); observed facility practices; reviewed data provided by the facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. The auditor was impressed with the level of commitment that both the agency level coordinator and facility level compliance manager had toward compliance with the standards. The auditor noted the Lorrie Yeager Jr. Juvenile Center’s compliance manager’s dedication toward compliance. It was evident during the interview process. The auditor determination that the facility exceeds the Standard is based on such factors as the creation of an additional position called the Prison Rape Elimination Act Counselor. Specifically, the position is defined as an employee designated by the Division of Juvenile Services within the facility as one who is trained for special counseling of a resident who may have been abused under the definitions of policy 151.00. This position is in addition to the Prison Rape Elimination Act Compliance Manager and Coordinator. The agency written policy 151.00 and 103.00 along with procedure, outlines how the agency will implement the zero-tolerance approach to preventing, detecting, and responding to sexual abuse and sexual harassment.

Based on the above listed information, the auditor determination is that the facility exceeds the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

• West Virginia Division of Juvenile Services Policy Number 138.00: Employee Progressive Discipline dated July 1, 2016.
• West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
• West Virginia Division of Juvenile Services Policy Number 103.00: Table of Organization dated July 1, 2015.
• West Virginia Division of Juvenile Services Organizational Chart and Lorrie Yeager Jr. Juvenile Center Organizational Chart.
• Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, facility staff, and documentation of training and credentials.
• West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
Standard 115.312 Contracting with other entities for the confinement of residents

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The Ronald C. Mulholland Juvenile Center located in Wheeling, West Virginia, is a contracted facility. The auditor interviewed the agency Prison Rape Elimination Act coordinator as well as contracting officials. The auditor received confirmation of non-agency confinement or detention facilities that confine or detain agency residents in accordance with agency policy (104.00 and 151.00). Specific contract documentation was received in reference to an organization called, Youth Services System, Inc., confining residents at 87 15th Street, in Wheeling, West Virginia. The former contract, DJS140006, is stamp dated October 31, 2013 and the most recent one is dated July 8, 2015 and April 4, 2016, Order Number CMA 0621 8423 DJS 1600000001. The facility changed its name from the Northern Regional Detention Facility to the Ronald C. Mulholland Juvenile Center. The facility received its first Prison Rape Elimination Act audit on October 7-8, 2015 and was found compliant with 100% of the Standards. The agency is in compliance with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

• Ronald C. Mulholland Juvenile Center Prison Rape Elimination Act Audit dated October 7-8, 2015.
• West Virginia Division of Juvenile Services Policy Number 104.
• West Virginia Division of Juvenile Services Policy Number 151: Prison Rape Elimination Act dated July 1, 2016.
• West Virginia Division of Juvenile Services Contract DJS140006 and DJS 1600000001.
• Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, facility staff, and documentation of training and credentials.
• West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
• West Virginia Code of Laws 15-2D-3: Employee Background Checks.

Standard 115.313 Supervision and monitoring

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The Lorrie Yeager Jr. Juvenile Center Facility Director provided the auditor with copies of the facility staffing plan, dated January 26, 2017. The West Virginia Division of Juvenile Services Policy 128.00 states: “It is the policy of the West Virginia
Division of Juvenile Services to maintain a mechanism that ensures that the staffing requirements for all categories of personnel are determined on an ongoing basis so that the residents have access to staff, programs, and services. Additionally, the Division mandates that each facility will have a minimum staffing requirement that includes all mandatory posts per shift per day. The Lorrie Yeager Jr. Juvenile Center staff develops, implements, and documents a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against sexual abuse. Specifically, the facility takes the following into consideration in accordance with Prison Rape Elimination Act Standard 115.313(a)-(1), (a)-(2), (a)-(3), (b)-(1), (b)-(2), (c)-(1), (c)-(2), (c)-(3), (c)-(4), (c)-(5), (d)-(1), (e)-(1): (e)-(2), (e)-(3), (e)-(4):

1) Generally accepted detention and correctional practices;
2) Any judicial findings of inadequacy;
3) Any findings of inadequacy from Federal investigative agencies;
4) Any findings of inadequacy from internal or external oversight bodies;
5) All components of the institution’s/facility’s/center’s physical plant (including “blind-spots” or areas where staff or residents may be isolated);
6) The composition of the resident population;
7) The number and placement of supervisory staff;
8) Institution programs occurring on a particular shift;
9) Any applicable State or local laws, regulations, or standards;
10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse;
11) Any other relevant factors.

In circumstance where the staffing plan is not complied with, the agency shall document and justify all deviations from the plan. Specifically, per agency policy 128.00, the shift supervisor will document via incident report any time that the minimum staffing requirement cannot be met due to limited and exigent circumstances and what measures were utilized to protect the safety and security of the facility. Whenever necessary, but no less frequently than once each year, the agency shall assess, determine, and document whether adjustments are needed to:

1) The staffing plan established pursuant to the standard;
2) Prevailing staffing patterns;
3) The facility’s deployment of video monitoring systems and other monitoring technologies; and
4) The resources the facility has available to commit to ensure adequate staffing levels.

The agency and facility maintains staff ratios of a minimum of 1:8 during resident waking hours and 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances, which are documented. Only security staff is included in these ratios. The auditor noted during the on-site visit that Sam Perdue has an excellent staff-to-resident ratio and is well staffed. Per agency policy 303.00, “It is the policy of the West Virginia Division of Juvenile Services to ensure timely patrols and inspections are conducted and documented by staff”. The facility director and senior staff perform unannounced rounds with entries being documented in a shift log.

The auditor reviewed agency policy (agency policy 128.00, 303.00, and facility policy 1.28-00 and 3.03-00). The agency and facility meets the standard and complies with the standard for the relevant review period. The auditor specifically interviewed the facility director and confirmed the required elements of the staffing plan along with documentation to support compliance. The auditor stressed and emphasized the importance of having and maintaining a thoroughly documented facility staffing plan. The auditor recommended a webinar for future reference and training opportunities titled, “Developing and Implementing a Prison Rape Elimination Act Compliant Staffing Plan”, available from the National Prison Rape Elimination Act Resource Center at www.prearesourcecenter.org.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- Staffing Plan Form submitted by the Lorrie Yeager Jr. Facility Director confirming annual review.
- Lorrie Yeager Jr. Juvenile Services Policy Number 1.28-00: Staffing Requirements dated February 16, 2016.
- Lorrie Yeager Jr. Juvenile Services Policy Number 3.03-00: Patrols and Inspections dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 128.00: Staffing Requirements dated October 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 303.00: Patrols and Inspections dated July 1, 2015.
- Memorandum from the Lorrie Yeager Jr. Juvenile Center Facility Director confirming unannounced rounds and entries in the shift logs.
- Memorandum from the Lorrie Yeager Jr. Juvenile Center Facility Director confirming no deviations from the Staffing Plan.
- Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, facility staff, and documentation of training and credentials.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- West Virginia Code of Laws 49-2-903, 49-5-16a and 49-5E-1.
Standard 115.315 Limits to cross-gender viewing and searches

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The agency and facility has a written policy (308.00, 406.00, 303.00, and 500.00) that prohibits any cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. Per agency policy 308.00, only in unavoidable circumstances, security staff will conduct cross-gender strip searches, and searches of transgender and intersex residents, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs with each search documented and justified via an incident report. Specifically, per memorandum from the facility director, the Lorrie Yeager Jr. Juvenile Center has not conducted cross-gender strip searches or cross-gender visual body cavity searches within the past 12 month period. All facility staff have received training to conduct cross-gender pat down searches and the training is required annually.

The Lorrie Yeager Jr. Juvenile Center Facility Director provided the auditor with written confirmation of a training lesson plan referencing staff training curriculum from the Prison Rape Elimination Act Resource Center website. The agency and facility provided the auditor with complete verifiable documentation addressing compliance with the standard. Specifically, the auditor received PowerPoint and video guidance training developed by the Moss Group in coordination with the Prison Rape Elimination Act Resource Center titled, “Guidance on cross-gender and transgender searches”. The agency and facility meet the Standard and is in compliance for the relevant rating period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Code of Laws 49-2-903, 49-5-16a and 49-5E-1.
- West Virginia Division of Juvenile Services Policy Number 406.00: Bathing and Personal Hygiene dated October 1, 2013.
- West Virginia Division of Juvenile Services Policy Number 308.00: Control of Contraband/Allowable Items dated January 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 303.00: Patrols and Inspectoins dated July 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 500.00: Intake and Admissions dated July 1, 2015.
- Memorandum from facility director confirming compliance with Standard 115.315(a)-2, (a)-3, (b)-2, (b)-3, (d)-1, (e)-1 dated March 28, 2017.
- Training video, lesson plan, and curriculum from the Lorrie Yeager Jr. facility referencing searches.
- Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, facility staff, and documentation of training and credentials.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.

Standard 115.316 Residents with disabilities and residents who are limited English proficient

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: In accordance with the West Virginia Division of Juvenile Services policy 500.01 and the Lorrie Yeager Jr. Juvenile Center policy 5.00-01, the agency and facility takes appropriate steps to ensure that residents 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. The agency 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 to residents who are limited English proficient. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burden, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.

Specifically, per agency policy 500.04, the Resident Handbook includes a resident’s right against discrimination based on race, religion, national origin, sex, disability, or political views in making administrative decisions and in providing access to programs. New residents receive written orientation materials or translations in their own language who are limited English proficient. When a literacy problem exists, a staff member assists the juvenile in understanding the material.

In accordance with Prison Rape Elimination Act Standard 115.316( c)-1,( c)-2, ( c)-3, agency policy 500.01 states, residents with any type of disability including physical, psychiatric, and/or intellectual, will be given an equal opportunity to participate in, benefit from and have meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Another resident may be used to interpret only when all other resources have been exhausted. The facility provided the auditor with a memorandum stating that they have not had any residents requiring such services within the past 12 month period and that coordination has been made with local colleges to assist with any interpreters on an as needed. The auditor was provided with a handout from the West Virginia Commission for the Deaf and Hard of Hearing which is a registry of interpreters. A protocol from the West Virginia Child Advocacy Network and its member Child Advocacy Centers was provided to the auditor for limited English proficiency residents. The auditor was able to confirm compliance with agency policy (151.00, 500.04, and 500.01). The agency and facility is in compliance with the Standard for the relevant rating period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Code of Laws 49-5E-1, 49-5-16a.
- West Virginia Division of Juvenile Services Policy Number 500.04: Resident Handbook dated April 1, 2014.
- Lorrie Yeager Jr. Juvenile Center Policy Number 5.00-01: Reception and Orientation of New Residents, February 16, 2016.
- West Virginia Division of Juvenile Services Policy Number 500.01: Reception and Orientation of New Residents, July 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Resident Handbook dated July 3, 2015 and facility memorandum on interpreter services and data within the past 12 months.
- Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- West Virginia Commission for the Deaf and Hard of Hearing Handout.
- West Virginia Child Advocacy Network and Child Advocacy Centers Protocol for limited English proficiency residents.
- Memorandum from agency dated March 15, 2017, confirming no needed translation or interpretative services for the past 12 month period.

