PREA Facility Audit Report: Final

Name of Facility: Southern Regional Jail and Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: 03/17/2020 **Date Final Report Submitted:** 08/26/2020

| Auditor Certification | |
|---|------|
| The contents of this report are accurate to the best of my know | dge. |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. | |
| Auditor Full Name as Signed: Darlene M. Baugh Date of Signature: 08/26 | |

| AUDITOR INFORMATION | | |
|-------------------------------|----------------------|--|
| Auditor name: | Baugh, Darlene | |
| Email: | piltsbaugh@gmail.com | |
| Start Date of On-Site Audit: | 02/11/2020 | |
| End Date of On-Site Audit: | 02/13/2020 | |

| FACILITY INFORMATION | | |
|----------------------------|--|--|
| Facility name: | Southern Regional Jail and Correctional Facility | |
| Facility physical address: | 1200 Airport Rd, Beaver, West Virginia - 25813 | |
| Facility Phone | | |
| Facility mailing address: | | |

| Primary Contact | | |
|-------------------|------------------------|--|
| Name: | Amanda McGrew | |
| Email Address: | amanda.d.mcgrew@wv.gov | |
| Telephone Number: | 304-558-2036 | |

| Warden/Jail Administrator/Sheriff/Director | |
|--|--------------------------|
| Name: | Michael Francis |
| Email Address: | michael.a.francis@wv.gov |
| Telephone Number: | 304-256-6727 |

| Facility PREA Compliance Manager | |
|----------------------------------|------------------------|
| Name: | Jeremy Dillon |
| Email Address: | jeremy.d.dillon@wv.gov |
| Telephone Number: | |

| Facility Health Service Administrator On-site | |
|---|------------------------------|
| Name: | Brittany Foster |
| Email Address: | bfoster@primecaremedical.com |
| Telephone Number: | 304-267-6727 |

| Facility Characteristics | | |
|---|------------------------|--|
| Designed facility capacity: | 468 | |
| Current population of facility: | 711 | |
| Average daily population for the past 12 months: | 640 | |
| Has the facility been over capacity at any point in the past 12 months? | Yes | |
| Which population(s) does the facility hold? | Both females and males | |
| Age range of population: | 18 + | |
| Facility security levels/inmate custody levels: | All | |
| Does the facility hold youthful inmates? | No | |
| Number of staff currently employed at the facility who may have contact with inmates: | 98 | |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 1 | |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility: | 46 | |

| AGENCY INFORMATION | | |
|---|---|--|
| Name of agency: | West Virginia Division of Corrections and Rehabilitation | |
| Governing authority or parent agency (if applicable): | WV Department of Military Affairs and Public Safety | |
| Physical Address: | 1409 Greenbrier Street, Charleston, West Virginia - 25311 | |
| Mailing Address: | | |
| Telephone number: | 304-558-6032 | |

| Agency Chief Executive Officer Information: | |
|---|----------------------|
| Name: | Betsy Jividen |
| Email Address: | Betsy.Jividen@wv.gov |
| Telephone Number: | 304-558-6032 |

| Agency-Wide PREA | Coordinator Information | on | |
|------------------|-------------------------|----------------|-------------------------|
| Name: | Tim Harper | Email Address: | Timothy.V.Harper@wv.gov |

AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

Audit Narrative

Lead Auditor: Darlene Baugh Co-Auditor: Aaron Keech

Population at start of audit: 705

Males: 573 Females: 132

First, the auditor and co-auditor would like to thank the Superintendent and Staff at the Southern Regional Jail, Timothy Harper - Director at the Office of PREA Compliance and Amanda McGrew - Office of PREA Compliance, PREA Coordinator for their assistance in this endeavor. All were professional and very helpful during the pre-audit, on-site and post-audit phase.

On Tuesday, February 11, 2020, an entrance meeting was held at the Southern Regional Jail with Timothy Harper - Director Office of PREA Compliance, Amanda McGrew - PREA Coordinator, Darlene Baugh - Lead PREA Auditor (certified) and Aaron Keech, PREA Co-Auditor (certified).

All those listed in the preceding paragraph did a walk-through of the facility assisted by Maintenance Worker Richard Ward and Sgt. Matthew Vandall, PREA Compliance Officer. Staff were introduced to the auditors as they walked throughout the facility. Closed and locked doors were opened; camera placement, PREA posters and PREA Audit Announcements were noted. (Many of the announcements had been torn down by inmates.) All areas of the facility were viewed.

The population at the facility on the beginning date of the audit was seven hundred five (705). Of those numbers one hundred thirty-two (132) were female and five hundred seventy-three (573) were male. With a capacity of four hundred sixty-eight (468) makes this facility two hundred thirty-seven (237) inmates or 166% of capacity. Although the facility is overcrowded all inmates are housed in cells, with up to four individual inhabitants.

Activities: Tuesday, February 11, 2020

Entrance Meeting

Walk Through of the Facility Interviews of Staff and Inmates Wednesday, February 12, 2020 Interviews of Staff and Inmates Inmate File Reviews Staff File Reviews Investigation File Reviews Camera Reviews Thursday, February 13, 2020 Booking Review Exit Interview

The exit interview was conducted on Thursday, February 13, 2020 with Superintendent Michael Francis, Chief Correctional Officer Larry Warden, Shift Commander Angelina Athey, Health Services Administrator Brittany Foster, PREA Compliance Officer Matthew Vandall, Maintenance Sam Gregory II, John Harvey – DIS, Human Resources Administrator, Charlotte Underwood, Tim Harper – Director of PREA Compliance, PREA Co-Auditor Aaron Keech and PREA Auditor Darlene Baugh.

Feedback/Discussion:

Note: The PREA Compliance Officer started in his position in January of this year, approximately one (1) month ago. Until then his work with the PREA standards were minimal.

1. The auditors shared those locations within the facility that were blind. Recommendations were to add cameras or appropriate mirrors with a reminder that cameras do not take the place of staff. The Superintendent was aware of the problems and noted that several cameras had been purchased by the Department but that he was unaware of how they would be dispersed.

- 2. Staff interviews showed that staff knew the steps required when an inmate reports a sexual assault, however the steps were not consistently stated. In addition, LGBTI, the "I" was not generally known. Follow-up training is recommended
- 3. Concern: It was reported that the first Incident Review Team was utilized in November of 2019. This should have been started years ago. Additionally, documentation of the review must be completed and follow the language within the policy. More than just the Superintendent and the PCM should be present. Again, those who are to be present are listed in the policy.
- 4. The Assessments and Reassessments had problems. The assessment is completed in booking and the PCM does the reassessment.
- There is no information available from medical/psych to accurately complete those areas in the assessment on medical/mental health/disabilities. This needs to be corrected.
- Some Reassessments are being completed on the same day as the initial assessment. Needs to be corrected.
- While completing the document, the areas of hearing impaired, LEP are not being addressed as part of vulnerability. This needs to be corrected and notated on the form.
- Some assessments/reassessments are inaccurate because they are not utilizing the scoring to reflect whether the inmate is a potential victim or aggressor at the bottom of the form. This needs to be reviewed and addressed.
- If there is an incident related to PREA, there is not a reassessment completed.
- 5. Shower curtains (privacy) for the male inmates continues to be an issue year after year. This needs to be corrected.
- 6. Unannounced Rounds. The facility uses a form for the rounds made by their Administrative Team. However, the Unannounced Rounds form was just started 2 3 months ago. They currently use this form for a group of supervisors going through the facility. It is never done by a single supervisor. This is not the intent of unannounced rounds and should be changed. Also, supervisors gave varying answers on the expectation of number of rounds per month, this needs to also be clarified and understood. (The Unannounced Rounds form is forwarded to the PCM for data collection.)
- 7. Investigations: The investigation document is good, but there is no conclusion date on the document. The investigation unit counts Stevens Correctional Facility (a contracted facility) PREA cases on Southern Regional Jails data. The Office of PREA Compliance counts them separately. However, this misrepresents SRJ's data within the investigation unit.
- 8. Advocacy. The Director of PREA Compliance has a meeting next Thursday with the Statewide Coordinator for Advocacy Services. The facility does not currently have the availability of utilizing an advocate from a local rape crisis center or advocacy center. See below.
- 9. Bed Assignment Board. This board in booking is not being utilized in a manner that ensures that there is a cross check to ensure that potential victims and aggressors are housed properly. They do not have it broken down by unit/section/pod and bed. Nor do they use identifiers with the name. Booking staff utilize

their computer system to determine bed assignment.

- 10. Privacy screens in Booking. Nothing is used to ensure that inmates have privacy while toileting.
- 11. A deaf inmate who was interviewed. He stated that he was not given an opportunity to communicate as he should.
- 12. The auditors suggest that the room housing inmate files and bed assignment board, in booking be locked. (Confidentiality and Security breach issues.)

Here is the Corrective Action Plan (to be completed by March 1st and paperwork/pictures to be forwarded to auditors):

- 1. Assessments/Reassessments
- Go back to 1-10-2020 and fix all the reassessments since that date until the end of February. Forward the original assessment and reassessment for review.
- 2. Shower Curtains
- Fix the shower doors appropriately. At least one shower per section. The Superintendent and Maintenance supervisor stated that they had the materials on site.
- 3. Unannounced Rounds
- Show that rounds are being completed appropriately.
- 4. Bed Assignment Board
- Show that the Board now has the section/pod has both cell / bunk / and PV and PA identified.
- 5. Advocacy / Special Needs Addressed (Documentation)
- The Director of PREA Compliance will provide an update on this issue.
- 6. Booking Privacy Screen
- A screen must be provided for inmates in the holding cells.
- 7. Advocacy
- Although the facility does not have a victim advocate, does the hospital provide one when a forensic examination occurs? Will that advocate continue to work with the inmate?

ITEMS COMPLETED BY MARCH 1, 2020:

- 1. The facility provided 158 assessments with updated reassessments for the auditor to review. There continues to be items that need attention. The Office of PREA Compliance will be doing additional training with the facility.
- 2. All showers now have appropriate additions to ensure privacy.
- 3. The facility provided subsequent completed Unannounced Rounds Forms. Supervisors have

additionally been reminded of their requirements for the numbers to be completed.

- 4. The bed assignment board is now being utilized as a cross check to ensure that PV and PP are housed appropriately.
- 5. The Director of the Office of PREA Compliance has been working with the WV Foundation for Rape Information and Services (FRIS) to ensure advocacy for their inmates. In addition, the Women's Resource Center has been contacted and agrees to provide an advocate at the hospital. Offenders will also be informed of the Rape, Abuse and Incest National Network.
- 6. The facility has completed adding a privacy screen to the toilet area in booking.
- 7. The Office of PREA Compliance has been made aware of a West Virginia Relay service which is provided by Sprint and administered by the Public Service Commission of West Virginia. This service is applicable to the deaf or hearing impaired and those with a speech disability. They are working with their telephone provider to be able to access this toll free number for all facilities within the state.
- 8. The facility provided pictures of all the locations that the PREA notice was placed.
- 9. The PCM provided a Corrective Action letter indicating the facility information written above.

CONTINUING CORRECTIVE ACTION PLAN:

The PREA Auditor will return to the facility at a date-to be determined (anticipated three (3) - four (4) months to review the on-going compliance for the above listed items, specifically the assessment/reassessment process. In addition:

- 1. The auditor will review all investigation files that occurred from the time of the audit until the return of the auditor to the facility.
- 2. The auditor will also review the PREA Incident Review Team minutes for each of the applicable investigations.

Corrective Action Plan Update:

115.41: In late Febrary the auditor reviewed approximately 158 assessments and reassessments and found 37 that had items either left out or not finished. Not count in that number were those that did not have the age filled in or if the reassessments were not completed in a timely fashion before the audit. The following items were shown to have been addressed: Shower Curtains, Unannounced Rounds, Bed Assignment Board, Advocacy / Special Needs - continues to be addressed, and Booking Privacy Screen.

In late July, early August, the auditor again reviewed a large number of assessments and reassessments and found the following: The reassessments ranged from being one day late to twenty-four days late, with most being under eight days late. These calculations indicate that the reassessments are being completed timely appropriately 42% of the time. In eliminating the reassessments that were five or less days late, by these calculations the reassessments are being completed timely appropriately 76% of the

time.

The auditors in conjunction with the Office of PREA Compliance set a time frame for the next review of assessments and reassessments. On August 20, 2020, the Office of PREA Compliance was notified that three hundred two (302) individuals had their assessment and reassessment reviewed, showing only eighteen (18) that were late. Those eighteen (18) reassessments were late by only two (2), three (3) days with only one at eight (8) days. A tremendous improvement.

115.81: During the review of assessments and reassessments, if was noted that those reassessments that had contact with medical/mental health were documented.

115.86: Since the last review, the facility has had three (3) sexual abuse investigations; two (2) unfounded and one (1) unsubstantiated. All elements required were reviewed and documented.

PREA Audit:

The notice of the upcoming PREA audit was forwarded to the Office of PREA Compliance (O.P.C.) on December 28, 2019 to be posted at least six weeks prior to the on-site audit. The O.P.C. was asked to post the notices in areas where it would be visible to staff, inmates, contractors, volunteers and visitors. The auditor received pictures of the posted notices on January 13, 2020 showing the multiple locations of the notices. The purpose of the Notice is to allow any individual, including a third party, with a PREA concern or issue, to include an allegation of sexual abuse or sexual harassment, to correspond confidentially with the PREA Auditor.