**Standard 115.317 Hiring and promotion decisions**

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.
Auditor comments: The agency and facility considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents. The agency and facility performs a criminal background records check before enlisting the services of any contractor who may have contact with residents. A process is in place for criminal background checks at least every five years for current employees and contractors who may have contact with residents.

The agency and facility does not hire or promote anyone who may have contact with residents, and does not enlist the services of any contractor who may have contact with residents, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, 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; or has been civilly or administratively adjudicated to have engaged in the activity described.

Specifically, per agency policy 131.00, Non-Division of Juvenile Services applicants applying for positions covered by policy shall be subject to a criminal background investigation by Central Office personnel. Per agency policy 129.00, the agency shall consider any incidents of sexual harassment when hiring or promoting any employee. The agency shall consult any State or local child abuse registry for information on substantiated allegations of sexual abuse by any potential hire. The agency shall conduct a criminal background records check and a child abuse registry check at least every five years for all current employees.

An interview with agency and facility staff confirmed compliance with the Prison Rape Elimination Act standard. Each new hire along with volunteers and contractors receive a thorough background screening. This screening specifically includes criminal background checks through the National Crime Information Center. A sampling of new hires or promotions in the last 12 months not only revealed thorough background checks, but a quality recruiting program for new staff.

The auditor reviewed the agency policies and procedures (agency policy 129.00, 125.00, 311.00, 132.00 and 131.00); observed agency and facility practices; reviewed data and documentation provided by the facility staff; and interviewed staff during an on-site visit and tour of the facility. The agency and the Lorrie Yeager Jr. Juvenile Center meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 131.00: Selection and Promotion of Non-Correctional Officer Personnel dated July 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 125.00: Code of Conduct dated January 1, 2017.
- West Virginia Division of Juvenile Services Policy Number 311.00: Contractor/Vendor Escorts and Security Protocol dated July 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 132.00: Competitive Promotion of Correctional Officer Personnel dated July 1, 2014.
- West Virginia Division of Juvenile Services Policy Number 129.00: Conditions of Initial and Continued Employment dated April 1, 2015.
- Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- West Virginia Code of Laws 49-5-16a, 49-5E-1, 49-2-903.
- Memorandum from agency, dated March 17, 2017, confirming employee criminal background checks and review of State child abuse registry.

**Standard 115.318 Upgrades to facilities and technologies**

☑ Exceeds Standard (substantially exceeds requirement of standard)

☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

**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.**
Auditor comments: The auditor conducted a thorough review of the Lorrie Yeager Jr. Juvenile Center video monitoring and camera system. The facility has multiple cameras, forty-seven (47), for being a small in size 25 resident capacity facility.

The residents are kept fully engaged with multiple educational, vocational, and recreational programs. The auditor reviewed the agency policies and procedures (policy 125.00); observed facility practices; reviewed data and documentation provided by the facility staff; and interviewed staff during an on-site visit and tour of the facility. The auditor determined that the agency and facility exceeds the standard for the relevant review period. The auditor justification for exceeding the standard is based on the impressive video monitoring system along with the numerous cameras (47) located throughout the facility.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Facility Schematic.
- Interviews with facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.

**Standard 115.321 Evidence protocol and forensic medical examinations**

- ☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

**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.**

Auditor comments: The Lorrie Yeager Jr. Juvenile Center specifically has a policy 3.24-00 which addresses crime scene and physical evidence preservation. The agency and facility uses a multidisciplinary team investigation protocol for responding to child victims of abuse. It is defined as a group of professionals and paraprofessionals representing a variety of disciplines that interact and coordinate their efforts to identify, diagnose and treat specific cases of child abuse and neglect. When child abuse occurs, a number of professionals become involved in the intervention and investigation of each case in order to protect the victim from harm, provide necessary medical and mental health assessments and assistance and pursue offenders in order to hold them accountable for their actions and protect children from future abuse.

To the extent the agency is responsible for investigating allegations of sexual abuse; the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings, and criminal prosecution. The auditor reviewed agency policy 111, 151, 324, 413, and facility policy 3.24-00 to confirm compliance with the standard. Specifically, the Lorrie Yeager Juvenile Center utilizes a multidisciplinary team investigation protocol for responding to child victims of abuse. The auditor also received a memorandum of understanding between the facility and the West Virginia State Police, specifically the ChildFirst forensic interview protocol. The auditor contacted the Children’s Listening Place located at 4421 Emerson Avenue, number 203, Parkersburg, West Virginia, (304) 917-4437. The facility reported no forensic medical exams conducted during the past 12 months. The agency and facility is in compliance with the standard.

Specifically, agency policy 413.00 states, it is the policy of the agency to ensure that residents are provided health care services appropriate to meet their medical needs. The agency has a contracted medical provider with responsibility pursuant to written contract. Resident 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.

The Charleston Area Medical Center Women and Children’s Hospital is home to the region's largest and busiest Level IV and Level I medical services. It is located at 800 Pennsylvania Avenue, in Charleston, West Virginia. Further information is available at (304) 388-2391 or came.org. The primary goal of the Children’s Advocacy Center (CAC) at Women and Children’s Hospital is to provide children and families professional and compassionate care in order to minimize and reduce the trauma often experienced by children who are possible victims of child abuse. By conducting a thorough evaluation of the child they are able to identify his or her needs and facilitate the provision...
of the services needed. Services Include:

- Forensic interview – an interview conducted by a trained professional with the goal of obtaining factual information about the alleged abuse from the child.
- Medical evaluation – a comprehensive medical check-up by a specialty-certified pediatrician.
- Support services – provide a variety of victim advocacy and case management services to help the child move forward.
- Sexual Abuse Prevention Training – CAC staff provide child sexual abuse prevention training to individuals and groups upon request.

Stewards of Children is a nationally-recognized prevention program that raises awareness and educates adults how to prevent, recognize, and react responsibly to child sexual abuse.

The facility has a memorandum of agreement between the agency and the Children’s Listening Place (children’s advocacy center) of Parkersburg, West Virginia. A credentialed forensic examiner or Sexual Assault Nurse Examiner (SANE) is made available. The West Virginia State Police is the law enforcement agency with primary jurisdictional authority to investigate serious crimes which take place at the facility. Per agency policy 324.00, it is the policy of the agency to ensure the preservation, control, and disposition of all crime scenes and physical evidence obtained in connection with a violation of law is accomplished in a timely and proper manner. This applies to any crime scene in which a law enforcement agency is the primary investigator or any instance of Prison Rape Elimination Act related allegations. At a minimum, procedures shall address preservation of life, chain of custody, evidence handling, and location and storage requirements. The agency and facility protocol is developmentally appropriate for the residents. The auditor received information confirming SANE/SAFE nurse availability at the Charleston Area Medical Center Women and Children’s Hospital. The facility reported no needed forensic exams for the past 12 month period. The agency and facility is compliant with the Standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 413.00: Medical Care and Emergency Medical Procedures dated January 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 324.00: Crime Scene and Physical Evidence Preservation dated April 1, 2014.
- Lorrie Yeager Jr. Juvenile Center Policy Number 3.24-00: Crime Scene and Physical Evidence Preservation dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Memorandum of Agreement and the Children’s Listening Place of Parkersburg, West Virginia.
- Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, and facility staff.
- Institutional Plan (checklist) for First Responders.
- National Institute of Corrections Certificate of Completions for facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- Memorandum from facility director confirming compliance with Standard 115.321(c)-6, (c)-7, (c)-8.

**Standard 115.322 Policies to ensure referrals of allegations for investigations**

☐ Exceeds Standard (substantially exceeds requirement of standard)

☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

**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.**

Auditor comments: In accordance with the West Virginia Division of Juvenile Services and the Lorrie Yeager Jr. Juvenile Center policy 111.00, it is the policy of the agency to establish and maintain a mechanism that ensures that all alleged violations of agency policy are
investigated in a thorough, professional, and impartial manner and to take proactive measures in order to ensure the safety and security of all agency facilities, residents, and staff while preserving public safety. The agency and facility refers all criminal investigations to the state police investigators (West Virginia State Police, 725 Jefferson Road, South Charleston, West Virginia 25309) and conducts administrative investigations at the facility level. The agency has staff investigators assigned. The auditor interviewed the facility investigators and reviewed the sexual abuse and sexual harassment case files during the on-site visit and phase of the audit process.

Per West Virginia Code of Laws 61-8B-10: Any person employed by the Division of Juvenile Services who engages in sexual intercourse or sexual intrusion with a person who is incarcerated in this State is guilty of a felony. The agency and facility has staff sign acknowledgement forms.

The Lorrie Yeager Jr. Juvenile Center reported 6 allegations in the past 12 months that were investigated. The auditor reviewed the agency and facility policies and procedures (policy 324.00, 151.00, and 111.00); observed agency practices; reviewed data provided by the facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. The auditor confirmed the facility investigators completion of specialized investigative training. Based on the above listed information, the agency meets the standard.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Code of Laws 61-8B-10, 49-2-903.
- West Virginia Division of Juvenile Services Policy Number 111.00: Investigative Unit dated October 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Interviews with Agency/Division Agency/Division Director, Agency Investigators, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.

Standard 115.331 Employee training

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: In accordance with the West Virginia Division of Juvenile Services and the Lorrie Yeager Jr. Juvenile Center policy 162.00, the agency and facility performs Prison Rape Elimination Act pre-service and in-service training. Specifically, the agency trains all employees who have contact with residents on the following:

1) Its zero-tolerance policy for sexual abuse and sexual harassment;
2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment; prevention, detection, reporting, and response policies and procedures;
3) Resident’s right to be free from sexual abuse and sexual harassment;
4) The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
5) The dynamics of sexual abuse and sexual harassment in juvenile facilities;
6) The common reactions of juvenile victims of sexual abuse and sexual harassment;
7) How to detect and respond to signs of threatened and actual sexual abuse;
8) How to avoid inappropriate relationships with residents;
9) How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents;
10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; and
11) Relevant laws regarding the applicable age of consent.

Per West Virginia Code of Law 49-6A-2, requires immediate mandatory reporting by employees of the agency to report allegation of child abuse to the Department of Health and Human Resources/Institutional Investigation Unit. The auditor reviewed the agency and facility
policies and procedures (policy 162.00, 335.00, and 151.00) along with secondary documentation submitted with the pre-audit questionnaire; observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. The auditor received specific lesson plans. The training is approximately four hours in length and is comprehensive. The agency and facility meets the standard for this relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 162.00: Training and Staff Development dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 335.00: Facility Child Abuse and Neglect.
- Interviews with Agency/Division Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- Lesson Plan for the Prison Rape Elimination Act Staff Training: Sexual Abuse and Sexual Harassment Prevention/Intervention Program (4 hours in length) and conflict resolution.

Standard 115.332 Volunteer and contractor training

☒ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: In accordance with the West Virginia Division of Juvenile Services and the Lorrie Yeager Jr. Juvenile Center policy 167.00, volunteers and interns shall be required to complete basic facility familiarization concerning security, confidentiality of information, appropriate conduct, Prison Rape Elimination Act guidelines/training, control of contraband, code of ethics, and policies and procedures provided by the facility. Volunteers and interns shall acknowledge in writing that they have received such an orientation and agree to abide by its tenets.

The auditor interviewed both volunteer and contractor staff assigned to the Lorrie Yeager Jr., Juvenile Center. The auditor was impressed with the facility contract staff, from the teachers to the therapist to the nurses. The facility provided the auditor with a volunteer pamphlet or leaflet and handbook. Both are very thorough and organized.

The auditor reviewed the agency and facility policies and procedures (policy 167.00 and 151.00); observed agency and facility practices; reviewed data and documentation provided by the facility staff; and interviewed volunteers and contractors during an on-site visit and tour of the facility. The facility and facility exceeds the standard for this relevant review period. The auditor determination of exceeding the standard is based in part on the Volunteers’ Handbook, Leaflet for Volunteers and Contractors, and interviews.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- Volunteers’ Handbook.
- West Virginia Division of Juvenile Services Policy Number 167.00: Volunteers’ and Citizens’ Involvement dated January 1, 2017.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Leaflet for Volunteers and Contractors.
- Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
Standard 115.333 Resident education

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: In accordance with agency and facility policy 151.00, 502.00, and 5.02-00, the Lorrie Yeager Jr. Juvenile Center has a resident Prison Rape Elimination Act education and orientation program. Prison Rape Elimination Act resident education options were duplicative to include but limited to postings on walls throughout the facility, brochures, handbook, and videos. During the intake process, residents receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Each resident receives additional written information in the form of a resident rules and regulations handbook. The agency and facility provides a comprehensive education to residents regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. The agency and facility utilizes the services of the West Virginia Registry of Interpreters and the Limited English Proficiency Protocol for resident Prison Rape Elimination Act education.

The Prison Rape Elimination Act compliance staff utilizes a resident video as part of the training curriculum. The auditor confirmed Prison Rape Elimination Act related education and training within a very short period of arrival time. Per agency policy 151.00, resident intake information will be communicated orally and in writing via the resident handbook to each resident upon arrival at the facility. Resident training/education of sexual misconduct will take place within three business days after intake and shall include the following topics:

• Definitions of sexually abusive behavior.
• Prevention/intervention strategies the resident can take to minimize his/her risk of sexual victimization.
• Self-protection strategies to help the resident recognize signs of sexual predators.
• Methods of reporting an incident of sexual misconduct against oneself, and for reporting allegations of sexually abusive behavior involving other residents.
• Treatment options and programs available to resident victims of sexual abuse.
• Monitoring, discipline and or prosecution of sexual perpetrators.
• Disciplinary process for those reporting false allegations.

The auditor was impressed that the residents created their own Prison Rape Elimination Act posters which were posted throughout the facility. Involving the residents with such a project encourages their active participation throughout the process. The auditor reviewed the agency and facility policies and procedures (agency policy 151.00, 502.00 and facility policy 5.02-00); observed facility practices; reviewed data and documentation provided by the facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility does meet the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

• West Virginia Code of Laws 49-2-903.
• Limited English Proficiency Protocol.
• West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2015.
• Lorrie Yeager Jr., Juvenile Center Policy Number 5.02-00: Social Services dated February 16, 2016.
• West Virginia Division of Juvenile Services Policy Number 502.00: Social Services dated October 1, 2015.
• Leaflet for Volunteers and Contractors.
• Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, facility staff, and Residents.
• West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
• Facility Resident Intake Sheets.
**Standard 115.334 Specialized training: Investigations**

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: In accordance with the West Virginia Division of Juvenile Services policy 111.00, it is the policy of the agency to establish and maintain a mechanism that ensures that all alleged violations of agency policy are investigated in a thorough, professional, and impartial manner and to take proactive measures in order to ensure the safety and security of all agency facilities, residents, and staff while preserving public safety.

The agency has assigned headquarters level investigators that are coordinated through the Prison Rape Elimination Act coordinator. The auditor confirmed that they received specialized training in accordance with the standard. Specifically, the investigative staff completed National Institute of Corrections investigator training. Any cases that involve criminal investigations are referred to the West Virginia State Police. Specialized training included such things as 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 or prosecution referral. The agency and facility training is in accordance with the Prison Rape Elimination Act standard.

The auditor interviewed the investigator and reviewed investigative files specifically related to Prison Rape Elimination Act investigations. The auditor reviewed the agency and facility policies and procedures (policy 111.00 and 151.00); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility meets the standard and complies with the standard for the relevant review period.

The auditor forwards the following additional resource for agency review: The National Institute of Corrections developed a new online course with the goal of assisting agencies in meeting the requirements of PREA standard 115.334. The course, Investigating Sexual Abuse in a Confinement Setting: “Advanced Investigations”, provides case studies that allow investigators to apply and practice their investigative skills to conduct appropriate investigations in accordance with PREA standards.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Code of Laws 49-2-903.
- National Institute of Corrections Specialized Prison Rape Elimination Act Investigator training.
- West Virginia Division of Juvenile Services Policy Number 111.00: Investigative Unit dated October 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2015.
- Interviews with Agency/Division Director, agency Investigators, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- Memorandum from agency, dated March 17, 2017, confirming specialized investigator training with copies of certificates.

**Standard 115.335 Specialized training: Medical and mental health care**

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The West Virginia Division of Juvenile Services and the Lorrie Yeager Jr., Juvenile Center contracts with a company, PRIMECARE Medical, Inc., for on-site resident medical care. The auditor received a copy of the PRIMECARE Medical, Inc. policy titled, “Federal Sexual Assault Reporting Regulations”. The policy confirms compliance with the Prison Rape Elimination Act Standards. The auditor verified specialized training completion for the facility medical and mental health care staff. Mental health care is provided by PSIMED. Specifically, the nursing staff completed the National Institute of Corrections specialized training for medical and mental health care. The auditor interviewed the facility medical nurse. The medical and mental health staff interviewed was knowledgeable in reference to the Prison Rape Elimination Act training. The agency and facility ensures that all full, part-time, and contract medical and mental health care practitioners who work regularly with residents have been trained in:

1) How to detect and assess signs of sexual abuse and sexual harassment;
2) How to preserve physical evidence of sexual abuse;
3) How to respond effectively and professionally to juvenile victims of sexual abuse/harassment; and
4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

The auditor reviewed the agency and facility policies and procedures (policy 151.00, 162.00 and PRIMECARE Medical policy C, Y-B-05 and 06, PSIMED); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and Lorrie Yeager Jr., Juvenile Center meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Code of Laws 49-5-16a, 49-5E-1.
- National Institute of Corrections Specialized Prison Rape Elimination Act: Behavioral Health Care for Sexual Assault Victims in a Confinement Setting (medical and mental health staff training) and copies of certificates.
- West Virginia Division of Juvenile Services Policy Number 162.00: Training and Staff Development dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- PRIMECARE Medical, Inc., Training and PREA Compliance Contract Confirmation, Number: C,Y-B-05.
- Interviews with Agency/Division Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.

**Standard 115.341 Screening for risk of victimization and abusiveness**

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: In accordance with the West Virginia Division of Juvenile Services and the Lorrie Yeager Jr. Juvenile Center policy 500.01 and 5.00-01, the facility will establish procedures for providing programs for new residents during the reception period and to ensure incoming new residents understand the procedures governing the facility during orientation. Based on interviews with random residents and intake staff, all residents are assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents. Intake screening shall ordinarily take place within 72 hours of arrival and more often is completed within 24 to 48 hours of arrival. Such assessments shall be conducted using an objective screening instrument. The intake screening shall consider, at a minimum, the following criteria to assess resident for risk of sexual victimization:
1) Prior sexual victimization or abusiveness;
2) Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and Whether the resident may therefore be vulnerable to sexual abuse;
3) Current charges and offense history;
4) Age;
5) Level of emotional and cognitive development;
6) Physical size and stature;
7) Mental illness or mental disabilities;
8) Intellectual or developmental disabilities;
9) Physical disabilities;
10) The resident’s own perception of vulnerability; and
11) Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents.

Per agency policy 151.00, staff are responsible for ensuring that, within seventy-two hours of admission, residents receive and review an Intake Orientation pamphlet on sexual misconduct prevention and intervention, preferably by a facility Prison Rape Elimination Act counselor along with receiving training. The agency utilizes the West Virginia Division of Juvenile Services Intake Mental Health Screening and Assessment and the Juvenile Sex Offender Assessment Protocol-II as part of the resident intake process.

The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing residents for risk of being sexually abusive. A resident’s risk level is reassessed from the resident’s arrival when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the resident’s risk of sexual victimization or abusiveness. The agency utilizes the Estimate of Risk of Adolescent Sexual Offense Recidivism (ERASOR) from the SAFE-T Program. The agency also utilizes the Sex Offender Treatment Intervention and Progress Scale.

The agency and facility implements appropriate controls on the dissemination within the agency of responses asked pursuant to this standard or order to ensure that sensitive information is not exploited to the resident’s detriment by staff or other residents. Only limited staff has access to the risk screening form such as medical, mental health, executive director, facility director, as well as the Prison Rape Elimination Act coordinator.

The auditor reviewed the agency and facility policies and procedures (agency policy 151.00, 162.00, 500.00; PRIMECARE Medical policy C,Y-B-05, SPJC-B-05; and facility policy 5.00-01); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and Lorrie Yeager Jr. Juvenile Center meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:
- National Institute of Corrections Specialized Prison Rape Elimination Act: Behavioral Health Care for Sexual Assault Victims in a Confinement Setting (medical and mental health staff training).
- West Virginia Division of Juvenile Services Policy Number 162.00: Training and Staff Development dated January 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 500.01: Reception and Orientation of New Residents dated July 1, 2015.
- Lorrie Yeager Jr. Juvenile Center Policy Number 5.00-01: Reception and Orientation of New Residents dated February 16, 2016.
- West Virginia Division of Juvenile Services Policy Number 500.00: Intake and Admission dated July 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- PRIMECARE Medical, Inc., Training and PREA Compliance Contract Confirmation, Number: C,Y-B-05 and SPJC-B-05.
- Interviews with Agency/Division Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- Estimate of Risk of Adolescent Sexual Offense Recidivism (ERASOR) from SAFE-T Program.
- Sex Offender Treatment Intervention and Progress Scale.
- West Virginia Division of Juvenile Services Intake Mental Health Screening and Assessment.
- Juvenile Sex Offender Assessment Protocol-II.

**Standard 115.342 Use of screening information**

☐ Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☑

Does Not Meet Standard (requires corrective action)

☐

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.

Auditor comments: In accordance with the West Virginia Division of Juvenile Services and the Lorrie Yeager Jr. Juvenile Center policy 500.00 and 5.00-01, the agency and facility ensures that all incoming juveniles undergo thorough screening and assessment at intake and receive thorough orientation to the facility’s procedures, rules, programs, and services. Upon intake, each resident is informed that they may be subject to cross-gender supervision at any time. Notification of cross-gender supervision will also be included in the resident handbook and at the beginning of each shift and when there is a change in gender mix within the unit. The auditor stressed the importance of the screening process. The facility intake staff along with the housing unit counselors’ work together to ensure proper use and follow-up is conducted with the resident screening information. The auditor observed and reviewed the agency’s and facilities risk-based housing decisions and screening form. The agency and facility uses information from the risk screening to inform housing, cell, bed, work, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive. Specifically, per agency policy 500.00, each resident in an agency facility will be housed based on his/her custody and housing assessment. Custody and housing assignments will not be based solely on the resident’s sexual orientation or gender identity. Housing, bed, program, education, and work assignments are based on information obtained from assessments/risk screenings.