The auditor received one letter from this facility. While at the facility, the auditor met with the inmate, after reviewing his PREA investigation file. The inmate alleged that an Officer sexually harassed him. The review of the investigation file determined the allegation was 'unfounded'. The auditor feels that the investigation was completed appropriately and shared that with the inmate. The inmate was appropriate to this response and thanked the auditor for following up with him.

Pre-Audit Discussion:

A telephone conversation was held on January 31, 2020 with Timothy Harper, Amanda McGrew, co-auditor Aaron Keech and auditor Darlene Baugh. The auditor shared her usual format for the audit and asked if this was workable for the facility. Also discussed was a list provided by the auditor (via email) that provided the institution with materials to be reviewed on site and those staff positions that the auditors would like to interview. A start time for the audit was set and the call concluded.

Outreach to Outside Advocates:

The auditor contacted the Women's Resource Center. A staff member stated that they provide services to both male and females at SRJ and that there is a PREA protocol in place. She will have Patricia Bailey, Supervisor contact the auditor. No return call occurred.

On-Site Audit Activities

Site Review:

As noted previously, the auditors conducted a site review of the entire facility. At the entrance to the facility, there is a reception window utilized for visitors to the facility. Across from the window is a large waiting area for visits. PREA related information was posted throughout this area. Behind the reception area is the administration area for the facility. Housed in this area is the Superintendent, Chief Correctional Officer, Director of Inmate Services, Human Services Administrator, Staff Break Room and additional administrative staff. Entrance to the area is controlled by a keypad, requiring identification codes

A main control room controls entrance and access to into the secure area of the facility which contains non-contact visitation rooms, interview rooms, offices, training room, medical and mental health, classrooms, booking, chapel, library, kitchen, storage areas, laundry and the housing units. All those areas mentioned extend from a long-centralized hallway.

Kitchen, Storage, Back Dock:

The kitchen area had two cameras that were fogged. It was not determined if it was caused by a camera malfunction or steam. Noted was a blind area needed additional camera coverage. (Note: The height of the stored boxes also inhibits visibility.)

Staff shared that inmates are accompanied when they are in this area. However, inmates shared that occasionally they are alone in this area and in the storage rooms.

Laundry:

The laundry had cameras. One was not working.

Additional cameras would be advantageous.

Housing Areas:

The pods/sections were observed. Each had a camera for viewing, as well as a view from an interior 'tower'.

Housing Hallways:

There is a room available for medical use in each pod's hallway, however, medical staff remain in the main hallway accompanied by staff. There are also small rooms for the rovers to do paperwork if time allows.

Booking:

Arriving inmates are admitted via the booking area. This area contains holding cells for use during multiple arrivals or suicide watches. Toilets are exposed, privacy screens were not available. There are no camera views into these cells. Arrivals are screened by medical for vital signs. Staff stand at the counter with the inmate to interview and screen. Also utilized during the intake process is an x-ray scanner which is located in a small room off the waiting area in booking. Staff ask the PREA questions in this room (Closed door.)

Also located in Booking is a room utilized for hearings.

Commissary:

Commissary is located near the kitchen. It is staffed with two contract staff.

Gym:

The gym has multiple cameras. It was noted that the gym has not been utilized in months. Small outdoor exercise areas are located off the centralized hallway.

Medical:

Medical is equipped with several cameras.

Note:

All appropriate doors were locked throughout the facility.

The following was observed in every section (living unit):

- One or more Kiosk's (each inmate must initiate the PREA video before being able to utilize the items on the Kiosk) which allows inmates to contact Medical, Shift Supervisor, Counselor, the Inmate Handbook, Office of PREA Compliance, Commissary, Grievances and others.
- Phones with dialing instructions for reporting allegations of sexual abuse or sexual harassment. One location for reporting was the Rape Crisis Center, with the other number going to the Office of PREA Compliance. (The auditor did test the number and was able to listen to the recording of her call later in the week.)
- Single occupancy showers are available in each section. Metal doors are utilized as the closures. Within the female units, a shower curtain is also used (with the metal door) to ensure privacy. In the male unit, inmates add newspapers to the top and bottom of the doors to give them more privacy.
- · Toilets are located within each individual cell.
- Each cell has an intercom/call button which enables the inmate to contact the 'tower' officer. When an inmate utilizes the call button, a recording is immediately initiated.

The following is the housing assignments:

A-Pod

- 1. Male Lock-down and suicide watch / Mix of all inmates.
- 2. Male Medical / Mix of all inmates.
- 3. Male Special Management / Mix of all inmates.
- 4. Male Special Management / Felons.
- 5. Female Felons and Federal Inmates.
- 6. Female Misdemeanor.
- 7. Female Lock-down and Suicide watch / Mix of all inmates.
- 8. Female Felons and Federal Inmates.

B-Pod

- 1. Male Felons and Federal inmates.
- 2. Male Felons and Federal inmates.
- 3. Male Felons and Federal inmates.
- 4. Male Felons and Federal inmates.
- 5. Male Felons and Federal inmates.
- 6. Male Felons and Federal inmates.
- 7. Male Felons and Federal inmates.
- 8. Male Felons and Federal inmates.

C-Pod

- 1. Male Felons and Federal inmates.
- 2. Misdemeanor.
- 3. Male Felons and Federal inmates.
- 4. Misdemeanor.
- 5. Kitchen crew / Male Felons inmates.
- 6. Misdemeanor.
- 7. Male Felons and Federal inmates.
- 8. Male Felons and Federal inmates.

Counties Served: Fayette, Greenbrier, Mercer, Monroe, Raleigh, Summers and Wyoming.

Background Checks / PREA Related Questions / Professional References: (19)

Employee files for those interviewed were reviewed. Initial and current background checks were completed well within the policy requirement of four (4) years (also volunteer and contract). Both new employees and promotional employees are required to answer the following questions: 10. Have you ever engaged in sexual abuse or sexual misconduct in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution? 11. Have you ever been criminally convicted of engaging or attempting to engage in coerced or forced sexual activity, including any type of sexual misconduct or sexual harassment? #12. Have you ever been civilly or administratively found liable for engaging in coerced or forced sexual activity, including any type of sexual misconduct or sexual harassment?

Facility Staff Plan Annual Review:

The annual staffing plan is completed within the Department's Central Office. The Superintendent shared that staffing was adequate.

Selection of Staff and Inmates for interviews:

After the entrance meeting a list of staff, by shift, and of the inmates were provided to the auditors. The auditors then randomly selected from both lists. Several of the staff interviews were targeted.

Inmate Interviews: (33)

The following interviews were completed:

Random: 23

Physical Disability: 1 Deaf: 1 Cognitive Disability: 1 Bisexual: 1 Transgender: 1 Segregated Housing (not for High Risk of Sexual Victimization): 1 Reported Sexual Abuse: 3 Reported Sexual Victimization During Risk Screening: 1 Females: 9 Males: 24 Refusals: 1 Note: The facility did not keep data for prior sexual victimization until recently. The facility does not house youthful offenders. No intersex inmates were housed at the facility. Staff, Contractor and Volunteer Interviews: (19) The following completed interviews covered all shifts: Superintendent Major Lieutenant (Booking) Captain (Incident Review Team) Lieutenant (Incident Review Team) Sargent - 2 Corporal - 1

Correctional Officers – 3

Human Resources Administrator Health Services Director

Mental Health Provider

Chaplain Counselor

Investigator III
Investigator II

PREA Compliance Manager

Documents Reviewed:

While on site and via OAS, the auditors reviewed the following documents:

- All PREA Allegations/Investigations files (within the past year)
- · All related medical/mental health records/data
- Offender Files
- Unannounced Rounds Documentation

- Administrative Rounds Documentation
- Staff Training Logs
- Language Services Contract
- Medical/Mental Health Contract
- Personnel Files
- Training Records of Investigators
- Medical Training Records
- Review of records and documentation of housing assignments of inmates at high risk for sexual victimization (none)
- Review of Staff files (who have been terminated or resigned or disciplined for PREA related allegations) (1)
- · Documentation of Referrals to Law Enforcement, et.
- Informed Consent Form for Medical/Mental Health

Unannounced PREA Rounds/Documentation:

Unannounced Rounds. The facility uses a form for the rounds made by their Administrative Team. However, the Unannounced Rounds form was just started 2 - 3 months ago. They currently use this form for a group of supervisors going through the facility. It is never done by a single supervisor. This is not the intent of unannounced rounds and should be changed. Also, supervisors gave varying answers on the expectation of number of rounds per month, this needs to also be clarified and understood. (The Unannounced Rounds form is forwarded to the PCM for data collection.)

MOU with Contact Rape Crisis Center:

When the Department became an umbrella agency for Corrections, Jails and Juvenile Facilities, there was a discrepancy with how advocacy services were provided. Since the merging, a contract has not been finalized, although discussion is ongoing.

Victimization / Aggressor Assessments and Reassessments: (29)

The Assessments and Reassessments had problems. The assessment is completed in booking and the PCM does the reassessment.

- There is no information available from medical/psych to accurately complete those areas in the assessment on medical/mental health/disabilities. This needs to be corrected.
- Some Reassessments are being completed on the same day as the initial assessment. Needs to be corrected.
- While completing the document, the areas of hearing impaired, LEP are not being addressed as part of vulnerability. This needs to be corrected and notated on the form.
- Some assessments/reassessments are inaccurate because they are not utilizing the scoring to reflect whether the inmate is a potential victim or aggressor. This needs to be reviewed and addressed.
- Reassessments do not occur when a PREA investigation is completed.

Incident Reports/Investigations (10):

The following files were reviewed in detail:

1. SRJ – 19-003 CID-19-010 Unsubstantiated

- 2. SRJ-19-009 CID-19-053 Unsubstantiated
- 3. SRJ- 19-010 CID-19-069 Unfounded
- 4./5. SRJ-19-013 (01)(02) CID-19-069 01-Unsubstantiated; 02-Unfounded
- 6. SRJ-10-027 CID-19-175 Unsubstantiated
- 7. SRJ-19-035 CID-19-237 Unfounded
- 8./9. SRJ 19-038 (01)(02) CID-19-275 01-Substantiated (Staff); 02-Unfounded
- 10. SRJ-19-042 CID-19-310 Unsubstantiated

Note: Investigation #9. This was a relationship of calling each other, putting money on the inmates account, sending e-mails. There was no physical touching. No referral was made for criminal action. Termination occurred.

Coordinated Response Plan:

West Virginia Division of Corrections and Rehabilitation Coordinated Response Plan is not a checkoff form but is a detailed flow chart containing items under each of the following headings:

- First Responder
- Shift Supervisor
- Facility Investigator
- · Emergency Examinations and Testing
- · Medical and Mental Health
- Facility PREA Compliance Manager

Post Audit Activities:

From the time that the on-site portion of the audit was completed and the completion of this report, the Office of PREA Compliance and this auditor were in constant contact. It is very apparent that the facility and the O.P.C. were working diligently to address the issues that were addressed earlier in this report. The auditor feels that her return to the facility will show that all items continue to be addressed.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

Facility Characteristics:

The West Virginia Regional Jail and Correction Facility Authority was created by the West Virginia Legislature in 1985. The purpose of the Authority was to provide safe, secure and humane care for persons ordered to be incarcerated by the courts. Generally, regional jails served both pre-trial defendants and persons sentenced to terms of one year or less. However, offenders sentenced to serve terms of confinement in the custody of the Division of Corrections were also held in regional jails while awaiting transfer to the state correctional system. The inmate population consisted of county, state and federal inmates, both male and female. The factors that influenced the closing of county operated jails and the realization of a regional jail system date back as far as 1946 when the Bureau of Prisons, in a study authorized by the West Virginia Legislature, found West Virginia's county jails to be "anachronisms and totally unfit for human habitation." The study went on to recommend that the county jails be consolidated into regional jails with adequate numbers of appropriately trained staff. The ongoing deterioration of physical plants and apparent living conditions in the 1960's and 1970's resulted in an increased exposure to the liabilities attendant to inmate-initiated litigation, resulting in the use or Law Enforcement Assistance Act funding to make improvements in many county jails. However, the continuing deterioration of physical plants, many of which were built around the turn of the century, made it evident that mere repairs would be insufficient to deal with the severity of the situation. In 1982, the Governor's Committee on Crime, Delinquency and Corrections commissioned a study of county jails resulting in the recommendation of the consolidation of county jails and the creation of a state operated facility for sentenced misdemeanant offenders. An additional study included involvement of county sheriffs and state level administrators and resulted in the Legislature establishing the West Virginia Regional Jail and Prison Authority in 1985. The original Authority consisted of 21 members. This Authority was empowered to issue revenue bonds to be repaid by special fees attached to criminal convictions and civil cases. establish regions, construct regional jails with bond funds and operate regional jails with operating funds provided by the payment of per diem rate by the counties to be served by regional jails. The Authority developed a master plan for the construction of 12 regional jails. The Authority was to address the needs of the county jails before beginning to consider the needs of the state's correctional system. In May of 1989, the Eastern Regional Jail (ERJ) opened in Martinsburg initially serving the Eastern Panhandle counties of Jefferson, Berkeley, and Morgan, along with Mineral, Hardy and Hampshire. The latter counties would eventually remove their inmates from ERJ West Virginia Regional Jail Authority -Potomac Highlands Regional Jail (PHRJ) in Augusta, WV. During the 1989 Legislative session, the Authority's responsibilities were increased by requiring the Authority to focus both upon regional jails and state correctional facilities. This "change in focus" was brought about in response to the West Virginia Supreme Court of Appeals decision in the case of Crain vs. Bordenkircher requiring the replacement of the West Virginia Penitentiary at Moundsville, The reconstituted Authority, with seven voting and two non-voting members, were known as the West Virginia Regional Jail and Correctional Facility Authority, revisited the "master plan" and concluded that ten regional jails of two, three and four hundred bed capacity, built of a prototypical design, could serve the

counties and allow for improved efficiency of construction, familiarity of operation, and standardization of training. The Authority was to be governed by a board of nine members, seven of whom were entitled to vote on matters coming before the Authority. The complete governing board consisted of the Commissioner of the Division of Corrections, the Director of the Division of Juvenile Services, the Secretary of the Department of Military Affairs and Public Safety, the Secretary of the Department of Administration, or his/her designated representative, three county officials appointed by the Governor, no more than two of which may be of the same political party, and two citizens appointed by the Governor to represent the areas of law and medicine. The Commissioner of the Division of Corrections and the Director of the Division of Juvenile Services were to serve in an advisory capacity and were not entitled to vote on matters coming before the Authority. Members of the Legislature were not eligible to serve on the Board. All regional jails are of a prototypical design.