Specifically, per agency policy 332.00, the agency establishes guidelines and procedures concerning the placement and housing of residents in temporary or long-term specialized housing. Residents are given the opportunity to be housed in the least restrictive custody. Any resident placed in protective custody either by choice or by staff may only be placed in isolation as a last resort if less restrictive measures are not adequate to keep the resident safe and only until an alternative means of keeping him/her safe can be arranged. Continuation of Specialized Housing for each resident will be based on a seven day perpetual review by the facility director and his or her recommendation to the division director for as long as the resident remains in Specialized Housing due to safety concerns of the resident.

The auditor reviewed the agency and facility policies and procedures (agency policy 332, 162.00, 151.00, 500.00, and facility policy 5.00-00); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and Lorrie Yeager Jr. Juvenile Center meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Code of Laws 49-5-16a, 49-5E-1, 49-2-903.
- National Institute of Corrections Specialized Prison Rape Elimination Act: Behavioral Health Care for Sexual Assault Victims in a Confinement Setting (medical and mental health staff training).
- West Virginia Division of Juvenile Services Policy Number 332.00: Specialized Housing dated January 1, 2017.
- West Virginia Division of Juvenile Services Policy Number 162.00: Training and Staff Development dated January 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 500.00: Intake and Admission dated July 1, 2015.
- Lorrie Yeager Jr. Juvenile Center Policy Number 5.00-01: Reception and Orientation of New Residents dated February 16, 2016.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- PRIMECARE Medical, Inc., Training and PREA Compliance Contract Confirmation, Number: C,Y-B-05.
- Interviews with Agency/Division Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- Notice to Resident of Consideration for Placement on Segregated Housing Form.
- Segregation Prior to Hearing Form.
- Observation Sheet.
- Memorandum from agency, dated March 17, 2017, confirming compliance with Standard 115.342, weekly staff meetings, and information entries into agency computer-based operating system called Offender Information System (OIS).

Standard 115.351 Resident reporting

☒ Exceeds Standard (substantially exceeds requirement of standard)
☐ Met Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The West Virginia Division of Juvenile Services and the Lorrie Yeager Jr. Juvenile Center have multiple ways for resident reporting of sexual abuse and sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. The auditor tested the resident phone system to confirm agency and facility access for resident reports of sexual abuse and sexual harassment to agency and facility officials. The auditor contacted the local rape crisis center and the director confirmed no calls were received from residents within the last year. The auditor also contacted Just Detention International, which is a national advocacy organization, and they stated that they have not fielded any calls or contacts related to the facility. The auditor interviewed residents and they were well informed concerning the resident reporting process for anything related to the Prison Rape Elimination Act. The auditor also confirmed no detentions of juveniles solely for civil immigration purposes.

Per agency policy 151.00, residents have several options for reporting a Prison Rape Elimination Act complaint, which includes, but is not limited to:

- Prison Rape Elimination Act Counselor.
- Any staff member.
- Prison Rape Elimination Act Compliance Manager.
- The nurse or mental health practitioner
- Locked Prison Rape Elimination Act Box.
- Grievance Box.
- West Virginia State Police.
- Child Abuse Hot Line (1-800-352-6513).
- Division’s Sexual Abuse toll-free hot-line (1-855-366-0015).
- Division of Juvenile Services Website (www.djs.wv.gov).
- Supreme Court Juvenile Justice Commission via United States Mail (pre-addressed envelopes provided with postage pre-paid).
- Anyone they trust, including fellow residents, family members, attorneys, and outside advocates. Anyone shall be permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of residents.
- Or emailing DJSPREACoordinator@wv.gov.

The agency has an agreement with the West Virginia Supreme Court of Appeals – Administrative Office Juvenile Justice Commission as an outside agency reporting option for residents as well as other reporting options. The auditor reviewed the agency and facility policies and procedures (agency policy 335.00, 500.00, 322.00, 334.151, and facility policy 3.32-00, Resident Handbook); observed agency and facility practices; reviewed data and documentation provided by the facility staff; interviewed outside organizations; and interviewed residents and staff during an on-site visit and tour of the facility. The auditor tested the resident phones. The auditor determined that the agency and facility exceed the standard for the relevant review period. The determination is based on the numerous reporting options and process that the agency and facility established for residents.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 162.00: Training and Staff Development dated July 1, 2016.
- Lorrie Yeager Jr. Juvenile Center Policy Number 3.32-00: Specialized Housing dated January 1, 2017.
- West Virginia Division of Juvenile Services Policy Number 162.00: Training and Staff Development dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 500.00: Intake and Admission dated July 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 334.00: Resident Rights and Grievance Procedures dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 335.00: Facility Child Abuse and Neglect dated October 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
• PRIMECARE Medical, Inc., Training and PREA Compliance Contract Confirmation, Number: C,Y-B-05.
• Interviews with Agency/Division Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
• West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
• Memorandum from agency, dated March 15, 2017, stating that a resident would not be detained solely for civil immigration purposes.
• Copy of memorandum between agency and West Virginia Supreme Cout of Appeals-Administrative Office Juvenile Justice Commission.

Standard 115.352 Exhaustion of administrative remedies

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The Lorrie Yeager Jr. Juvenile Center Facility Director stated that all resident grievances of a sexual nature, to include harassment, that are received within the facility, are considered Prison Rape Elimination Act complaints and are addressed in a separate manner than the resident grievance procedure. Pursuant to Prison Rape Elimination Act Standard 115.352 and the Division of Juvenile Services Policy 151.00, all Prison Rape Elimination Act complaints were handled well below the allowed time frame and did not have to extend the time frame on grievance as requested in subsection d-4 and d-5.

The agency does not require a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. The agency ensures that a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. The agency issues 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 or per agency policy upon completion of the investigation within 30 days. The agency and facility reported no third-party assistance for residents during the past 12 months. The agency and facility has established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, the agency immediately forwards the grievance to a level of review at which immediate corrective action is taken and provides an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision documents the agency’s determination whether the resident is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. The auditor reviewed agency and facility grievance forms and the facility reported no grievances were processed within the past 12 months related to sexual abuse or sexual harassment.

Specifically, per agency policy 151.00, there is a Prison Rape Elimination Act grievance procedure available to all residents in the custody of the Division of Juvenile Services. Residents are informed of the grievance procedure upon intake at the facility. Staff are to report and document any allegation of sexual misconduct whether made verbally, in writing, anonymously or by a third party. Residents have several options for reporting, which includes, but is not limited to:

• Prison Rape Elimination Act Counselor.
• Any staff member.
• Prison Rape Elimination Act Compliance Manager.
• The nurse or mental health practitioner
• Locked Prison Rape Elimination Act Box.
• Grievance Box.
• West Virginia State Police.
• Child Abuse Hot Line (1-800-352-6513).
• Division’s Sexual Abuse toll-free hot-line (1-855-366-0015).
• Division of Juvenile Services Website (www.djs.wv.gov).
• Supreme Court Juvenile Justice Commission via United States Mail (pre-addressed envelopes provided with postage pre-paid).
• Anyone they trust, including fellow residents, family members, attorneys, and outside advocates. Anyone shall be permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of residents.
• Or emailing DJSPREACoordinator@wv.gov.

All third-party complaints on behalf of residents or former residents will be entered into the OIS computer-based system and forwarded to the Division Prison Rape Elimination Act Coordinator. If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, 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 request the alleged victim to personally pursue any subsequent steps in the administrative remedy process. If the resident declines to have the request processed on his or her behalf, the agency shall document the resident’s decision. The facility will not discipline a resident for filing a grievance alleging sexual abuse unless the investigation demonstrates that the resident filed the grievance in bad faith. Per agency policy 332.00, a resident can request specialized housing for protective custody if they feel unsafe being around the other residents.

The facility director submitted a written memorandum, dated March 28, 2017, stating that the facility has not received any grievances alleging substantial risk of imminent sexual abuse within the past 12 months and that no grievances were filed in bad faith by any resident. The auditor reviewed the agency and facility policies and procedures (policy 332.00, 151.00 and West Virginia Code of Laws 49-5-16a); observed agency and facility practices; reviewed data provided by the agency and facility staff; reviewed the resident handbook concerning the grievance process; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and Lorrie Yeager Jr. Juvenile Center meet the standard for the relevant rating period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

• West Virginia Code of Laws 49-5-16a, 49-5E-1, 49-2-903.
• Memorandum from facility direction, dated March 28, 2017, confirming no grievances filed within the past 12 month period.
• West Virginia Division of Juvenile Services Policy Number 332.00: Specialized Housing dated January 1, 2017.
• West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
• Interviews with Agency/Division Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
• West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.

Standard 115.353 Resident access to outside confidential support services

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The agency and facility has a documented memorandum of agreement with the Children’s Listening Place (child advocacy center), 4421 Emerson Avenue, Number 203, Parkersburg, West Virginia, (304) 917-4437, along with the West Virginia Supreme Court of Appeals – Administrative Office Juvenile Justice Commission for resident access to outside confidential support services. The Division of Juvenile Services hotline is 1-855-366-0015. The auditor personally tested the resident phone system and access numbers during the on-site visit portion of the audit. The auditor also received confirmation point of contact information that addresses potential immigration concerns. The auditor received a copy of the resident handbook and self-addressed envelopes for reporting through the mail that residents can access. The West Virginia State Police is responsible for any criminal investigations.

Specifically, agency policy 333.00 states, the Division of Juvenile Services will ensure the right of all residents to have access to courts and ensure and facilitate residents’ access to counsel and to assist residents in making confidential contact with attorneys and their authorized representatives. Such contact includes, but not limited to, telephone communications, uncensored correspondence, and visits. The Division will ensure that residents have access to outside victim advocates for emotional support services related to sexual abuse by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll free hotline numbers where available. Staff
will inform residents, 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. Per agency policy 509.00, residents shall be permitted to make unrestricted legal calls which shall not be recorded or monitored. This includes call to attorneys, probation officers, and social workers. The agency confirmed no need for translation or interpretative services in the past 12 month period and additional resource with the West Virginia Child Advocacy Network’s contract with Certified Languages International.

Auditor note: The National Center for Victims of Crime recently initiated and launched the Victim Connect Resource Center which is a resource for victims, to include but not limited to, providing critical, confidential assistance through phone, text, and chat along with interpreter services in over 200 languages. These services can be accessed at 1-855-4VICTIM or www.chat.victimconnect.org. The anti-sexual assault organization, RAINN, operates a national hotline at 1-800-656-4673 with access to a range of free services.

The auditor reviewed the agency and facility policies and procedures (policy 151.00-2, 333.00, 332.00, 5.09-00, and 509.00); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and Lorrie Yeager Jr. Juvenile Center meet the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Code of Laws 49-5-16a, 49-5E-1, 49-2-903.
- West Virginia Division of Juvenile Services Policy Number 332.00: Specialized Housing dated January 1, 2017.
- West Virginia Division of Juvenile Services Policy Number 333.00: Resident Access to Courts and Counsel dated October 1, 2015
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 509.00: Telephone, Mail Privileges, and Access to Publications dated January 24, 2014.
- Interviews with Agency/Division Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- Memorandum of Agreement with Children’s Listening Place of Parkersburg (child advocacy center).
- Memorandum of Understanding with the West Virginia Court of Appeals - Administrative Office Juvenile Justice Commission.
- The National Sexual Assault Hotline 1-800-656-HOPE and the West Virginia Foundation for Rape Information and Services.
- Resident Handbook.
- West Virginia Division of Juvenile Services hotline 1-855-366-0015.

Standard 115.354 Third-party reporting

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The auditor confirmed that the agency and facility has policies and procedures, specifically policy 151.00, along with a parent or guardian flier that third-party reports will be accepted. The agency offers opportunities for third-party reporting on the agency website. The auditor verified through staff interviews that they are aware of and concur with reporting requirements in accordance with the agency policy and Prison Rape Elimination Act standard. Third-party reporting is also posted and available on the agency website. The West Virginia Supreme Court of Appeals - Administrative Office Juvenile Justice Commission is located at the Berkeley County Judicial Center, 380 W. South Street, Suite 2102, Martinsburg, West Virginia. The West Virginia State Police are responsible for criminal investigations. The Children’s Listening Place of Parkersburg, West Virginia, is an outside child advocacy organization. The West Virginia Child Abuse Hotline is 1-800-352-6513 and local law enforcement agencies of Parkersburg, West Virginia to include the Wood County Sheriff’s Department at (304) 424-1834 and Parkersburg Police Department at (304) 424-8444, are also outside the agency organizations. The agency-wide third-party reporting options include but not limited to, the following:
The Division’s Sexual Abuse toll-free hotline at 1-855-366-0015.
West Virginia State Police at 304-425-2101.
Child Abuse Hotline at 1-800-352-6513.
Division of Juvenile Services Website at www.djs.wv.gov.
West Virginia Supreme Court Juvenile Justice Commission via United States Postal Service.
Agency PREA Coordinator at DJSPREACoordinator@wv.gov.

Per agency policy 151.00, all complaints filed by a third-party on behalf of residents or former residents will be entered into the OIS System (agency computer-based operating system) and forwarded to the Division Prison Rape Elimination Act Coordinator.

The auditor reviewed the agency and facility policies and procedures (policy 151.00, and 334.00); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and Lorrie Yeager Jr. Juvenile Center meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:
• Memorandum from Agency Prison Rape Elimination Act Coordinator dated March 15, 2017.
• West Virginia Division of Juvenile Services Policy Number 334.00: Residents Rights and Grievance Procedures dated July 1, 2016.
• West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
• Interviews with Agency/Division Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
• West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
• The National Sexual Assault Hotline 1-800-656-HOPE and the West Virginia Foundation for Rape Information and Services.
• West Virginia Division of Juvenile Services hotline 1-855-366-0015.
• West Virginia Division of Juvenile Services Resident Rights Listing.

Standard 115.361 Staff and agency reporting duties
☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The West Virginia Division of Juvenile Services and the Lorrie Yeager Jr. Juvenile Center 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 any facility, whether or not it is part of the agency; retaliation against residents or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Per agency policy 111.00, whenever the Director of the Investigative Unit believes that there is sufficient, credible information that an event of a serious nature that could result in criminal charges has taken place, notification of the West Virginia State Police shall be made as soon as practical. All sexual assault and sexual abuse allegations will be reported immediately. Per agency policy 335.00, all employees, professional visitors, volunteers, contract staff, and/or other agency employees that have knowledge of, or is witness to any sexual misconduct, are required to report such.

Other than reporting to designated supervisors or officials, staff shall not reveal 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. Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report...
sexual abuse, and inform residents of the practitioner’s duty to report, and the limits of confidentiality, at the initiation of services.

The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility’s designated investigators. West Virginia Code of Laws 49-1-3 and 49-2-803(a) specifically consists of reporting requirements in reference to any form of child abuse and neglect. If the alleged victim is a vulnerable adult under a State or local vulnerable person’s statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

The auditor reviewed the agency and facility policies and procedures (agency policy 111.00, 334.00, 151.00, 335.00, and facility policy 3.35-00) along with West Virginia Code of Laws 49-1-1; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 334.00: Residents Rights and Grievance Procedures dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 335.00: Facility Child Abuse and Neglect dated October 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 111.00: Investigative Unit dated October 1, 2015.
- Lorrie Yeager Jr. Juvenile Center Policy Number 3.35-00: Facility Child Abuse and Neglect dated February 16, 2016.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Interviews with Agency/Division Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- The National Sexual Assault Hotline 1-800-656-HOPE and the West Virginia Foundation for Rape Information and Services.
- West Virginia Division of Juvenile Services hotline 1-855-366-0015.
- Child Abuse Hotline 1-800-352-6513.
- West Virginia Department of Health and Human Resources, Institutional Investigation Unit 1-800-352-6513.

**Standard 115.362 Agency protection duties**

☐ Exceeds Standard (substantially exceeds requirement of standard)

☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

**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.**

Auditor comments: The auditor confirmed that the agency and the facility through agency policies and procedures along with staff and resident interviews that they will act immediately to any and all residents in imminent danger or substantial risk of sexual abuse. When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the resident. Specifically, the auditor interviewed both agency and facility uniformed line officer staff. Additionally, the agency and facility has a specialized housing policy. The facility reported to the auditor of no residents determined to be at risk of imminent sexual abuse within the past 12 months of the audit.

Per agency policy 332.00 and facility policy 3.32-00, a resident can be placed in protective custody immediately if imminent danger warrants such action or an emergency Prison Rape Elimination Act grievance is filed. The process will be started immediately after separation from the threat.

The auditor reviewed the agency and facility policies and procedures (agency policy 332.00 and facility policy 3.32-00); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meet the standard and complies with the standard for the
relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Code of Laws 49-2-903.
- Lorrie Yeager Jr. Juvenile Center Policy Number 3.32-00: Specialized Housing dated January 1, 2017.
- West Virginia Division of Juvenile Services Policy Number 332.00: Specialized Housing dated January 1, 2017.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Interviews with Agency/Division Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination
  Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.

**Standard 115.363 Reporting to other confinement facilities**

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

*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.*

Auditor comments: Per agency policy 335.00 and facility policy 3.35-00, the facility director or his or her designee, shall report any suspected incident of institutional or non-institutional child abuse or neglect to the Division’s Director of Investigations or his or her designee and to the Department of Health and Human Resources Child Abuse Hot Line at 1-800-352-6513 as soon as possible but no later than forty-eight (48) hours. For any instances of non-institutional report of suspected child abuse, the Division’s Investigative Unit will notify the head of the facility or appropriate office of the agency where the alleged abuse occurred within 72 hours after notification of the alleged abuse. Full cooperation shall be given in any subsequent investigation.

Upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with the Prison Rape Elimination Act standard.

The Lorrie Yeager Jr. Juvenile Center Facility Director reported no receipt of any reports of abuse from residents occurring at other facilities nor having received any reports of abuse from other facilities about abuse occurring at the Facility Director’s facility during the past 12 month period. The auditor reviewed the agency and facility policies and procedures (agency policy 151.00, 335.00, and facility policy 3.35-00); West Virginia Code of Laws 49-1-3; observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 335.00: Facility Child Abuse and Neglect dated October 1, 2015.
- Lorrie Yeager Jr. Juvenile Center Policy Number 3.35-00: Facility Child Abuse and Neglect dated February 16, 2016.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Interviews with Agency/Division Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination
  Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- The National Sexual Assault Hotline 1-800-656-HOPE and the West Virginia Foundation for Rape Information and Services.
Standard 115.364 Staff first responder duties

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: In accordance with agency policy 324.00 and facility policy 3.24-00, first responders utilize a crime scene response procedures check list that mirrors the requirements under Standard 115.364(a)-1, (a)-2, (a)-3, (a)-4, (a)-5. Based on agency and facility policy and procedures along with agency staff and resident interviews during the on-site portion of the audit, upon learning of an allegation that a resident was sexually abused, the first staff member to respond to the report shall: separate the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and if the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

If the first 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. The auditor reviewed an agency and facility generated check list for first responder use. The agency and facility reported no staff first responder actions related to this standard during the past 12 month period.

The auditor reviewed the agency and facility policies and procedures (agency policy 324.00, 151.00, and facility policy 3.24-00); agency And facility crime scene check off list per policy 324.00; observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 324: Crime Scene and Physical Evidence Preservation dated July 1, 2016.
- Lorrie Yeager Jr. Juvenile Center Policy Number 3.24-00: Crime Scene Investigation and Preservation dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Interviews with Agency/Division Investigators, Director, facility nurses, facility mental health staff, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- The National Sexual Assault Hotline 1-800-656-HOPE and the West Virginia Foundation for Rape Information and Services.
- West Virginia Division of Juvenile Services hotline 1-855-366-0015.
- Child Abuse Hotline 1-800-352-6513.
- West Virginia Department of Health and Human Resources, Institutional Investigation Unit 1-800-352-6513.

Standard 115.365 Coordinated response

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☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

**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.**

Auditor comments: In accordance with agency and facility policy (324.00 and 3.24-00), the agency and facility will maintain a mechanism to ensure the preservation, control, and disposition of all crime scenes and physical evidence obtained in connection with a violation of law is accomplished in a timely and proper manner. This applies to any crime scenes in which a law enforcement agency is the primary investigator or any instance of Prison Rape Elimination Act related allegations. At a minimum, procedures shall address preservation of life, chain of custody, evidence handling, and location and storage requirements.

The agency and facility has a coordinated response to an incident of sexual abuse among staff first responders, medical, and mental health practitioners, investigators, and facility leadership. The auditor reviewed the agency and facility policies and procedures (agency policy 324 and facility policy 3.24-00); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. The Lorrie Yeager Jr. Juvenile Center conducted a drill or test of the protocol. Based on the listed information, the agency and facility meet the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 324: Crime Scene and Physical Evidence Preservation dated July 1, 2016.
- Lorrie Yeager Jr. Juvenile Center Policy Number 3.24-00: Crime Scene Investigation and Preservation dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 335.00: Facility Child Abuse and Neglect.
- Interviews with Agency/Division Investigators, Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- The National Sexual Assault Hotline 1-800-656-HOPE and the West Virginia Foundation for Rape Information and Services.
- West Virginia Division of Juvenile Services hotline 1-855-366-0015.
- Child Abuse Hotline 1-800-352-6513.
- West Virginia Department of Health and Human Resources, Institutional Investigation Unit 1-800-352-6513.