On July 1, 2018, the West Virginia Division of Corrections and Rehabilitation was created by the West Virginia Legislature by consolidating the former "legacy agencies". The legacy agencies included the Division of Corrections, the Division of Juvenile Services and the Regional Jail Authority. As a result of the consolidation, duty sections were combined to reduce duplication of efforts and create a standard operation. One of the many developments that has come through the correctional consolidation is the DCR Office of PREA Compliance. (Developed within the early months of 2019.) The three legacy agencies each approached the PREA standards differently, each with the goal of compliance in mind. As a result, each agency had various forms and processes in place, although they were similar in concept, all were different. The goal of the Office of PREA Compliance is uniformity in documentation and process, and eventually being nearly paperless. They have developed a stand-alone DCR PREA policy which includes a coordinated response plan for all allegations of sexual assault. Other on-going developments of this office includes:

- Creating a PREA Incident database for jails and prisons. One exists for juveniles and will become the model for jails and prisons.
- A reporting format that will be consistent addressing timely investigations, responses and appropriate follow-up.
- Working with PREA investigators to facilitate communication and a strong working relationship.
- Developing a consistent process to eliminate unnecessary call from random facility employees to the West Virginia State Police. (Now the investigators are responsible for the contact.)
- Conducting monthly web-based meetings with the PREA Compliance Managers.
- Working with the Assistant Commissioner of Training and Staff Development to develop the required training material to fulfill PREA requirements.
- The office has taught multiple academy classes and have begun training for central office employees.
- They are involved in the agency volunteer program to ensure PREA training and requirements are being met.
- They are now working with the DMAPS (Department of Military Affairs and Public Safety under which the Division of Corrections and Rehabilitation falls) legal team, responding to all requests related to sexual misconduct.
- They are working with external advocacy groups and entering into agreements to provide reasonable cost-effective services for offenders.

The History of the Southern Regional Jail:

The Southern Regional Jail and Correctional Facility is located in Beaver in Raleigh County. This facility was built in 1994 and serves seven counties in the southeastern part of the state; Fayette, Greenbrier,

Mercer, Monroe, Raleigh, Summers and Wyoming.

It opened in 1994 Dudley Burgess First Administrator The Jail was originally designed for 310 Residents . The Second Administrator was J D Huppenthal. Third Administrator Tom Scott. Forth Administrator Vickie Greene. Fifth Administrator / Superintendent Michael Francis 2013-Present. Currently Housing is 484 with the addition of Metal Bunks in 2010.

Programs Include:

- Thinking for a Change
- C.B.I.S.A. (Cognitive Behavior Intervention Substance Abuse)
- A.B.E. Classes

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

| Number of standards exceeded: | 1 | |
|-------------------------------|----|--|
| Number of standards met: | 44 | |
| Number of standards not met: | 0 | |

Numbers of Standards Exceeded: 1

Standard Number: 115.17

Number of Standards Met: 40

Standard Numbers: 115.11, 115.12, 115.13, 115.14, 115.15, 115.16, 115.17, 115.18, 115.21, 115.22, 115.31,115.32, 115.33, 115.34, 115.35, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.81, 115.81, 115.82, 115.83, 115.86, 115.87, 115.88, 115.89

Number of Standards Not Met: 0

Standard Numbers: n/a

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator **Auditor Overall Determination: Meets Standard Auditor Discussion** Materials Reviewed: Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Table of Organization - Office of PREA Compliance Table of Organization - West Virginia Division of Corrections and Rehabilitation Table of Organization - Southern Regional Jail and Correctional Facility Interview with Agency's PREA Compliance Manager Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) I. Prevention Planning A. OCR has zero tolerance for any acts of sexual abuse, assault, misconduct, or harassment. Sexual activity between staff and offenders, volunteers or contract personnel and offenders, and offender and offender, regardless of consensual status, is prohibited and subject to administrative and criminal disciplinary sanctions up to and including dismissal and prosecution pursuant to West Virginia Code and DCR Policy and procedure. §61-8B-10. (115.1 |{a})) B. The OCR Director of PREA Compliance along with OCR PREA Coordinators and designated support staff shall make up the Office of PREA Compliance and will have sufficient time and authority to develop, implement, coordinate and oversee OCR efforts to comply with the PREA standards in all facilities. Each facility Superintendent within OCR shall designate a PREA Compliance Manager, who will be the second highest ranking person. Those currently serving as PREA Compliance Managers upon the effective date of this policy may remain in that position at the discretion of the Director of PREA Compliance. (115.11 (ac)) Comments: The Table of Organization for the Office of PREA Compliance shows that Timothy Harper, Director of PREA Compliance reports to the Assistant Commissioner of the Inspector General Bureau. Also, within this office are two (2) PREA Coordinators; Amanda McGrew and Kellan Cordie. The two (2) Coordinators work with thirty-six Facility PREA Compliance Managers: sixteen (16) prisons, ten (10) jails and ten (10) juvenile facilities. The PREA Compliance Manager within the facility is an assigned Sergeant who reports to the Major.

All staff and inmate interviews indicated that a zero-tolerance policy is in place.

115.12 Contracting with other entities for the confinement of inmates Auditor Overall Determination: Meets Standard Auditor Discussion Materials Reviewed: Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Agency Master Agreement with Youth Services System Inc. WVDCR Contract with County Commission of McDowell County On or after August 20, 2012 or since the last PREA audit, whichever is later: The number of contracts for the confinement of inmates that the agency entered into or renewed with private entities or other government agencies: 2 The number of contracts that DID NOT require contractors to adopt and comply with PREA standards: 0 On or after August 20, 2012, or since the last PREA audit, whichever is later, the number of contracts that DO NOT require the agency to monitor contractor's compliance with PREA standards: 0 Comments: The West Virginia Division of Corrections & Rehabilitation (hereafter written as WVDCR) holds a contract with the County Commission of McDowell County to "provide housing for up to 334 inmates at the main campus of the Stevens Correctional Center and 108 inmates at the McDowell County Unit, which number may decrease from time to time in which case the payment will be adjusted accordingly. However, the total number of inmates shall not exceed 334 at the Stevens Correctional Center and 108 at the McDowell County Unit." Signed February of 2012. The Agency Master Agreement with Youth Services System Inc., dated 2019-09-17, is for the fixed daily rate of payment. The Stevens Correctional Center is a contracted facility. Interestingly, the PREA investigations completed at this Center shows on the Investigators data as if it happened at the Southern

Regional Jail. However, it is not included in the statewide PREA database for Southern

Regional Jail.

115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

Letter from the Superintendent Addressing Staffing Requirements

Signature Form for Rounds on December 9, 2019

Unannounced Rounds Form; Attachment 16

Staffing Plan

Post Assignment Roster

Unannounced Rounds

Interview with Superintendent

Interview with PREA Compliance Manager

Interview with Intermediate or High-Level Facility Staff

Site Review

Since August 20, 2012, or last PREA audit, whichever is later:

The average daily number of inmates: 640

The average daily number of inmates on which the staffing plan was predicated: 468

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

D. In an effort to identify and deter staff sexual abuse and sexual harassment, the Facility Superintendent shall develop a procedure to ensure that unannounced rounds are completed periodically by the appropriate staff on all shifts. These rounds will be conducted in all areas of the facility, specifically in all offender living areas. Completion of unannounced rounds shall be documented. (115.13 (e))

E. Any staff member found to be alerting other staff that these rounds are occurring will be subject to disciplinary action unless such announcement is related to the legitimate operational functions of the facility. (115.13 (e))

Comments:

The facility maintains staffing plan by overtime, freezing staff and calling staff in. This facility does not drop below minimum requirements.

A letter from Superintendent Michael Francis to Amanda McGrew on January 9, 2020 states "In reference to PREA Staffing Guidelines, Southern Regional Jail & Corrections Facility does NOT fall below staffing requirements in NORMAL Circumstances.

During the last Fiscal Year Southern Regional Jail & Corrections Facility ONLY fell below these requirements during EMERGENCY situations ONLY and occurred between the hours of 1900 - 0700 and occasionally on a Weekend Shift."

Reasons for deviation of the staffing plan are: Hospital Duty, Staff Shortage, Call-Offs,

Vacation and Doctor Care.

The Superintendent works 5:00 a.m. – 2:00 pm. He sees both shifts and facility walk thru each morning. A form was developed and put in place to track all future rounds.

The Superintendent reports that the Staffing Plan is devised in their Central Office yearly using the criteria noted in this standard. The facility carries over-time due to call-ins, hospital duty, etc. While present at the facility the auditors noted the number of staff talking about their long shifts, due to coverage needs. It is not uncommon for staff to work sixteen (16) hour shifts. Additionally, the Superintendent shared that he had made requests for cameras, mirrors and additional staff to ensure appropriate coverage.

The facility uses a form for the rounds made by their Administrative Team. However, the Unannounced Rounds form was just started 2 - 3 months ago. They currently use this form for a group of supervisors going through the facility. It is never done by a single supervisor. This is not the intent of unannounced rounds and should be changed. Also, supervisors gave varying answers on the expectation of number of rounds per month, this needs to also be clarified and understood. (The Unannounced Rounds form is forwarded to the PCM for data collection.)

| 115.14 | Youthful inmates |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Materials Reviewed: |
| | Site Visit |
| | In the past 12 months: |
| | The number of housing units to which youthful offenders are assigned that provide sight and sound separation between youthful and adult offenders in day rooms, common areas, showers, and sleeping quarters: 0 |
| | The number of youthful inmates placed in the SAME HOUSING UNIT as adults in this facility: 0 |
| | In the past 12 months, the number of youthful inmates who have been placed in isolation in order |
| | to separate them from adult inmates: 0 |
| | |
| | Comments: |
| | This facility does not house youthful offenders. |

115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Policy Directive # 411.00; Subject: Gender Non-Conforming Inmates/Residents

Lesson Plan: Contraband Search

Training Roster
Staff Training Logs
Interviews of Staff
Interviews of Female Inmates
Interviews of Male Inmates
Interviews of Transgender Inmates
Site Review

In the past 12 months:

The number of cross-gender strip or cross-gender visual body cavity searches of inmates: 0
The number of cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff: 0

In the past 12 months:

The number of pat-down searches of female inmates conducted by male staff: 0
The number of pat-down searches of female inmates conducted by male staff that did not involve exigent circumstances: 0

Percent of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs: 100%

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

- F. Staff shall not conduct cross gender pat-down, strip searches or cross-gender visual body cavity searches, except in exigent circumstances or when performed by medical practitioners in accordance with current Policy. All exigent cross-gender searches will be documented via incident report. For a facility whose rated capacity does not exceed 50 offenders, the facility shall not permit cross-gender pat-down searches of female offenders, absent exigent circumstances. Facilities shall not restrict female offenders' access to regularly available programming or other out-ofcell opportunities in order to comply with this provision. If these searches occur, they shall be documented. (115.15 (a) (b) (c))
- G. Offenders shall be able to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. This limitation not only applies to in-person viewing, but also all forms of remote viewing as well. (115.15 (d)) H. Staff shall announce their presence every time they enter an offender housing unit of the
- opposite gender to indicate that there will be someone of the opposite gender on the unit. (115.15 (d))

J. Staff shall be trained to conduct pat searches of trans gender and intersex offenders, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security. (115.15 (t))

Policy Directive # 411.00; Subject: Gender Non-Conforming Inmates/Residents

Lesson Plan: Contraband Search

- B. Strip searches should be performed by a person of the same gender except in exigent circumstances or when performed by medical practitioners. If a cross gender strip search must be performed due to exigent circumstances, the search will be documented via an incident report. Guidelines previously and subsequently reviewed in this course should be followed for any strip search, to include cross-gender strip searches.
- C. When dealing with a strip search with a transgender, intersex or gender nonconforming offender, if you are unsure how to proceed, contact your supervisor for further guidance.

Comments:

The WVDCR prohibits cross gender searches of any kind. Interviews with staff and inmates confirmed the accuracy of the policy. If a female inmate is in need of being patted down and there is no female staff available, the inmate is held in intake until a female staff is available or electronic screening occurs. There is no restriction of opportunities for the female inmate.

There was one (1) transgender inmate held at SRJ. She related that she is comfortable with how the facility handles her searches.

When the auditor asked staff if there is a policy that prohibits staff from searching or physically examining a transgender of intersex inmate for the purpose of determining genital status. She received a responding / firm 'that is not allowed'.

Showers within the housing facility is for a single individual. Each housing unit/pod has two (2) available showers. Inmates stated that they have the ability to shower, change clothes and toilet without being seen nude.

Staff announce that they are on the unit/pod when entering a location of their opposite gender.

Note:

- 1. Shower curtains (privacy) for the male inmates continues to be an issue year after year. This needs to be corrected.
- 2. Privacy screens in Booking. Nothing is used to ensure that inmates have privacy while toileting.

115.16 Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.16

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

Propio Language Services Contract signed March 2016

Interviews with Inmates who have disabilities or are limited English Proficient

Interviews with staff

Site Review

Inmate Handbook

Written Materials for Inmates with Disabilities

In the past 12 months, the number of instances where inmate interpreters, readers, or other types of

inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations: 0

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

L. Written materials will either be delivered in alternative formats that accommodate the offender's disability or the information will be delivered through alternative methods, that ensure effective communication with offenders with disabilities, including those with intellectual disabilities, limited reading skills, or no or low v1s1on. Reading the information to the offender or communicating through an interpreter, will ensure that they understand the PREA related material. In addition to providing such education, the facility shall ensure that key information is continuously and readily available to offenders through posters, or other written formats. (115.16 (a)) (115.33 (e) (f))

K. Facilities shall take reasonable steps to ensure all offenders with disabilities and those who are limited English proficient have meaningful access and equal opportunity to participate in or benefit from all aspects of the DCR's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility shall use the contracted translation services to facilitate communication with the offender. (115.16 (a) (b))

M. Only staff members or qualified contractors will provide translation for offenders. The OCR shall not rely on offender interpreters, readers, or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first-response duties, or the investigation of the offender's allegations. (115 .16 (b)(c))

Comments:

The facility does not use other inmates for interpretive service. A Language Line is available for use.

As noted earlier in this report, a non- English-speaking inmate and a deaf inmate was interviewed. Neither felt that their needs were being addressed. How this was addressed is noted earlier in this report.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)
Personnel Files of Staff who were hired or promoted in last twelve months for criminal background

checks and past conduct

Personnel Files of background checks of contractors

Personnel Files of Staff re: five-year background records checks

Interview with Human Resources Staff

In the past 12 months:

The number of persons hired who may have contact with inmates who have had criminal background record checks: 35

In the past 12 months:

The number of contracts for services where criminal background record checks were conducted

on all staff covered in the contract who might have contact with inmates: 0

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

N. All individuals who may have contact with offenders will be asked to disclose previous misconduct during interviews for hiring, promoting or as part of reviews of current employees. Employees shall have a continuing affirmative duty to disclose any such misconduct. OCR shall not hire, promote or enlist the services of any person who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution or has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse or has been civilly or administratively adjudicated to have engaged in such activity. The OCR shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or enlist the services of any contractor, who may have contact with offenders. Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. (115.17 (a) (b) (f) (g))

- 1. A background investigation will be completed before hiring or promoting employees, enlisting the services of contractors, interns or volunteers. The OCR shall conduct criminal background checks of all employees, volunteers, interns and contractors every four years. (115.17 (d) (e))
- P. Consistent with Federal, State, and local law, the OCR must make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Unless prohibited by law or policy, the OCR shall provide information on substantiated allegations of

sexual abuse or sexual harassment involving former employees upon receiving a request from an institutional employer from whom the employee has applied to work (115.17 (c) (h))

Comments:

Staff (new, current and promotional), contractor and volunteer files were reviewed and found to be well documented. Volunteer criminal history checks are done yearly. All reviewed files showed that the criminal history checks were done before the four (4) years required by policy.

The following questions are included in the questionnaire for all positions noted above:

- 10. Have you ever engaged in sexual abuse or sexual misconduct in a prison, jail, lockup, community confinement facility, juvenile facility or other institution?
- 11. Have you ever been criminally convicted of engaging or attempting to engage in coerced or forced sexual activity, including any type of sexual misconduct or sexual harassment?
- 12. Have you ever been civilly or administratively found liable for engaging in coerced or forced sexual activity, including any type of sexual misconduct or sexual harassment?

Human Resources reported that they are able to respond to this question "Would you re-hire this individual", however all other related questions would be forwarded to Charleston.

| 115.18 | Upgrades to facilities and technologies |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Materials Reviewed: |
| | Interview with Superintendent |
| | Site Review |
| | 2019 Staffing Plan Review |
| | Equipment Updated, surveillance, monitoring, etc. (minutes from meetings) |
| | Comments: |
| | There has been no modifications or additions to this facility since it's last audit other than additions of cameras and a current wall addition in one area (making two (2) rooms and a hallway from one large room). |

115.21 Evidence protocol and forensic medical examinations **Auditor Overall Determination: Meets Standard Auditor Discussion** Materials Reviewed: Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) West Virginia Protocol for Responding to Victims of Sexual Abuse Memorandum: Inmate access to outside confidential support services Draft Memorandum of Agreement between WVDCR and the West Virginia State Police Interviews with Staff Interview with PREA Compliance Manager Interview with Inmates who Reported a Sexual Abuse Review Investigation Files **Uniform Evidence Protocol** Medical File Review In the past 12 months: The number of forensic medical exams conducted: 4 The number of exams performed by SANEs/SAFEs: 4 The number of exams performed by a qualified medical practitioner: 0 Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) F. Administrative and criminal investigations shall be conducted in accordance with best practice for the investigation of sexual assault and shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative procedures and criminal prosecutions. The protocol shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011. (115.21 (a) (b)) B. 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. All victims of sexual abuse shall be offered access to forensic medical examinations at the facility or an outside facility, such examinations shall be performed by a Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE's) where possible. The OCR shall document efforts to provide SAFE's or SANE's, if one is not available, the examination can be performed by other qualified medical practitioners. Treatment 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. (115.82 (a) (d)), (115.83 (g)), (115.21 (c)) C. The facility will use the list of local hospitals that employ a SANE (Sexual Assault Nurse Examiner), to determine the appropriate medical provider to transport to. Any refusal by the offender to undergo the forensic exam, must be documented. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, first responders

medical and mental health practitioners. (115.21 €) (115.82 (b)

shall take preliminary steps to protect the victim and shall immediately notify the appropriate

D. The OCR shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the OCR shall provide a qualified staff member to provide these services. Agencies shall document efforts to secure services from rape crisis centers. If requested by the victim, a victim advocate, qualified OCR staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. To the extent the OCR itself is not responsible for investigating allegations of sexual abuse, the OCR shall request that the investigating agency follow the requirements within policy. (115.21 (d) €)

West Virginia Protocol for Responding to Victims of Sexual Abuse

The Protocol document is a multidisciplinary victim-centered response for victim advocates, law enforcement, medical providers, SANEs and prosecution completed by West Virginia Foundation for Rape Information & Services, Inc. (FRIS).

Chapter 1 - Responding to Victims' Needs

Chapter 2 - The Advocate Response

Chapter 3 - Law Enforcement Response

Chapter 4 – The Medical Response

Chapter 5 - Medical Forensic Examination

Chapter 6 - Suspect Examination

Chapter 7 - Prosecution Response

Chapter 8 - West Virginia Forensic Medical Examination Fund

Chapter 9 - Child Sexual Abuse and the Medical Evaluation

Memorandum: Inmate access to outside confidential support services

This memorandum is from Timothy Harper, Director of PREA Compliance to Mable Wheeler,

Department of Justice Certified Auditor stating:

"The West Virginia Division of Corrections and Rehabilitation is committed to full compliance with the Prison Rape Elimination Act Standards. In an effort to do so, the Office of PREA Compliance is in place to solely focus on PREA development and compliance.

We currently have victim advocates that are available for emotional support services as a result of agreements that were in place prior to the agencies consolidation. However, these services were not being offered uniformly across the prisons, jails and juvenile facilities. We are attempting to enter into one agreement with the West Virginia Foundation for Rape Information and Services (WV- FRIS) to secure these essential services for all offenders in DCR custody. Recently we were awarded a grant and hope to use a portion of the funding to partner with Just Detention International to develop a protocol that provides offenders with confidential emotional support services related to sexual abuse."

Comments:

The West Virginia Protocol for Responding to Victims of Sexual Abuse is a lengthy, detailed document for use by agencies dealing with sexual assault.

Offenders are transferred to a different hospital if a SAFE/SANE is not available at a local

hospital.

The drafted memorandum of Agreement between WVDCR and the WV State Police is intended to establish written procedures related to investigation of criminal allegations of sexual abuse and staff sexual misconduct regarding inmates within the custody of the DCR and concerning the exchange of information throughout the investigation.

The investigators fall under DMPS (State Police also fall under this umbrella). The conduct all administrative and criminal investigations. Once the investigators complete the investigation, it is turned over to the State Police to continue the process and move it to the prosecutor. Either the investigators or the State Police are responsible for obtaining the usable physical evidence.

No costs are associated with the care of a sexual assault victim. This would include a forensic examination and any associated follow-up care.

At the time of the on-site visit, there continues to be discussion (statewide) with the use of the Advocacy Group (FRIS). At the time the three (3) agencies came under the same umbrella, it was found that all were paying significantly different contractual costs with FRIS. This opened up negotiations that did not proceed well, hampering the facility from utilizing a community advocate. During the week following the on-site visit, the Director of PREA Compliance was scheduled to meet with the statewide coordinator to continue discussion.

The auditor attempted to talk via telephone with the Supervisor at the Women's Resource Center. A staff member shared that they have PREA protocol in place for both male and female inmate. A message was left requesting a return call from the Supervisor. This call was never received.

115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) DMAPS Policy CORR OPS 3 - DMAPS Investigations Unit

Interview with Investigative Staff

Review of Investigation Files

Website

In the past 12 months:

The number of allegations of sexual abuse and sexual harassment that were received: 8 The number of allegations resulting in an administrative investigation: 8

The number of allegations referred for criminal investigation: 1

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

A. Protection of witnesses and the victim shall be paramount throughout the investigation process. The Office of PREA Compliance, in conjunction with the facility PCM shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

- 1. Individuals conducting these investigations will receive specialized training.
- 2. Staff members, as designated by the Superintendent, shall do an inquiry on offender on offender harassment allegations.
- 3. CID investigators will conduct investigations on all staff on offender allegations and offender on offender sexual abuse allegations.
- 4. CID investigators will be primarily responsible for contacting and referring criminal allegations and assisting as needed with the investigation.
- 5. Investigations will be promptly, thoroughly, and objectively completed for all allegations, including third party and anonymously reported allegations. The reports and all related documentation are to be entered in the appropriate tracking system.
- 6. Staff having any knowledge of or reason to suspect that sexual misconduct has taken place, is subject to questioning by person(s) investigating such allegations. Failure to cooperate with the investigation, such as withholding known information, withholding evidence or giving false statements will result in disciplinary action. (115.22 (a)) (115.71 (a) (g))
- C. Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. (115.71 (g) (h))
- E. When an outside agency investigates sexual abuse, the DCR shall request that the investigating agency follow the Medical and Mental Health requirements of this policy. CID shall endeavor to remain informed about the progress of the investigation and regularly update Office of PREA Compliance throughout the investigative progress. (115.21 (t) (g)) (115.71 (1)) (115.22 (b))

A. Offenders shall be provided multiple internal and external ways to privately report sexual misconduct, retaliation by other offenders or staff for reporting sexual abuse, sexual harassment, staff neglect or violation of responsibilities that may have contributed to such incidents. The OCR shall also provide at least one way for offenders to report abuse or harassment to a public or private entity or office that is not part of the OCR, and that is able to receive and immediately forward offender reports of sexual abuse and sexual harassment to OCR officials, allowing the offender to remain anonymous upon request. Offenders detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security. The DCR shall distribute publicly through the OCR website the e-mail, address and information on how to report sexual abuse and sexual harassment on behalf of the offender and the DCR policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigations (115.54), (115.22) (115.51 (a) (b))

DMAPS Policy CORR OPS 3 - DMAPS Investigations Unit

To provide the most effective and efficient delivery of services, it is in the best interests of the State of West Virginia to consolidate investigative services of the Division of Corrections (DOC), Division of Juvenile Services (DJS) and Regional Jail Authority (RJA) into a single, statewide unit with a unified and cohesive chain of command. This consolidated unit will be identified as the Department of Military Affairs and Public Safety (DMAPS) Investigations Unit (Unit). DOC, RJA and DJS will each provide position, fiscal and operational support to the Unit. This document is not all inclusive and management has the authority and discretion to address any issues not specifically mentioned herein.