**Standard 115.366 Preservation of ability to protect residents from contact with abusers**

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

**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.

Auditor comments: Per the agency Prison Rape Elimination Act Coordinator, no collective bargaining agreements have been signed since August 20, 2012. Neither the agency nor any other government entity responsible for collective bargaining on the agency’s behalf entered into or renewed any collective bargaining agreement or other agreement that limits the agency’s ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

The agency and facility has no collective bargaining as verified with the agency during the on-site portion of the audit. The auditor also received confirmation in the form of a written memorandum from the agency Prison Rape Elimination Act coordinator that no collective bargaining exists. The staff is fully aware that a violation of policy may more than likely result in termination. The auditor reviewed the agency and facility policies and procedures (policy 151.00); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- Memorandum from the agency Prison Rape Elimination Act Coordinator dated March 15, 2017.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Interviews with Agency/Division Investigators, Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.

**Standard 115.367 Agency protection against retaliation**

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: In accordance with agency and facility policy 151.00, for any individual who expresses a fear of retaliation who has participated with or cooperated in an investigation of sexual abuse or sexual harassment against a resident, the Division shall protect that individual against retaliation. The Division utilizes a computer-based operating system for all Prison Rape Elimination Act incident reviews.

The agency and facility protects all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The agency and facility shall employ multiple protection measures, such as cell changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. The agency has a code of conduct policy (policy 125) related to the Prison Rape Elimination Act.

For at least 90 days following a report of sexual abuse, the agency monitors the conduct and treatment of residents or staff who reported the sexual abuse and of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff, and shall act promptly to remedy any such retaliation. The Prison Rape Elimination Act coordinator and compliance manager monitors resident disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. Monitoring continues beyond 90 days if the initial monitoring indicates a continuing need. Monitoring also includes periodic status
checks. Any other individuals who cooperate with an investigation expresses a fear of retaliation, the agency takes appropriate measures to protect that individual against retaliation.

The Prison Rape Elimination Act coordinator and compliance manager reported no incidents of retaliation during the past 12 month period from the date of the audit. The auditor reviewed the agency and facility policies and procedures (policy 151.00 and 125) along with the West Virginia Code of Laws 49-5E-1; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meet the standard and complies with the standard for the relevant review period. Agencies must establish a policy for the protection of residents and staff who report sexual abuse or sexual harassment, or cooperate with investigations of sexual abuse or sexual harassment. They policy shall designate staff members or departments within the agency that are responsible with monitoring any retaliation. Agencies must utilize multiple strategies to inhibit and prevent retaliation.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Agency Computer-Based Operating System Module/Tracking: PREA Incident Review.
- West Virginia Division of Juvenile Services Policy Number 125: Employee Code of Conduct.
- Interviews with Agency/Division Investigators, Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- The National Sexual Assault Hotline 1-800-656-HOPE and the West Virginia Foundation for Rape Information and Services.
- West Virginia Division of Juvenile Services hotline 1-855-366-0015.
- Children’s Listening Center of Parkersburg, West Virginia.
- Child Abuse Hotline 1-800-352-6513.
- West Virginia Department of Health and Human Resources, Institutional Investigation Unit 1-800-352-6513.

Standard 115.368 Post-allegation protective custody

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The West Virginia Division of Juvenile Services and the Lorrie Yeager Jr. Juvenile Center has a protective custody policy and procedure. Any use of segregated housing to protect a resident who is alleged to have suffered sexual abuse shall be subject to the requirements of protective custody policy and procedure. The facility director reported no residents being place in involuntary segregation in accordance with the protective custody policy and Prison Rape Elimination Act standard during the previous 12 month period.

Specifically, per agency policy 332.00 and facility policy 3.32-00, a resident can request specialized housing for protective custody if they feel unsafe being around the other residents. A resident can be placed in protective custody immediately if imminent danger warrants such action or an emergency Prison Rape Elimination Act grievance is filed. Continuation of Specialized Housing for each resident will be based on a seven (7) day perpetual review by the Facility Director and his or her recommendation to the Division Director for as long as the resident remains in Specialized Housing due to safety concerns of the resident.

The auditor reviewed the segregation unit. The auditor reviewed the agency and Lorrie Yeager Jr. Juvenile Center policies and procedures (agency policy 332.00 and facility policy 3.32-00 – Specialized Housing); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meet the standard and complies with the standard for the relevant review period.

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West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Code of Laws 49-2-903.
- West Virginia Division of Juvenile Services Policy Number 332.00: Specialized Housing dated January 1, 2017.
- Lorrie Yeager Jr. Juvenile Center Memorandum from Facility Director confirming no use of specialized housing during the past 12 month period dated March 28, 2017.
- Lorrie Yeager Jr. Juvenile Center Policy Number 3.32-00: Specialized Housing dated January 1, 2017.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Interviews with Agency/Division Investigators, Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.

**Standard 115.371 Criminal and administrative agency investigations**

- Exceeds Standard (substantially exceeds requirement of standard)
- ☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: In accordance with agency and facility policy 111.00, it is the policy of the West Virginia Division of Juvenile Services to ensure that all alleged violations of division policy are investigated in a thorough, professional, and impartial manner and to take proactive measures in order to ensure the safety and security of all Division of Juvenile Services’ facilities, residents and staff while preserving public safety. The agency has investigators assigned and is responsible for first responder investigative duties along with agency and facility administrative type of investigations. Any criminal investigation will be referred to the West Virginia State Police as the criminal investigating agency.

Per the standard, when an agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. Per agency policy 111.00, whenever the Director of the Investigative Unit believes that there is sufficient, credible information that an event of a serious nature could result in criminal charges has taken place, notification to the West Virginia State Police shall be made as soon as practical.

Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations involving juvenile victims pursuant to Prison Rape Elimination Act Standard 115.334. Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and deoxyribonucleic acid (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. When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person’s status as resident or staff. No agency shall require a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. The auditor interviewed the agency’s investigator and was impressed with his knowledge and experience. The agency investigators are assigned to a division within the agency headquarters. The agency has an acknowledgement form for staff specifically referencing the required Garrity warning.

Administrative investigations include efforts to determine whether staff actions or failures to act contributed to the abuse; and are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Criminal investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. Substantiated allegations of conduct that appears to be criminal are referred for prosecution. The agency retains all written reports for as
long as the alleged abuser is incarcerated or employed by the agency, plus five years. The auditor reviewed written reports and investigations provided by the investigators.

The auditor reviewed the agency and facility policies and procedures (policy 111.00 and 151); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 324: Crime Scene and Physical Evidence Preservation dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 111.00: Investigative Unit dated October 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Interviews with Agency/Division Investigators, Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.

**Standard 115.372 Evidentiary standard for administrative investigations**

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

**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.**

Auditor comments: In accordance with agency policy 111.00, the investigator shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The West Virginia State Police are the designated investigative authority for criminal type investigations. The West Virginia Division of Juvenile Services has investigators assigned as administrative investigators for all statewide facilities.

The auditor reviewed the agency and facility policies and procedures (policy 151.00 and 111.00); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 111.00: Investigative Unit dated October 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- Interviews with Agency/Division Investigators, Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
Standard 115.373 Reporting to residents

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The Prison Rape Elimination Act compliance manager is responsible for reporting back to any residents in reference to any Prison Rape Elimination Act related incidents. The agency and facility informs the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. Based on the agency’s policy, following a resident’s allegation that a staff member has committed sexual abuse against a resident, the agency shall subsequently inform the resident (exception being if the allegation is determined to be unfounded) whenever:

1) The staff member is no longer employed by the agency;
2) The staff member is no longer posted within the resident’s unit;
3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the agency; or
4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the agency.

Following a resident’s allegation that he has been sexually abused by another resident, the facility shall subsequently inform the alleged victim whenever: The facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the agency; or the facility learns that the alleged abuse has been convicted on a charge related to sexual abuse within the agency.

Specifically, per agency policy 151.00, at the conclusion of the investigation, written notification of the result will be given to the resident who has made the original allegation by the facility Prison Rape Elimination Act compliance manager if it is a resident-on-resident complaint. For staff-on-resident complaints, the Director of Investigations will provide written notification to the resident.

The Prison Rape Elimination Act compliance manager reported that investigations of alleged resident sexual abuse in the facility were completed in the past 12 months along with notifications to residents made. All such notifications or attempted notifications are documented and retained by the agency Prison Rape Elimination Act compliance manager. The agency’s obligation to report under this standard shall terminate if the resident is released from the agency’s custody.

Per West Virginia Code of Law 49-4-721, a juvenile shall be afforded a grievance procedure, including an appeal mechanism.

The auditor reviewed the agency and facility policies and procedures (agency policy 334.00, and 151); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 334.00: Resident Rights and Grievance Procedures dated July 1, 2016.
- Interviews with Agency/Division Investigators, Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- West Virginia Division of Juvenile Services Resident Rights Form.
- Resident Notification Form.
Standard 115.376 Disciplinary sanctions for staff

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The auditor interviewed the facility director and human resources director. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment are 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.

Specifically, per agency policy 138.00, the Division has the responsibility to place a staff member in a no-contact position with residents pending the outcome of an investigation into any allegations of abuse and/or threat against a resident, outcome of criminal proceeding bearing a connection to the employee’s position, or other misconduct. Additionally, an employee may be suspended without pay while the agency conducts an investigation because of threat of continuing danger to persons/property to protect the integrity of evidence or pending court action.

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, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

The auditor reviewed the investigative files during the on-site portion of the audit. The auditor reviewed the agency and facility policies and procedures (policy 138.00 and 151.00); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The auditor commends the facility for being proactive in identifying and addressing potential problem areas. Based on the above information, the agency and facility meet the standard and comply with the standard for the relevant review period.

West Virginia Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

• West Virginia Code of Laws 49-2-803, 49-2-903.
• West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
• Lorrie Yeager Jr. Juvenile Facility memorandum from Facility Director confirming compliance with standard dated March 28, 2017.
• Documents and examples of agency progressive discipline process.
• West Virginia Division of Juvenile Services Policy Number 138.00: Progressive Discipline dated July 1, 2016.
• Interviews with Agency/Division Investigators, Director, facility nurses, facility mental health staff, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, volunteers, contractors, and facility staff.
• West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
• Investigation Reports.
• Resident Notification Form.

Standard 115.377 Corrective action for contractors and volunteers

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Auditor comments: In accordance with agency and facility policy 311.00 states, it is the policy of the Division of Juvenile Services to ensure that outside contractors/vendors who perform work at facilities do so only under the direct and continuous supervision of facility staff. Contractors/vendors may only work unsupervised in areas that have been determined by the Facility Director to be secure and with no residence accessibility. Any contractor/vendor who engages in sexual abuse/sexual harassment shall be prohibited from contact with residents and shall be reported to law enforcement agencies and relevant licensing bodies.

The auditor interviewed contractors and volunteers during the on-site portion of the audit. Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with residents and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Appropriate steps are taken in reference to remedial measures, and consideration made whether to prohibit further contact with residents, in the case of any other violation of agency and facility sexual abuse or sexual harassment policies by a contractor or volunteer.

The auditor interviewed a random sampling of contractors and volunteers assigned to the facility. The level of professionalism and expertise was impressive. The auditor briefed the facility director concerning contractors and volunteers as part of the on-site portion of the audit. The auditor received a written memorandum from the facility director confirming no contractor or volunteer corrective actions initiated during the previous 12 month period.