Comments:

All staff shared that investigators were contacted immediately upon learning that a PREA incident occurred (confirmed by investigators). At this time, legislatively, there is a movement to make this group of investigators into 'peace officers' status.

Currently, the investigators complete both administrative and criminal investigations. They work in coordination with the State Police to ensure that those findings of a criminal nature are moved forward for prosecution.

The website addresses the Departments zero-tolerance and format for reporting.

Note: The investigation document is good, but there is no conclusion date on the document. The investigation unit counts Stevens Correctional Facility (a contracted facility) PREA cases on Southern Regional Jails data. The Office of PREA Compliance counts them separately. However, this misrepresents SRJ's data within the investigation unit.

115.31 **Employee training Auditor Overall Determination: Meets Standard Auditor Discussion** Material Reviewed: PREA Training Handout and Answer Key PREA Lesson Plan approved February 14, 2019 Handout 1 - Sexual Abuse and Sexual Harassment (For Staff) Interviews with Staff Review of Staff Training Records / Signatures PREA Lesson Plan approved February 14, 2019 Performance objectives of the training: 1. Understand and apply the three primary goals of PREA. 2. Demonstrate methods to prevent sexual misconduct. 3. Detect signs of sexual misconduct. 4. Demonstrate the proper way to respond to sexual misconduct. Comments: The PREA Lesson Plan is very inclusive. Staff are cross trained on male and female inmates as the facility houses both. The curriculum covers all the areas noted in this standard. The Sexual Abuse and Sexual Harassment Handout 1 is a three (3) page document listing Red Flags of an Inmate/Staff Relationship. Staff are given the same training in refresher training each year-that they are taught in Basic Academy and sign an attendance roster. Contractors and volunteers also receive this training. Training records were reviewed and interviews with the volunteer and contractors showed their knowledge matched staff. Note: Staff interviews showed that staff knew the steps required when an inmate reports a sexual assault, however the steps were not consistently stated. In addition, LGBTI, the "I" was

not generally known. Follow-up training is recommended

| 115.32 | Volunteer and contractor training |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Materials Reviewed: PREA Acknowledgement Form/Sign-off for Contractors and Volunteers; Attachment 14 Training Sign-off Sheets: Staff, Medical, Contractors and Volunteers Interviews with Volunteers and Contractors Interview with Volunteers / Contractors who have Contact with Inmates Review of Volunteer / Contractors Training Records |
| | The number of volunteers and individual contractors, who have contact with inmates, who have been trained in agency policies and procedures regarding sexual abuse/harassment prevention, detection, and response: 103 |
| | PREA Acknowledgement Form/Sign-off for Contractors and Volunteers My signature below acknowledges that I understand and agree to comply with this notice of agreement regarding sexual misconduct and sexual harassment. My signature below also acknowledges that I have been informed on how to report such incidents. |
| | Comments: Contractors receive the same orientation training that DCR new hires receive. |
| | The PREA Acknowledgement Form/Sign-off covers the Department's zero-tolerance policy, duty to report, methods of reporting via verbal or anonymously and boundaries. |
| | Staff are given the same training in refresher training each year-that they are taught in Basic Academy and sign an attendance roster. Contractors and volunteers also receive this training |
| | Training records were reviewed and interviews with the volunteer and contractors showed their knowledge matched staff. |

115.33 Inmate education Auditor Overall Determination: Meets Standard Auditor Discussion Materials Reviewed: Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Interviews with Staff Interviews with Inmates Interviews with Intake Staff Files of Inmates entering facility in last 12 months / PREA signature sheets **Review of Posters** Site Review Offender Education Materials Inmate Handbook Of inmates admitted during the past 12 months: The number who were given this information at intake: 6644 Of inmates admitted during the past 12 months whose length of stay in the facility was for 30 days or more: The number who received comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake: 1550 Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) IV. Offender Education A. During the intake process, offenders shall receive educational information explaining, in an age appropriate fashion, the DCR's zero-tolerance policy on sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or harassment. This information shall be communicated verbally, in writing and in language clearly understood by the offender. The curriculum may be provided to offenders individually or in groups. At a minimum, the offender shall receive: (115.33 (a)) 1. Information regarding the agencies reporting procedures. 2. Information related to 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, of local, State, or national victim advocacy or rape crisis organizations.

- 3. The facility shall inform offenders, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. The facility shall enable reasonable confidential communication between offenders and these organization. (115.53 (a) (b) (c))
- 4. The offender shall sign an acknowledgement of receiving the PREA training and PREA related materials. This documentation shall be placed in the offender's record. (115.33 (e))

- 5. For people detained solely for civil immigration purposes, the person will receive contact information for immigrant service agencies. The facility shall enable reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible. (115.53 (a))
- 6. Within thirty (30) days of intake, offenders shall receive comprehensive education regarding their rights to be free from sexual abuse, sexual harassment and retaliation for reporting such incidents and regarding OCR policies and procedures for responding to such incidents. Offenders should sign an acknowledgement of receiving training. If the acknowledgement is electronically signed, it shall be printed and placed in the offender's record. (115.33 (b))
- 7. It is mandatory that offenders attend PREA training. Offenders refusing, without good cause, shall be disciplined. The Facility PREA Compliance Manager or designee can make accommodations for offenders who have been previously sexually abused or who may have other good cause to find the training too difficult in a group setting.
- B. When a new offender is received from another OCR facility, staff shall check the offender's Institutional Record for documentation that he or she has previously completed all PREA training. The offender shall be provided a handbook, if needed, and will be given PREA training to the extent that the procedures of the offender's new facility differ from those of the previous facility. If documentation is not found or if they leave custody and return, they shall be provided the required PREA training. (115.33 (c))
- K. Facilities shall take reasonable steps to ensure all offenders with disabilities and those who are limited English proficient have meaningful access and equal opportunity to participate in or benefit from all aspects of the DCR's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility shall use the contracted translation services to facilitate communication with the offender. (115.16 (a) (b))
- L. Written materials will either be delivered in alternative formats that accommodate the offender's disability or the information will be delivered through alternative methods, that ensure effective communication with offenders with disabilities, including those with intellectual disabilities, limited reading skills, or no or low vision. Reading the information to the offender or communicating through an interpreter, will ensure that they understand the PREA related material. In addition to providing such education, the facility shall ensure that key information is continuously and readily available to offenders through posters, or other written formats. (115.16 (a)) (115.33 (e) (f))

Comments:

Although policy states that inmates receive PREA education within (72) hours of arrival at the facility, interviews with inmates showed that information was shared upon arrival at the facility. This was confirmed during the review of inmate files.

Each housing unit contains a kiosk for utilization by inmates for e-mail, grievances, commissary, etc. In order for each individual to have access to the system, they must first watch the PREA video on the Kiosk. Some inmates watch the video in its entirety, however, those inmates who have seen the video previously tend to turn it on and let the video run.

An inmate who identified as being deaf, had the ability to read the information provided to him. Another inmate said the information was read to him. See beginning of report for follow-up.

Many posters throughout the facility had been torn down by inmates. The most visible and undamaged were in the intake area. Posters were every few feet within the area.

Suggestion: Determine a method to ensure that posters and notifications are not destroyed. Perhaps Plexiglas (although this is often times scratched), or an alternative format. (Example: on the kiosk every time it is opened.)

115.34 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

Interviewing Sexual Assault Victims Curriculum

Miranda, Garrity, PREA, and Such Curriculum

PREA Report Writing Curriculum

NIC's PREA - Your Role in Responding to Sexual Abuse - Certificates

Verification of Training of Investigators/Records

Interviews with Investigative Staff

The number of investigators the agency currently employs: 23

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

F. In addition to the general training provided to all employees pursuant to § 115 .31, the DCR shall ensure that, to the extent the DCR itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings. Corrections Investigations Division (CID) investigative staff shall receive additional specialized training on conducting sexual abuse investigations in confinement settings. Documentation will be filed in the employee training folder and a copy will be sent to the Office of PREA Compliance. (115.34 (a) (b) (c)) (115.71 (b))

This specialized training will include but is not limited to:

- 1. Interviewing sexual abuse victims,
- 2. Proper use of Miranda warnings and the Garrity rule,
- 3. Sexual abuse evidence collection in confinement settings,
- 4. The criteria and evidence required to substantiate a case for administrative action or prosecutorial referral.

Interviewing Sexual Assault Victims Curriculum

Course Objective: Learn techniques for interviewing sexual assault/abuse in a confinement center.

Miranda, Garrity, PREA, and Such Curriculum

- "The Reason We Are Here Today:
- PREA Standards require that agency investigators conducting sexual abuse investigations
 have received comprehensive and up-to-date training in conducting such investigations in
 confinement settings.
- · Specialized training for agency investigators must include:
- 1. Techniques for interviewing sexual abuse victims,
- 2. Sexual abuse evidence collection in confinement settings,
- 3. Proper use of Miranda and Garrity type warnings, and
- 4. The criteria and evidence required to substantiate a case for administrative action or prosecution referral.

PREA Report Writing Curriculum

Objectives:

- Understand what a final investigative report should contain.
- Understand techniques for writing the final report to ensure accuracy and clarity.

NIC's PREA – Your Role in Responding to Sexual Abuse Certificates
Twenty-three (23) certificates were entered into the OAS. This list matches the number of investigators within the department.

Comments:

The Interviewing Sexual Assault Victims, PREA Report Writing and Miranda, Garrity, PREA and More curriculums are more detailed than what is noted above.

Documentation of training completion was provided to the auditor and well as confirmation through the investigator interviews.

115.35 Specialized training: Medical and mental health care Auditor Overall Determination: Meets Standard Auditor Discussion

Materials Reviewed

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) 2019 In-Service Schedule, Infection Control, & Staff Safety Topics / Medical 2020 In-Service Schedule, Infection Control, & Staff Safety Topics / Medical NIC Training Certificates for "PREA: Medical Health Care for Sexual Assault Victims in a Confinement

Setting"

Interviews with Medical and Mental Health Staff

Training logs of Medical and Mental Health Staff

The number of all medical and mental health care practitioners who work regularly at this facility who received the training: 51

The percent of all medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy: 100%

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)
G. In addition to the general training provided by the facility during Orientation, all full- and part-time medical and mental health staff shall receive additional specialized training regarding victims of sexual abuse and sexual harassment. This training will be coordinated and completed by a qualified source. All medical staff must receive this training during orientation, but no later than one (1) month of the effective date of hire. Contracted medical staff employed by the DCR will not conduct forensic examinations (115.35 (a) (b) (c) (d))
This specialized training will include, but is not limited to:

- 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 victims of sexual abuse and sexual harassment:
- 4. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

2019 and 2020 In-Service Schedule, Infection Control, & Staff Safety Topics / Medical These documents provide the in-service training schedule for medical and mental health personnel. May's in-service topic was PREA: An Introduction & Overview - PREA: Reporting Obligations & Retaliation Protections.

NIC Training Certificates for "PREA: Medical Health Care for Sexual Assault Victims in a Confinement

Setting"

There were twenty-six (26) certificates for completion of this NIC training provided in OAS.

Comments:

The Department contracts for Medical Care through Prime Care Medical, Inc.

The Medical Contract requires staff to complete NIC training. In addition, medical and mental health staff complete the Department's required training. Documentation was provided.

Interviews with the Psychologist and the Medical Department Supervisor showed that staff are well aware of the required knowledge base of PREA. There is a strong belief in helping those who have been assaulted.

Forensic examinations are not completed by the facility medical staff.