The auditor reviewed the agency and facility policies and procedures (policy 151.00, 138, 311.00, and 167.00); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility does meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Division Website, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 311.00: Contractor/Vendor Escorts and Security Protocol dated July 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 138: Progressive Discipline dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 167: Volunteers and Citizen Involvement.
- Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- Lorrie Yeager Jr. Juvenile Center memorandum from the Facility Director, dated March 28, 2017, stating no contractor/volunteers/vendor sexual misconduct/abuse cases this past 12 month period prior to the audit.

**Standard 115.378 Disciplinary sanctions for residents**

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The facility Prison Rape Elimination Act compliance manager reported no Prison Rape Elimination Act related incident...
or resident-on-resident sexual abuse that was substantiated this past 12 month period prior to the audit. No criminal findings were reported within the past twelve months. Sanctions are commensurate with the nature and circumstances of the abuse committed, the resident’s disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories. The disciplinary process considers whether a resident’s mental disabilities or mental illness contributed to their behavior when determining what type of sanction, if any, should be imposed.

Specifically, agency policy 330.00 states, the policy establishes a resident disciplinary practice and process for all Division of Juvenile Services residential facilities. The goal of discipline is to correct a resident’s behavior with positive reinforcement and incentive-based rewards. Agency policy 332.00 and facility policy 3.32-00 states, it is the policy of the Division of Juvenile Services to establish guidelines and procedures concerning the placement and housing of residents in temporary or long-term specialized housing. Residents are given the opportunity to be housed in the least restrictive custody.

A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. The agency and facility prohibits all sexual activity between residents and may discipline residents for such activity. In the event a disciplinary sanction results in the isolation of a resident, agencies shall not deny the resident daily large-muscle exercise or access to any legally required educational programming or special education services. Residents in isolation shall receive daily visits from a medical or mental health care clinician. Residents in isolation shall also have access to other programs and work opportunities to the extent possible. If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to offer the offending resident participation in such interventions. The facility reported no cases of resident restrictive housing placement related to sexual misconduct this past 12 month period prior to the audit.

The auditor reviewed the agency and facility policies and procedures (agency policy 330.00, 332.00, 151.00, and facility policy 3.32-00); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Division Website, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Code of Laws 49-2-903.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 330.00: Resident Discipline dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 332.00: Specialized Housing dated January 1, 2017.
- Lorrie Yeager Jr. Juvenile Center Policy Number 3.32-00: Specialized Housing dated January 1, 2017.
- Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, and facility staff.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- Lorrie Yeager Jr. Juvenile Center memorandum from the Facility Director, dated March 28, 2017, stating no resident sexual abuse substantiated cases or resident restrictive housing placement related to sexual misconduct this past 12 month period prior to the audit.

**Standard 115.381 Medical and mental health screenings; history of sexual abuse**

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

**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.**

Auditor comments: The West Virginia Division of Juvenile Services contracts with PSIMED Corrections, LLC and PRIMECARE Medical, Inc. If the medical and mental health screening indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, agency staff ensures that the resident is offered a follow-up meeting with a medical or mental
health practitioner within 14 days of the intake screening. If the screening indicates that a resident has previously perpetrated sexual abuse or sexual victimization, whether it occurred in an institutional setting or in the community, agency and facility staff shall ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake process. PSIMED staff has an immediate contact protocol consisting of the headquarters staff for the Division of Juvenile Services, State Police if applicable, and the West Virginia Child Abuse Hotline. The auditor received documentation, company policy, and assessment and screening forms from PSIMED Corrections, LLC, and PRIMECARE Medical, Inc. The company policy specifically references and is in accordance with the West Virginia Code of Law Chapter 49 – Child Welfare.

Specifically, agency policy 151.00 states, residents with a history of sexual victimization, which have been identified through the intake process, should be referred to psychological services as soon as possible but no later than 14 days after intake. Staff should notify the Facility Director of the facility as well as the person responsible for the overall security of the facility. Appropriate steps should be taken to keep the individual separated from any known sexual perpetrators and direct monitoring should take place. Residents with a history of sexual predation, which have been identified through the intake process should be referred to psychological services as soon as possible but no later than 14 days after intake. The Facility Director is to be notified as well as the person responsible for the overall security of the facility. Appropriate steps should be taken to keep the individual separated from any known sexual victims and close monitoring should take place. Any resident, while during the intake process, is suspected of being “At Risk” for victimization or for being a perpetrator, should be dealt with in the same manner as victims and predators are outlined above. They shall be reviewed by psychological services for an assessment of risk, treatment and management needs.

Specific PSIMED Corrections, LLC, policy and procedure:

As stated in West Virginia State Code §49-6A-2, mental health professionals are required to report any and all incidents of child abuse as defined in WV Code §49-1-3. Instances of abuse/neglect occurring within a WV DJS facility are to be reported by staff according to procedures listed in WVDJS Policy 335.00.

For reportable incidents which occurred outside of a WV DJS facility:

1. The Child Abuse Reporting form and a detailed incident report are to be completed by the staff member receiving the information of the reported incident. The incident report will be completed via the electronic record system prior to the completion of his or her shift the day the incident is reported to him or her.
2. The PSIMED Corrections, LLC staff member receiving the report will notify the Facility Administrator or his or her Designee and ensure the Child Abuse Hotline (WVDHHR), State Police and/or local law enforcement, and Central Office are notified by phone within 48 hours of the report.
3. If requested by the WVDHHR, a written report may be submitted describing the alleged incident. This report may also be forwarded to the law enforcement agency involved.
4. The person receiving the confidential information is required to document the information in a therapeutic SOAP note, if the incident is reported during a therapy session.

Continued Quality Improvement: The PSIMED Clinical Director will be responsible for conducting an audit for each instance of offender abuse and/or neglect reported to or witnessed by a PSIMED Corrections, LLC employee.

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 agency staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, and program assignments, or as otherwise required by Federal, State, or local law. Medical and mental health practitioners shall obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18.

The auditor interviewed the facility nursing staff, mental health counselor, and the resident intake staff. The auditor reviewed the agency and facility policies and procedures (agency policy 413.00, 335.00, 151.00, West Virginia Code of Law 49 – Child Welfare, PSIMED/PRIMECARE policy, and facility policy 3.35-00); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency does meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Division Website, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 413.00: Medical Care and Emergency Medical Procedures dated January 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 335.00: Facility Child Abuse and Neglect dated October 1, 2015.
• Lorrie Yeager Jr. Juvenile Center Policy Number 3.35-00: Facility Child Abuse and Neglect dated February 16, 2016.
• Interviews with facility nursing/mental health staff, Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, facility staff, and documentation retention.
• West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
• PRIMECARE Medical Inc., Receiving Screening/Health Assessment (Juvenile) Form and Intake Mental Health Screening and Assessment Form.
• PSIMED Child Abuse Reporting Form.
• Agency Computer-Based Operating System Tracking Module Examples.
• Consent Forms.

Standard 115.382 Access to emergency medical and mental health services

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The West Virginia Division of Juvenile Services and Lorrie Yeager Jr. Juvenile Center policy 413.00 and facility policy 4.13-00 states, residents will have unimpeded access to health care and for a system for processing complaints regarding health care. These are communicated orally and in writing to residents upon arrival at the facility and are put in a language clearly understood by the resident. Residents victims of sexual abuse shall 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. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. Resident victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and treatment for any sexually transmitted infections, in accordance with professionally accepted standards of care, where medically appropriate. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Resident victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests and shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

Resident 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. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. Resident victims of sexual abuse while incarcerated are 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. 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 Charleston Area Medical Center Women and Children's Hospital is home to the region's largest and busiest Level IV and Level I medical services. It is located at 800 Pennsylvania Avenue, in Charleston, West Virginia. Further information is available at (304) 388-2391 or camc.org. The primary goal of the Children’s Advocacy Center (CAC) at Women and Children’s Hospital is to provide children and families professional and compassionate care in order to minimize and reduce the trauma often experienced by children who are possible victims of child abuse. By conducting a thorough evaluation of the child they are able to identify his or her needs and facilitate the provision of the services needed. Services Include:

• Forensic interview – an interview conducted by a trained professional with the goal of obtaining factual information about the alleged abuse from the child.

• Medical evaluation – a comprehensive medical check-up by a specialty-certified pediatrician.

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Support services – provide a variety of victim advocacy and case management services to help the child move forward.

Sexual Abuse Prevention Training – CAC staff provide child sexual abuse prevention training to individuals and groups upon request.

Stewards of Children is a nationally-recognized prevention program that raises awareness and educates adults how to prevent, recognize, and react responsibly to child sexual abuse.

The auditor reviewed the agency and facility policies and procedures (policy 413.00, 151.00, and facility policy 4.13-00); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. The agency and facility meet compliance with the standard for the relevant rating period.

West Virginia Code of Laws, Division Website, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 413.00: Medical Care and Emergency Medical Procedures dated January 1, 2015.
- Interviews with facility nursing/mental health staff, Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, facility staff, and documentation retention.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- PRIMECARE Medical Inc., Receiving Screening/Health Assessment (Juvenile) Form.
- Lorrie Yeager Jr. Juvenile Center Policy Number 4.13-00: Medical Care and Emergency Medical Procedures dated February 16, 2016.

Standard 115.383 Ongoing medical and mental health care for sexual abuse victims and abusers

- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The West Virginia Division of Juvenile Services and Lorrie Yeager Jr. Juvenile Center policy 511.00 and 5.11-00 states, it is the policy of the agency to provide a structured program to help residents make a satisfactory transition upon their release. All residents are assigned an aftercare worker who shall work with the resident in preparation for release from agency custody. Medical/mental health evaluation and treatment for sexual abuse victims, including follow-up services, treatment plans and referrals for continued care upon release or transfer to another agency. Per agency policy 151.00, any resident who is a victim of sexual misconduct will receive medical, crisis intervention, mental health treatment and any type of long-term follow-up care as needed from the agency. If necessary, victims of sexual assault are referred under appropriate security provisions to a hospital for treatment and gathering of evidence. Any resident who is identified as an abuser will be given a mental health evaluation and offered treatment if appropriate within 14 days. Per agency policy 413.00, treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

The agency and facility offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in the facility. The evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans and referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. The agency and facility provides such victims with medical and mental health services consistent with the community level of care. Resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Resident victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from abusive vaginal penetration, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-
related medical services. 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 Charleston Area Medical Center Women and Children's Hospital is home to the region's largest and busiest Level IV and Level I medical services. It is located at 800 Pennsylvania Avenue, in Charleston, West Virginia. Further information is available at (304) 388-2391 or camc.org. The primary goal of the Children’s Advocacy Center (CAC) at Women and Children’s Hospital is to provide children and families professional and compassionate care in order to minimize and reduce the trauma often experienced by children who are possible victims of child abuse. By conducting a thorough evaluation of the child they are able to identify his or her needs and facilitate the provision of the services needed. Services Include:

- Forensic interview – an interview conducted by a trained professional with the goal of obtaining factual information about the alleged abuse from the child.
- Medical evaluation – a comprehensive medical check-up by a specialty-certified pediatrician.
- Support services – provide a variety of victim advocacy and case management services to help the child move forward.
- Sexual Abuse Prevention Training – CAC staff provide child sexual abuse prevention training to individuals and groups upon request.

Stewards of Children is a nationally-recognized prevention program that raises awareness and educates adults how to prevent, recognize, and react responsibly to child sexual abuse.

The auditor interviewed the facility nursing staff and treatment therapist during the on-site portion of the Prison Rape Elimination Act audit. The auditor reviewed the agency and facility policies and procedures (agency policy 151.00, 413.00, 511.00, and facility policy 5.11-00); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meet the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Division Website, Policy, Materials, Interviews and Other Evidence Reviewed:

- Lorrie Yeager Jr. Juvenile Center Policy Number 5.11-00: Release of Residents dated February 16, 2016.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 511.00: Release of Residents dated January 1, 2015.
- West Virginia Division of Juvenile Services Policy Number 413.00: Medical Care and Emergency Medical Procedures dated January 1, 2015.
- Interviews with facility nursing/mental health staff, Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, facility staff, and documentation retention.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.

**Standard 115.386 Sexual abuse incident reviews**

- ☑️ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The Lorrie Yeager Jr. Juvenile Center conducts sexual abuse incident reviews in accordance with Prison Rape Elimination Act standard 115.386. The agency and facility conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not be substantiated, unless the allegation has been determined to be unfounded. This
review ordinarily occurs within 30 days of the conclusion of the investigation. The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. The agency and facility review team considers the following:

1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or practice to better prevent, detect, or respond to sexual abuse;
2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
4) Assess the adequacy of staffing levels in that area during different shifts;
5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to above paragraph Numbers 1 to 5, and any recommendations for improvement, and submit such report to the facility head and Prison Rape Elimination Act compliance manager.

The West Virginia Division of Juvenile Services and the Lorrie Yeager Jr. Juvenile Center policy 151.00 states, the Prison Rape Elimination Act Compliance Manager will conduct a sexual abuse incident review at the conclusion of every resident-on-resident sexual abuse investigation within thirty (30) days, unless the allegation has been determined to be unfounded. The Division Prison Rape Elimination Act Coordinator will conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation conducted by the Division Investigators with thirty (30) days, unless the allegation has been determined to be unfounded. The review team will consist of staff from administration, line supervisors, investigators and medical or mental health practitioners. If recommendations from the report are unable to be implemented, the reasons shall be documented and attached with the report.

The auditor reviewed the agency and facility policies and procedures (policy 151.00); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed residents and staff during an on-site visit and tour of the facility. Specifically, the agency and facility complies with Standard 115.386(a)-1, (a)-2, (b)-1, (b)-2, (c)-1, (d)-1, (d)-2, (d)-3, (d)-4, (d)-5, (e)-1. The agency and facility meets the standard and complies with the standard for the relevant review period.

West Virginia Code of Laws, Division Website, Policy, Materials, Interviews and Other Evidence Reviewed:

- Memorandum from the agency Prison Rape Elimination Act Coordinator to the Auditor dated April 16. 2016.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- West Virginia Division of Juvenile Services website: www.djs.wv.gov.
- Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, facility staff, and documentation retention.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- Copies of Incident Reviews from the agency.
- Copies of reports, checklists, and resident after action notifications from the agency.

**Standard 115.387 Data collection**

- Exceeds Standard (substantially exceeds requirement of standard)
- ☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

**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.**

Auditor comments: The West Virginia Division of Juvenile Services and Lorrie Yeager Jr. Juvenile Center collects accurate, uniform data
for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The agency aggregates the incident-based sexual abuse data at least annually. The incident-based data collected shall 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. The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Upon request, the agency shall provide all such data from the previous calendar year to the United States Department of Justice no later than June 30.

Per agency policy 151.00, the agency collects accurate, uniform data for every allegation of sexual abuse at the facilities under its control using the Prison Rape Elimination Act Incident Review data from the agency computer-based operating system. The Prison Rape Elimination Act Incident Review includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the United States Department of Justice. The Division maintains, reviews, and collects data as needed from all available incident-based documents including reports, investigation files, and sexual abuse incident reviews.

The West Virginia Division of Juvenile Services and Lorrie Yeager Jr. Juvenile Center utilizes a computer-based program to document and track agency wide data. The auditor reviewed the agency and facility policies and procedures (policy 151.00 and 115.00); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed resident and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meet the standard.

West Virginia Code of Laws, Division Website, Policy, Materials, Interviews and Other Evidence Reviewed:

- Memorandum from the agency Prison Rape Elimination Act Coordinator to the Auditor dated March 15, 2017.
- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 115.00: Records Management Program dated January 1, 2016.
- West Virginia Division of Juvenile Services website: www.djs.wv.gov.
- Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, facility staff, and documentation retention.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.

**Standard 115.388 Data review for corrective action**

- ☑ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

**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.**

Auditor comments: The auditor confirmed that the agency completes an annual report. Based on policy and procedure review along with agency staff interviews, the agency reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, by:

1) Identifying problem areas;
2) Taking corrective action on an ongoing basis; and
3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

The agency’s report is approved by the director of the agency and is made readily available to the public through its website. The agency redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

Specifically, the agency Prison Rape Elimination Act Coordinator’s annual report states: “The West Virginia Division of Juvenile Services has completed the first round of Prison Rape Elimination Act audits. All facilities within the West Virginia Division of Juvenile Services
have been found to be in full compliance with the Federal Prison Rape Elimination Act Standards. We are committed to the Standards set forth and are determined to use the information gained through the auditing process to improve our program and continue to provide a safe and secure environment for the residents we serve, always striving to exceed the standards.”

The agency develops goals to maintain Prison Rape Elimination Act compliance. The West Virginia Division of Juvenile Services is committed to continued progressive and preventative steps that will eliminate sexual abuse and sexual harassment victimization by listing the following goals:

- Uphold a zero tolerance for sexual abuse.
- Enhance Staff awareness and buy in through a variety training.
- Continue to develop our resident education.
- Monitor facility cameras making every effort to identify and correct “blind spot” areas.
- Increasing the camera system recording capabilities as funding becomes available.
- Make certain that facility administrators conduct monthly unannounced facility visits to cover all shifts.
- Ensuring that R.E.S.P.E.C.T and other informational posters are consistently visible throughout the facility.
- Providing each resident with an assessment to determine the risk of victimization upon Intake and to provide orientation to all residents, taking into account their age, stature, history, LGBT status, etc. to ensure appropriate facility placement.
- Completing re-assessments per policy within 90 days thereafter or sooner if policy criteria i.e. sexual or physical misbehavior requires it.
- Monitoring the surveillance video (live and archival) weekly.
- Conduct facility visits to identify any problematic areas.
- Ensure that the 1 to 8 ratio is maintained during waking hours and 1 to 12 ratio is maintained during sleeping hours.
- Ensure that staff maintains a line of sight supervision of the youth at all times and that each youth is in the appropriate area of the facility.
- Ensure that all facility staff, to include medical, mental health, contractors and volunteers receive the required initial and annual PREA training.
- Ensure that the facility staff of the opposite gender announce their presence when entering a dorm or sleeping area of a resident of the opposite gender.
- Ensure that there is no cross gender supervision when a youth is showering, changing clothes or while a resident is using the restroom.
- Ensure that every resident receives a resident handbook and is informed of how to report any sexual misconduct allegation via the hotline, staff, grievance, parent, third party, etc.
- Continue to conduct Criminal Records Check and Child Abuse Registry checks on new employees, volunteers and contractors. Background checks were completed for all employees in 2014/2015 and will be completed again in 2019/2020.
- Ensure that windows throughout the facility are unobstructed and window blinds are not continually closed.
- Continue to discuss PREA-related topics during staff meetings.
- All sexual misconduct allegations will be monitored for 90 or up to 120 days if deemed necessary to ensure that retaliation does not occur. All victims, perpetrators and witnesses that remain in our custody will be interviewed every 30 days as part of this process.
- All victims of sexual abuse will be offered counseling service by the facility’s mental health professional or through a local child advocacy center through an agency MOA.
- Compile and evaluate data quarterly in an effort to identify deficiencies.
- Continue to review the findings of each substantiated and unsubstantiated investigation per standard 115.386. These reviews take place within 30 days of the close of the investigation, the purpose is to identify problem areas and take the appropriate steps to prevent these incidents from reoccurring.
- Conduct a meeting with Department heads to assess the aggregated data from the previous year to address any short falls.

The auditor was impressed with the agency computer-based operating program. The auditor determination is that the agency and facility exceeds the Standard for the relevant rating period. The auditor justification is listed above based on the agency annual report and specifically the numerous goals for continued compliance throughout the agency.

West Virginia Code of Laws, Division Website, Policy, Materials, Interviews and Other Evidence Reviewed:

- West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
- West Virginia Division of Juvenile Services Policy Number 115.00: Records Management Program dated January 1, 2016.
- West Virginia Division of Juvenile Services website: www.djs.wv.gov.
- Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, facility staff, and documentation retention.
- West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.
- Memorandum from the agency Prison Rape Elimination Act Coordinator to the Auditor dated March 15, 2017.
Standard 115.389 Data storage, publication, and destruction

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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.

Auditor comments: The West Virginia Division of Juvenile Services policy 115.00, states that the agency shall maintain a system of record retention for all documentation and a disposition schedule for those records. Sexual abuse data collected annually, as required, shall be retained for at least ten (10) years after the initial collection.

Based on a review of documents, policy, and procedure along with interviewing the agency Prison Rape Elimination Act coordinator, the agency should ensure that data is collected and securely retained. The agency makes all aggregated sexual abuse data, from facilities under its direct control, readily available to the public at least annually through its website once complete. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The agency maintains sexual abuse data collected for at least 10 years after the date of the initial collection.

The agency maintains a website at www.djs.wv.gov. The website is easily accessible, user friendly, and well organized. The West Virginia Division of Juvenile Services and Lorrie Yeager Jr. Juvenile Center is in compliance with the standard for the relevant review period. Specifically, the agency and facility is in compliance with Prison Rape Elimination Act Standard 115.389(a)-1, (b)-1, (b)-2, (c)-1, (d)-1.

West Virginia Code of Laws, Division Website, Policy, Materials, Interviews and Other Evidence Reviewed:

• West Virginia Division of Juvenile Services Policy Number 151.00: Prison Rape Elimination Act dated July 1, 2016.
• West Virginia Division of Juvenile Services Policy Number 115.00: Records Management Program dated January 1, 2016.
• West Virginia Division of Juvenile Services website http://www.djs.wv.gov.
• Interviews with Agency/Division Director, facility Director, Prison Rape Elimination Act Coordinator, facility Compliance Manager, Prison Rape Elimination Act Counselor, facility staff, and documentation retention.
• Document Final Disposition Schedule and Document Final Disposition Forms.
• West Virginia Division of Juvenile Services submitted Pre-Audit Questionnaire.

AUDITOR CERTIFICATION

I certify that:
☒ 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, and
☒ I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Walter Sipple

[Signature]
May 17, 2017

Auditor Signature Date