115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

PREA Screening Instrument - Initial and Reassessment

Interviews with Inmates

Interviews with Staff Responsible for Risk Screening

Interview with Compliance Manager

Offender File Review

Site Review

In the past 12 months:

The number of inmates entering the facility (either through intake or transfer) whose length of stay in the facility was for 72 hours or more who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility: 2505

In the past 12 months:

The number of inmates entering the facility (either through intake or transfer) who were reassessed for their risk of sexual victimization or being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received through intake: 1550

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

- V. Screening for Risk of Sexual Victimization and Abusiveness
- A. All offenders shall be assessed individually and in a private setting during intake screening and upon transfer to another facility for their risk of being sexually abused by other offenders or sexually abusive toward other offenders prior to housing in general population.
- B. The screening will occur:
- 1. Within 72 hours of intake,
- 2. Upon transfer to a new facility,
- 3. After an incident of sexual abuse,
- 4. Or when warranted due to a referral, request, or receipt of additional information that bears on the offender's risk of sexual victimization or abusiveness.
- C. This shall be accomplished by using an objective PREA Screening Instrument to gather the following information: (115.41 (a) (b) (c) (d) (e) (g))
- 1. Known or perceived gender nonconforming appearance or identifies as lesbian, gay, bisexual, transgender or intersex (LGBTI) and whether the offender may therefore be vulnerable to sexual abuse:
- 2. Whether the offender has a mental, physical, or developmental disability;
- 3. Offender's age and physical build
- 4. Current charge, offense history and whether the offender has been previously incarcerated for convictions for sex offenses against an adult or child or a history of acts of sexual abuse;

- 5. Whether the offender's criminal history is exclusively non-violent;
- 6. Whether the offender has previously experienced sexual victimization;
- 7. The offender's own perceptions of her or his vulnerability
- 8. Any specific information about individual offenders that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other offenders.
- 9. Whether the offender is detained solely for civil immigration purposes
- I 0. Level of emotional and cognitive development (for Juvenile's Only)
- D. The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the OCR, in assessing offenders for risk of being sexually abusive.
- E. This information shall be ascertained through:
- 1. Conversations with the offenders during the intake process
- 2. Medical and mental health screenings;
- 3. During classification assessments;
- 4. By reviewing court records, case files, facility behavioral records, and other relevant documentation from the offender's files.
- F. Facility staff and contractors involved in the assessment process will not disseminate responses to the screening questions or other sensitive information which may be exploited to the offender's detriment by staff or other offenders. Offenders determined to be at risk for sexual victimization if assigned to general population will be identified. This information will be documented in the offender's file, and in the appropriate database. Offenders may not be disciplined for refusing to answer or for not disclosing complete information. If an offender refuses to disclose the information requested, housing placement should be based on a review of the offender's records.
- G. The Superintendent shall designate specific staff to complete PREA reassessments. PREA reassessment shall be completed within a set time period, not exceed 30 days from the offender's arrival at the facility. The facility will reassess the offender's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening. (115.41 (f) (i) (h))
- H. The PREA screening assessment information shall be used to make decisions regarding, housing, bed, work, education, and program assignments. The goal of the OCR is to keep offenders that are at high risk for being sexually victimized from those at high risk of being sexually abusive. The facility shall make individualized determinations about how to ensure the safety of each offender; (115.42 (a) (b)) (115.68)
- I. If the PREA screening indicates that an offender has experienced prior sexual victimization or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the offender is offered a follow-up meeting with the facility mental health practitioner within 14 days of the intake screening. (115.81 (a) (b) (c)) (115.83 (h)
- J. The OCR shall not consider Lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator of likelihood of being sexually abusive. The facility shall consider the offender's health and safety when determining placement. In deciding whether to assign a transgender or intersex offender to a facility for male or female offenders, and in making other housing and programming assignments, the OCR shall consider on a case-by-case basis whether a placement would ensure the offender's health and safety, and whether the placement would present management or security problems. (115.42 (c) (d))
- K. All staff, volunteers, and contractors will communicate with, treat, and talk about any offender who is LGBTI, or perceived to be LGBTI, in a professional and respectful manner.

Placement and programming assignments for each transgender or intersex offender shall be reassessed twice a year. Staff will take into consideration the facility population, staffing patterns, physical layouts and legal requirements. LGBTI offenders will not be placed in dedicated facilities or units solely based on such identification or status. A transgender or intersex offender's own views with respect to his or her own safety shall be given serious consideration. Transgender and intersex offenders shall be given the opportunity to shower separately from other offenders. (115.42 (d) (e) (f) (g))

L. Offenders with a high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and there is no available alternative means of separation from likely abusers. If the facility cannot conduct the assessment immediately, the facility may hold the offender in involuntary segregated housing no longer than 24 hours while completing the assessment. (115.43 (a)), (115.68)

M. If an involuntary segregation housing assignment is made, the facility PREA Compliance Manager shall clearly document the following: (115.43 (d))

- 1. The basis for the staff member's concern for the offender's safety;
- 2. The other alternative means of separation that were explored; and
- 3. The reason why no alternative means of separation can be arranged.
- N. Offender's placed in involuntary segregation for protection from sexual victimization shall have access to programs, privileges and education. Work opportunities shall be afforded to the offender to the extent possible. If limited, the facility must document the reasoning for limiting these opportunities and the duration of the limitation. If no immediate alternatives are identified, the facility may assign offenders to involuntary segregation until an alternative means of separation from likely abusers can be arranged. Such assignment shall not ordinarily exceed 30 days, if an extension of involuntary segregation beyond 30 days is necessary, the facility shall clearly document the basis for concern of the offender's safety and why no other alternative means of separation can be arranged. Any extension beyond 30 days must be approved by the facility Superintendent within 72 hours of being implemented. Any assignment to involuntary segregation must be reported to the Facility PCM within 24 hours. Every 30 days, the facility shall afford each such offender a review to determine whether there is a continuing need for separation from the general population. (115.43 (b) (c) (d) (e))

Comments:

The PREA Screening Instrument (Initial and Reassessment) contains all required information. Also policy addresses that an inmate may not be disciplined for refusing to disclose.

The inmate risk assessment and reassessment received an extensive review. A few files were found to have had the reassessment completed on the same day as the assessment. The medical department did not provide information regarding the inmates, medical, mental health, or disability, so the assessments/reassessments were not adequately addressed. An example of another problem was under "Potential Victim". If three or more areas were endorsed, the offender was not necessarily identified as a P.V.. The same for "Potential Predator".

It should be noted that the current PCM has been in this position approximately one (1) month. He was happy to learn of the expectations as the has no background in PREA, other than as a Sergeant.

Note: The Assessments and Reassessments had problems. The assessment is completed in booking and the PCM does the reassessment.

- There is no information available from medical/psych to accurately complete those areas in the assessment on medical/mental health/disabilities. This needs to be corrected.
- Some Reassessments are being completed on the same day as the initial assessment.
 Needs to be corrected.
- While completing the document, the areas of hearing impaired, LEP are not being addressed as part of vulnerability. This needs to be corrected and notated on the form.
- Some assessments/reassessments are inaccurate because they are not utilizing the scoring to reflect whether the inmate is a potential victim or aggressor at the bottom of the form. This needs to be reviewed and addressed.
- If there is an incident related to PREA, there is not a reassessment completed.

See the beginning of the report to see additional work completed since on-site. This item remains as part of the Corrective Action Plan.

Corrective Action Plan Update:

In late Febrary the auditor reviewed approximately 158 assessments and reassessments and found 37 that had items either left out or not finished. Not count in that number were those that did not have the age filled in or if the reassessments were not completed in a timely fashion before the audit. The following items were shown to have been addressed: Shower Curtains, Unannounced Rounds, Bed Assignment Board, Advocacy / Special Needs - continues to be addressed, and Booking Privacy Screen.

In late July, early August, the auditor again reviewed a large number of assessments and reassessments and found the following: The reassessments ranged from being one day late to twenty-four days late, with most being under eight days late. These calculations indicate that the reassessments are being completed timely appropriately 42% of the time. In eliminating the reassessments that were five or less days late, by these calculations the reassessments are being completed timely appropriately 76% of the time.

The auditors in conjunction with the Office of PREA Compliance set a time frame for the next review of assessments and reassessments. On August 20, 2020, the Office of PREA Compliance was notified that three hundred two (302) individuals had their assessment and reassessment reviewed, showing only eighteen (18) that were late. Those eighteen (18) reassessments were late by only two (2), three (3) days with only one at eight (8) days. A tremendous improvement.

115.42 Use of screening information Auditor Overall Determination: Meets Standard **Auditor Discussion** Materials Reviewed Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Policy Directive # 411.00; Subject: Gender Nonconforming Inmates/Residents Interview with PREA Compliance Manager Interview with Staff Responsible for Risk Screening Documentation of Risk-Based Housing Decisions Interviews with Transgender/Gay/Bisexual/Lesbian Site Review Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) H. The PREA screening assessment information shall be used to make decisions regarding, housing, bed, work, education, and program assignments. The goal of the OCR is to keep offenders that are at high risk for being sexually victimized from those at high risk of being sexually abusive. The facility shall make individualized determinations about how to ensure the safety of each offender; (115.42 (a) (b)) (115.68) J. The OCR shall not consider Lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator of likelihood of being sexually abusive. The facility shall consider the offender's health and safety when determining placement. In deciding whether to assign a transgender or intersex offender to a facility for male or female offenders, and in making other housing and programming assignments, the OCR shall consider on a case-by-case basis whether a placement would ensure the offender's health and safety, and whether the placement would present management or security problems. (115.42 (c) (d))

Policy Directive # 411.00; Subject: Gender Nonconforming Inmates/Residents

- II. Facility and Housing Assignments of Transgender and Intersex
- A. Facility and housing assignments shall be made on a case-by case basis, considering the inmate/resident's health and safety as well as potential programming, management and security concerns. An inmate/resident's own views regarding safety shall be given careful consideration.
- B. Facility and housing assignments shall be reassessed at a minimum of every six months to review any threats to safety experienced by the inmate/resident.
- C. Placement may occur at any DCR Facility, in General Population, and in most cases a single cell is not necessary.
- D. Inmates/residents who have completed sexual reassignment surgery prior to incarceration shall be placed in a facility after the Superintendent/designee consults with the Transgender Committee.
- E. For the purposes of facility placement, self-inflicted genital mutilation does not constitute sexual reassignment surgery and does not qualify an inmate/resident for placement in a different facility.
- F. Transgender and Gender Dysphoria inmates/residents shall not be placed in Restrictive Housing based on their gender identity alone.

Comments:

Results of the assessment/reassessment is placed within the Department's OIS system. Staff who work in booking use this system to determine individual bed and unit placement. Those inmates who identify as transgender or intersex (none held at this time) are given an opportunity to share their own views as to there placement within the facility. The current transgender being held at this facility, noted that she is content with her current housing. She was able to tell the auditor which areas of the facility she felt the most safe and those areas she did not want to reside.

The new PCM (see prior information) is aware that each transgender or intersex inmate must be reassessed minimally twice per year to determine safety related and other issues.

Showers within the housing areas are single. This gives privacy for those inmates who identify as transgender or intersex.

There is no identified wing/pod/unit at this facility for those that identify as LGBTI.

115.43 **Protective Custody** Auditor Overall Determination: Meets Standard **Auditor Discussion** Materials Reviewed Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Interview of Inmate Housed in Segregated Housing (Non-PREA related) Interview of Staff who Supervise Inmates in Segregated Housing Interview of Superintendent Documentation of Housing Assignments of Inmates at High Risk for Victimization The number of inmates at risk of sexual victimization who were held in involuntary segregation housing in the past 12 months for one to 24 hours awaiting completion of assessment: 0 In the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement: 0 From a review of case files of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged: 0

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

L. Offenders with a high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and there is no available alternative means of separation from likely abusers. If the facility cannot conduct the assessment immediately, the facility may hold the offender in involuntary segregated housing no longer than 24 hours while completing the assessment. (115.43 (a)), (115.68)

Comments:

The facility states that no offenders have been placed in involuntary segregated housing in the last twelve (12) months. Interviews with the Superintendent and Supervisors confirmed the same. Therefore, no interviews occurred of those inmates held in involuntary segregation who were at risk of sexual victimization. One non-PREA inmate held in involuntary segregation was interviewed.

Policy includes those items listed in this standard.

The Superintendent shared that if they needed to place an individual in involuntary

segregation, they would ensure that all alternatives were reviewed and if necessary, move an individual to another facility.

115.51 Inmate reporting Auditor Overall Determination: Meets Standard **Auditor Discussion** Materials Reviewed Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) "No Means No" Brochure "End the Silence" Brochure Memorandum from Amanda McGrew, State PREA Coordinator Interviews of Staff Interviews of Inmates Interview of PREA Compliance Manager Site Review **PREA Posters** Inmate Handbook Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) VI. Reporting A. Offenders shall be provided multiple internal and external ways to privately report sexual misconduct, retaliation by other offenders or staff for reporting sexual abuse, sexual harassment, staff neglect or violation of responsibilities that may have contributed to such incidents. The OCR shall also provide at least one way for offenders to report abuse or harassment to a public or private entity or office that is not part of the OCR, and that is able to receive and immediately forward offender reports of sexual abuse and sexual harassment to OCR officials, allowing the offender to remain anonymous upon request. Offenders detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security. The DCR shall distribute publicly through the OCR website the e-mail, address and information on how to report sexual abuse and sexual harassment on behalf of the offender and the DCR policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigations (115.54), (115.22) (115.51 (a) (b)) B. All employees, contractors, volunteers and interns are mandatory reporters and shall accept verbal, written, anonymous and third-party allegations from offenders who observe, are involved in, or have any knowledge, information or suspicion of sexual abuse, harassment, or an inappropriate relationship. All reports shall be promptly documented and reported to the

- facility Superintendent and facility PCM. Staff may be subjected to disciplinary action if they do not report such conduct. Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse. (115.51 (c)), (115.54), (115.61)
- C. Staff can privately report information about sexual assault and sexual harassment by submitting a confidential report to the Superintendent, PREA Compliance Manager or the Office of PREA Compliance. (115.51 (d))
- D. An offender may also report abuse by using the OCR grievance process. These grievances will be forwarded to the Superintendent or designee for immediate action. There is no time limit on when an offender may submit a grievance regarding an allegation of sexual abuse. The OCR may apply otherwise-applicable time limits to any portion of a grievance that does

not allege an incident of sexual abuse. The OCR shall not require an offender to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident or offender lawsuit on the ground that the applicable statute of limitations has expired (115.52 (a) (b))

The agency shall ensure that:

- 1. An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and
- 2. Such grievance is not referred to a staff member who is the subject of the complaint.
- E. DCR shall issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. (115.52 (d))
- F. Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, are permitted to assist offenders in filing reports or grievances and requests for administrative remedies relating to allegations of sexual abuse. Third parties are also permitted to file such requests on behalf of offenders. CID will discuss the allegation with the alleged victim and proceed with an investigation if the allegation occurred in a correctional setting. (115.52 (e))(115.54)
- G. After receiving a PREA emergency grievance alleging an offender is subject to substantial risk of imminent sexual abuse, it must be forwarded to the Superintendent or designee for immediate action. An initial response will be provided within 48 hours and a final decision shall be within 5 calendar days. The initial response and final DCR decision shall document the DCR's determination whether the offender is in substantial risk of imminent sexual abuse and action taken in response to the emergency grievance. (115.52 (f))
- H. Offenders may be disciplined for filing a grievance related to alleged sexual abuse only where the DCR demonstrates that the offender filed the grievance in bad faith.
- I. The DCR shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse. The DCR shall maintain copies of agreements or documentation showing attempts to enter into such agreements. (115.53 (c))

III. Staff Training

- A. All employees, contractors, volunteers and interns will receive training regarding DCR's zero tolerance policy regarding sexual misconduct. This training should be conducted during orientation, but no later than thirty (30) days after date of hire.
- B. At a minimum, the training shall include the following information: (115.3 l(a))
- 1. Sexual contact with an offender is prohibited,
- 2. Offender's right to report if sexual contact occurs,
- 3. The zero-tolerance policy against sexual abuse and sexual harassment within the DCR,
- 4. How staff are to fulfill their responsibilities under the Division's sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures as defined in this policy,
- 5. Offenders' right to be free from sexual abuse and sexual harassment,
- 6. The right of offenders and employees to be free from retaliation for reporting sexual abuse and sexual harassment,
- 7. The dynamics of sexual abuse and sexual harassment in confinement,
- 8. The common reactions of sexual abuse and sexual harassment victims,
- 9. How to detect and respond to signs of threatened and actual sexual abuse,
- 10. How to avoid inappropriate relationships with offenders,

- 11. How to communicate effectively and professionally with offenders, including LGBTI or gender nonconforming offenders,
- 12. How to comply with relevant laws of West Virginia related to mandatory reporting of sexual abuse to outside authorities,
- 13. Sexual Misconduct in Confinement Facilities
- C. Each facility shall document through a Certificate of Understanding that staff, volunteers and contract employees have received and understand the training they have received. Documentation will be filed in the employee training folder and a copy will be sent to the Office of PREA Compliance. (115.31(d)) (115.32 (c))
- D. Staff training shall be appropriate to the gender of the offenders within the facility.(115.31 (b))
- E. The OCR shall provide employees with a yearly refresher to ensure that all employees know the DCR's current sexual harassment policies and procedures. Facilities shall ensure that volunteers and contractors who have contact with offenders have been trained on their responsibilities under the DCR's sexual abuse and sexual harassment prevention, detection and response policies and procedures. The level and type of training provided to volunteers and contractors shall be based on the services that they provide and level of contact they have with offenders, but all volunteers and contractors who have contact with offenders shall be notified on the DCR's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. (115.31 (c)), (115.32 (a) (b))

"No Means No" Brochure

This brochure addresses the following issues:

- · What Is Sexual Harassment?
- What Is Sexual Abuse?
- · What is staff voyeurism?
- Examples of Staff Voyeurism
- Tips for Avoiding Sexual Abuse and Sexual Harassment

West Virginia Division of Corrections and Rehabilitation does not tolerate any form of sexual abuse or sexual harassment. The goal of this facility is the safety of the inmates. The facility will hold accountable any persons found to have committed any form of sexual abuse or sexual harassment against another person.

If any of the information presented here is confusing, or you have questions about something that may be happening to you, ask a staff person you trust; or see your PREA Compliance Manager.

You also can contact the PREA Coordinator:

West Virginia Division of Corrections and Rehabilitation: PREA Department 1409 Greenbrier Street Charleston, WV 25301

"End the Silence" Brochure

This brochure includes:

- Right to Report
- How to Report
- External Reporting Option
- · If you are Abused

What to Do If You Have Been Sexually Abused

Additionally, it states Notice of Failure to Report

Anyone who engages in, fails to report, or knowingly condones sexual harassment or sexual abuse of an inmate shall be subject to disciplinary action and may be subject to criminal prosecution.

Memorandum from Amanda McGrew, State PREA Coordinator

To: All PREA Compliance Managers

Dated: April 3, 2017 Re: Anonymous Hotline

Please be advised that we have a verbal agreement with the WV Fusion Center to assist us with this. The WV Fusion Center has set up a recorded hotline where inmates can call in and report incidents confidentially. The Fusion Center reviews these calls daily and sends me the transcripts.

Comments:

As noted previously, the Director of PREA Compliance is in negotiation with the Advocacy Center for services.

The facility does not hold inmates 'solely' for civil immigration purposes.

There are multiple ways provided that allow for reporting PREA situations: via the kiosk (grievances, requests, emails), telephone hot lines, telling any staff/contractor/volunteer, contacting the PREA Coordinator, letter writing and third party. As noted previously, negotiations with an Advocacy Center has been on-going for the past year and one-half (1 ½) years. Inmates can still write to these agencies or have a third-party contact them.

While completing the walk-through of the facility the auditor completed two (2) of the methods listed above. She asked an inmate to show her how the kiosk worked, then how to make a PREA report. A report was completed by the auditor, with a request that the data be taken off this inmate's i.d. The auditor was given a copy of the email that was completed.

The auditor also utilized the 'hot-line' provided to the inmates, she was able to listen to the recording of this call, verifying that contact can be made with this method.

Note: Utilizing the methods available, reports can be anonymous or providing identification.

115.52 Exhaustion of administrative remedies Auditor Overall Determination: Meets Standard **Auditor Discussion** Materials Reviewed Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Inmate Handbook Interview with Inmates who Reported a Sexual Abuse Interview with Supervisors Logs of Grievances and findings The past 12 months: The number of grievances filed that alleged sexual abuse: 0 The number of grievances alleging sexual abuse that reached final decision within 90 days after being filed: 0 The number of grievances alleging sexual abuse filed by inmates in the past 12 months in inmate declined third-party assistance, containing documentation of the inmate's decision to decline: 0 The number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months: 0 The number of those grievances that had an initial response within 48 hours: 0 In the past 12 months, the number of inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith; The number of grievances alleging substantial risk of imminent sexual abuse filed in the past months that reached final decisions within 5 days: 0 Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) D. An offender may also report abuse by using the OCR grievance process. These grievances will be forwarded to the Superintendent or designee for immediate action. There is no time limit on when an offender may submit a grievance regarding an allegation of sexual abuse. The OCR may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. The OCR shall not require an offender to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. Nothing in this section shall restrict the DCR's ability to defend against an

The agency shall ensure that

(b))

offender lawsuit on the ground that the applicable statute of limitations has expired (115.52 (a)

- 1. An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and
- 2. Such grievance is not referred to a staff member who is the subject of the complaint.
- E. DCR shall issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. (115.52 (d))
- F. Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, are permitted to assist offenders in filing reports or grievances and requests for administrative remedies relating to allegations of sexual abuse. Third parties are also permitted to file such requests on behalf of offenders. CID will discuss the allegation with the alleged victim and proceed with an investigation if the allegation occurred in a correctional setting. (115.52 (e))(115.54)
- G. After receiving a PREA emergency grievance alleging an offender is subject to substantial risk of imminent sexual abuse, it must be forwarded to the Superintendent or designee for immediate action. An initial response will be provided within 48 hours and a final decision shall be within 5 calendar days. The initial response and final DCR decision shall document the DCR's determination whether the offender is in substantial risk of imminent sexual abuse and action taken in response to the emergency grievance. (115.52 (f))
- H. Offenders may be disciplined for filing a grievance related to alleged sexual abuse only where the DCR demonstrates that the offender filed the grievance in bad faith.

Comments:

Inmates may file a grievance (to include emergency) via the kiosk. There is no time limit on when an inmate may file a sexual abuse grievance nor attempt to resolve it in another manner. Policy contains those elements pertaining to this standard.

As noted above there have been no PREA related grievances filed within the last twelve (12) months within this facility.

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

West Virginia Rape Crisis Centers - List

Memorandum re: Inmate Access to Outside Confidential Support Services

Handbooks

Brochure - PREA

Poster

Interviews with Inmates

Interviews with Inmates who Reported Sexual Abuse

Interviews with Booking Officers

Site Review

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

I. The DCR shall maintain or attempt to enter into memoranda of understanding of other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse. The DCR shall maintain copies of agreements or documentation showing attempts to enter into such agreements. (115.53 (c))

3. The facility shall inform offenders, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. The facility shall enable reasonable confidential communication between offenders and these organization. (115.53 (a) (b) (c))

Memorandum re: Inmate Access to Outside Confidential Support Services

This memorandum is dated October 1, 2019 from Timothy Harper, Director of PREA

Compliance to Mable Wheeler, Department of Justice Certified Auditor. It states:

"The West Virginia Division of Corrections and Rehabilitation is committed to full compliance with the Prison Rape Elimination Act Standards. In an effort to do so, the Office of PREA

Compliance is in place to solely focus on PREA development and compliance.

We currently have victim advocates that are available for emotional support services as a result of agreements that were in place prior to the agencies consolidation. However, these services were not being offered uniformly across the prisons, jails and juvenile facilities. We are attempting to enter into one agreement with the West Virginia Foundation for Rape Information and Services (WVFRIS) to secure these essential services for all offenders in DCR custody. Recently we were awarded a grant and hope to use a portion of the funding to partner with Just Detention International to develop a protocol that provides offenders with confidential emotional support services related to sexual abuse."

Comments:

The West Virginia Rape Crisis Centers List provides the names, addresses, hotline and telephone numbers, as well as their websites. Also, on this is list is the National Sexual Violence Hotline Rape, Abuse, and Incest National Network (RAINN) who operates the National Sexual Assault Hotline. Call toll free: 1-800-656-HOPE.

Note: The above Memorandum re: Inmate Access to Outside Confidential Support Services. Although this contract is not in place there is a WV Rape Crisis Centers List (above paragraph) that is available to inmates upon request. Inmates are able to write these locations as well as calling a designated number (no cost) on their unit phone system.

| 115.54 | Third-party reporting |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Materials Reviewed: Website https://dcr.wv.gov/aboutus/Pages/prea.aspx |
| | Website Information Reporting Sexual Abuse: If you were the victim of sexual misconduct while in custody in West Virginia, or if you know of a person in custody in West Virginia who was a victim, you may report it to the WV Division of Corrections and Rehabilitation by using the following methods: • If you were, or are, in custody at a WV juvenile center or facility, please call 1-855-366-0015. • If you were, or are, in custody at a WV jail facility, you may call (304) 558-2036 and ask for the PREA Coordinator. You may also email dcrprea@wv.gov. • If you were, or are, in custody at a WV prison, you may call you may call (304) 558-2036 and ask for the PREA Coordinator. You may also email dcrprea@wv.gov. In the case of email communications, please include the following: • Incident that occurred • Who was the victim • Who is the suspect • Time and date of sexual abuse • If requested, your anonymity will be protected. |
| | Comments: Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates are permitted to assist offenders in filing reports or grievances and requests for administrative remedies relating to allegations of sexual abuse. Third parties are also permitted to file such requests on behalf of offenders. |

115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00: Subject: Prison Rape Elimination Act Compliance (PREA)

Interview with Superintendent Interview with PREA Manager Interviews with Staff

Interviews with Medical Staff

Interviews with Mental Health Staff

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) B. All employees, contractors, volunteers and interns are mandatory reporters and shall accept verbal, written, anonymous and third-party allegations from offenders who observe, are involved in, or have any knowledge, information or suspicion of sexual abuse, harassment, or an inappropriate relationship. All reports shall be promptly documented and reported to the facility Superintendent and facility PCM. Staff may be subjected to disciplinary action if they do not report such conduct. Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse. (115.51 (c)),(115.54), (115.61)

G. The DCR shall monitor the conduct and treatment of offenders or staff who reported the sexual abuse and of offenders who were reported to have suffered sexual abuse for at least 90 days following a report of sexual abuse, to see if there are changes that may suggest possible retaliation by offenders or staff, and shall act promptly to remedy any such retaliation. Items the DCR should monitor include any offender disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The OCR shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. Such monitoring shall include periodic status checks. The obligation to monitor for retaliation shall terminate if the allegation is unfounded. If any individual who cooperates with an investigation expresses a fear of retaliation, the DCR shall take appropriate measures to protect that individual against retaliation. The facility shall act promptly to remedy any such retaliation. Action taken to protect Staff or offenders shall be documented and reported to the Office of PREA Compliance within 24 hours of the reported incident. Any effort to hinder or impede a Staff or an offender from reporting an incident or retaliation shall result in disciplinary action. (115.67(a) (b) (c) (d) (e)(f)).

A. The facility PCM will report all allegations of sexual abuse, including anonymous allegations to the Office of PREA Compliance. Staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation or other security and management decisions. (115.61 (b) (e))

Comments:

All interviews indicated that notification of any incident is to be reported immediately. This would include any knowledge, suspicion or information pertaining to PREA. All reported that retaliation or neglect would be dealt harshly at this facility. Staff were well aware that sharing of information is prohibited.

Medical/Mental Health staff interviews related that prior to starting services to an inmate, they share their duty to report and limitations of confidentiality.

The facility houses no-one under the age of eighteen (18).

| 115.62 | Agency protection duties |
|--------|--|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Materials Reviewed Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Interview with Superintendent Interviews with Staff |
| | In the past 12 months, the number of times the agency or facility determined that an inmate was subject to substantial risk of imminent sexual abuse: 0 If the agency or facility made such determinations in the past 12 months, the average amount of time that passed before taking action: n/a The longest amount of time elapsed before taking action, if not immediate (please explain): n/a |
| | Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) B. When facility staff learns that an offender is subject a substantial risk of sexual abuse, the facility shall assess and implement appropriate protective measures and shall take immediate action to protect the offender without unreasonable delay. (115.62) |
| | Comments: Interviews with the Superintendent and with staff showed that staff knew the expectation of immediately removing an inmate from any location that did not provide substantial safety and reporting it to their supervisor. The supervisor would then determine an appropriate location for the inmate to be housed and the review of the risk issues. |

115.63 Reporting to other confinement facilities Auditor Overall Determination: Meets Standard **Auditor Discussion** Materials Reviewed: Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Interview with Superintendent **Documentations of Notifications** In the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility: 0 In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities: 0 Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) C. Within 72 hours of receiving an allegation that an offender was sexually abused while confined in another correctional facility, the Superintendent of the facility that received the allegation shall notify in writing the head of the facility or appropriate office of where the alleged abuse occurred and shall also notify the Office of PREA Compliance. The Superintendent can contact the other facility via phone before forwarding the report in writing. The facility shall document that it has provided such notification and ensure that the allegation is investigated in accordance with PREA standards. (115.63 (a) (b) (c) (d)) Comments: If an allegation were to be brought to the attention of the facility, the Facility would take immediate action and contact an investigator to begin the investigation. No notifications have been received in the last twelve (12) months. However, the auditor was provided documentation of one notice that occurred prior to the last twelve (12) months. Emails, documents, time frames and notes were appropriate.

115.64 Staff first responder duties Auditor Overall Determination: Meets Standard **Auditor Discussion** Materials Reviewed: Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) West Virginia Division of Corrections and Rehabilitation Coordinated Response plan Interviews with Contractor/Volunteer Interviews with Staff In the past 12 months, the number of allegations that an inmate was sexually abused: Of these allegations, the number of times the first security staff member to respond to the report separated the alleged victim and abuser: 6 In the past 12 months, the number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence: 6 Of these allegations the number of times the first security staff member to respond to the report: Preserved and protected any crime scene until appropriate steps could be taken to collect any evidence. Requested that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating. 6 Ensured 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. 6 Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder: 0 Of those allegations responded to first by a non-security staff member, the number of times that staff member requested that the alleged victim not take any actions that could destroy physical evidence: 0 Of those allegations responded to first by a non-security staff member, the number of times that staff member: 0 Requested that the alleged victim not take any actions that could destroy physical evidence. Notify security staff.

D. Upon learning of an allegation that an offender was sexually abused, the first staff member to respond to the incident 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 and abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. When responding to incidences of sexual abuse, all first responders are required to follow the DCR coordinated response plan. (115.64 (a) (b)) (115.65)

Comments:

West Virginia Division of Corrections and Rehabilitation Coordinated Response Plan is not a checkoff form but is a detailed flow chart containing items under each of the following headings:

- First Responder
- Shift Supervisor
- Facility Investigator
- · Emergency Examinations and Testing
- Medical and Mental Health
- Facility PREA Compliance Manager

All staff are trained the same. Non-Uniform Staff and Uniform Staff are all considered security.

When staff were interviewed and asked the question of what steps would they take if they were the first person who learned of a sexual assault, the answers were not sequential. All steps were there but not in the order necessary to ensure that all aspects are addressed.

Note: Review with staff, volunteers and contracted staff the order in which to address a report of sexual assault.

| 115.65 | Coordinated response |
|--------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Materials Reviewed: West Virginia Division of Corrections and Rehabilitation Coordinated Response Plan Institution Plan |
| | Interview of Superintendent Interview with Commissioner and Assistant Commissioner (June of 2019) |
| | Comments: As noted previously the West Virginia Division of Corrections and Rehabilitation Coordinated Response Plan is not a checkoff form but is a detailed flow chart containing items under each of the following headings: First Responder Shift Supervisor Facility Investigator Emergency Examinations and Testing Medical and Mental Health |

| 115.66 | Preservation of ability to protect inmates from contact with abusers |
|--------|--|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Materials Reviewed: |
| | Interview with Superintendent |
| | Comments: |
| | The Commissioner and Assistant Commissioner (Interviewed in June of 2019) and the |
| | Superintendent report that Collective Bargaining, as it is known in many states does not occur in the Corrections Field in West Virginia. Individuals may join CWA (union) that allows for |
| | grievances, but it does not allow bargaining for wage or working conditions. |
| | |

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Interview with Superintendent

Interview with PREA Compliance Manager Inmates who Reported a Sexual Abuse

The length of time that the agency/facility monitors the conduct or treatment: 90 days The number of times an incident of retaliation occurred in the past 12 months: 0

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) F. The DCR shall employ multiple protection measures, such as housing changes or transfers for offender victims or abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offenders or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. (115.67 (b)) G. The DCR shall monitor the conduct and treatment of offenders or staff who reported the sexual abuse and of offenders who were reported to have suffered sexual abuse for at least 90 days following a report of sexual abuse, to see if there are changes that may suggest possible retaliation by offenders or staff, and shall act promptly to remedy any such retaliation. Items the DCR should monitor include any offender disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The OCR shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. Such monitoring shall include periodic status checks. The obligation to monitor for retaliation shall terminate if the allegation is unfounded. If any individual who cooperates with an investigation expresses a fear of retaliation, the DCR shall take appropriate measures to protect that individual against retaliation. The facility shall act promptly to remedy any such retaliation. Action taken to protect Staff or offenders shall be documented and reported to the Office of PREA Compliance within 24 hours of the reported incident. Any effort to hinder or impede a Staff or an offender from reporting an incident or retaliation shall result in disciplinary action. (115.67(a) (b) (c) (d) (e)(f)).

Comments:

The PREA Compliance Manager is assigned to monitor retaliation.

Policy covers those elements listed in this standard. As there has been no retaliation reported within the past twelve (12) months, documentation has not occurred. Retaliation was discussed with the new PREA Compliance Manager. He is aware of the periodic monitoring of retaliation via discussion with inmates and staff that have reported sexual abuse and his role in addressing the situation.

115.68 Post-allegation protective custody Auditor Overall Determination: Meets Standard **Auditor Discussion** Materials Reviewed: Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Interview with Superintendent Interview with Staff who Supervises Inmates in Segregated Housing Inmate File Reviews 30-day Reviews On-Site Visit The number of Inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completions of assessment: 0 In the past 12 months, the number of inmates who allege to have suffered sexual abuse who assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement: 0 From a review of case files of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH: 0 (a) A statement of the basis for facility's concern for the inmate's safety (b) The reason or reasons why alternative means of separation could not be arranged. Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) L. Offenders with a high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and there is no available alternative means of separation from likely abusers. If the facility cannot conduct the assessment immediately, the facility may hold the offender in involuntary segregated housing no longer than 24 hours while completing the assessment. (115.43 (a)). (115.68)N. Offender's placed in involuntary segregation for protection from sexual victimization shall have access to programs, privileges and education. Work opportunities shall be afforded to the offender to the extent possible. If limited, the facility must document the reasoning for limiting these opportunities and the duration of the limitation. If no immediate alternatives are identified, the facility may assign offenders to involuntary segregation until an alternative means of separation from likely abusers can be arranged. Such assignment shall not

ordinarily exceed 30 days, if an extension of involuntary segregation beyond 30 days is

necessary, the facility shall clearly document the basis for concern of the offender's safety and

why no other alternative means of separation can be arranged. Any extension beyond 30 days must be approved by the facility Superintendent within 72 hours of being implemented. Any assignment to involuntary segregation must be reported to the Facility PCM within 24 hours. Every 30 days, the facility shall afford each such offender a review to determine whether there is a continuing need for separation from the general population. (115.43 (b) (c) (d) (e))

Comments:

As no inmate has been placed in involuntary segregation after an alleged sexual abuse, within the past twelve (12) months, there was no available documentation of reviews. Interviews indicated that placement in this location would only occur if there is no alternative means of separation and safety. If there are no alternatives located with the thirty (30) days, the facility would ensure that the alleged victim or perhaps the perpetrator would be transferred to another location.

115.71 Criminal and administrative agency investigations Auditor Overall Determination: Meets Standard **Auditor Discussion** Materials Reviewed: Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) DMAPS Policy CORR OPS 3 - DMAPS Investigations Unit Curriculum Interviews with Superintendent Interview with PREA Compliance Manager Interviews with Investigative Staff (2) Interviews with Inmates who Reported a Sexual Abuse Review of Investigative Files Record Retention The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit: 1 Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) G. Investigators shall: 1. Gather and/or preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data, 2. Interview alleged victims, suspected abusers, and witnesses, 3. Review prior complaints and reports of sexual abuse involving the suspected abuser, 4. Determine whether staff actions or failures to act contributed to the abuse and shall be documented in the reports. (115.71) H. The DCR shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. (115.72) (115.71 (c) (f)) D. The OCR shall retain all written reports for as long as the alleged abuser is incarcerated or employed by the OCR, plus five years. (115.71 (i)) DMAPS Policy CORR OPS 3 - DMAPS Investigations Unit This policy is confidential and is noted as being inclusive. Comments:

As noted previously, investigators work for DMPS. Investigators are officed within facilities around the state, but also are assigned investigations elsewhere.

The facility reports that they have not been updated as to the status of the investigation that was forwarded to the State Police.

It is also reported that "DCR never destroys investigation files".

Investigation files are detailed with dates, steps taken, available evidence, interviews, prior allegations or victimizations. Often times the State Police are involved in the investigation, but more often when the investigation is completed, the recommendation for criminal action is moved to the State Police for their action.

Policy addresses the time period for retaining records. Investigation files are maintained by the investigators.

The investigators report that if the alleged victim or aggressor is no longer at the facility, they will still complete the investigation.

Note: Investigation files do not include a completion date. The auditor suggests that this be added.

| 115.72 | Evidentiary standard for administrative investigations |
|--------|--|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Materials Reviewed: |
| | Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Interviews with Investigative Staff |
| | Review of Investigation Files |
| | Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) H. The DCR shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. (115.72) (115.71 (c) (f)) |
| | Comments: The investigators note that they gather all evidence, that provides for the determination of substantiation. |

115.73 Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

Inmate Notices of Determination of PREA Allegation

Interview with Superintendent

Interviews with Investigative Staff

Interviews with Inmates who Reported a Sexual Abuse

Review of Sexual Abuse Investigations

Review of Inmate Files (for documentation of notification of results)

In the past 12 months:

The number of criminal and/or administrative investigations of alleged inmate sexual abuse that

were completed by the agency/facility: 6

Of the alleged sexual abuse investigations that were completed, the number of inmates who were

notified verbally or in writing of the results of the investigation: 3

In the past 12 months:

The number of investigations of alleged inmate sexual abuse in the facility that were completed by

an outside agency: 0

Of the outside agency investigations of alleged sexual abuse, the number of inmates alleging sexual abuse in the facility who were notified verbally or in the writing of the results of the investigation: 0

In the past 12 months:

The number of notifications to inmates that were provided pursuant to this standard: 3 The number of those notifications that were documented: 3

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)
K. At the conclusion of the investigation, the investigator will prepare an investigative report that documents a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings and all documentary evidence when feasible. The investigative findings will indicate whether the evidence supports a finding that sexual abuse has occurred (substantiated), the allegation is false (unfounded), or the evidence is inconclusive (unsubstantiated). If the case has not already been referred for criminal prosecution, the Investigator will refer substantiated allegations of conduct that appears to be criminal for prosecution in the county where the assault occurred. If any State entity or Department of Justice component conducts investigations shall do so pursuant to the above requirements. (115.71 (h) (k)) (115.73 (b))

- L. Following an investigation into an offender's allegation that he or she suffered sexual abuse, the Facility PCM shall inform the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. If the facility did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the offender. Information given to the offender shall be documented. (115.73 (a) (b))
- M. Following a substantiated or unsubstantiated allegation that a staff member has committed sexual abuse against an offender, the facility shall subsequently inform the offender whenever: (115.73(c))
- 1. The staff member is no longer posted within the offender's unit,
- 2. The staff member is no longer employed at the facility,
- 3. The facility learns that the staff member has been indicted on a charge related to sexual abuse within the facility,
- 4. The facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. (115.73 (d))
- N. Following an offender's allegation that he or she has been sexually abused by another offender, the OCR shall subsequently inform the alleged victim whenever:
- 1. The OCR learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility,
- 2. The OCR learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.
- 0. All notifications or attempted notifications shall be documented and sent to the offenders current OCR placement or address on file. The facility's obligation to report under this policy shall terminate if the offender is released from the Division's custody. (115. 73 (e) (f))

Comments:

The facility reports WVDCR never receives a copy of a report completed by an Outside Entity (i.e. State Police). As noted previously, there is no response as to the one (1) criminal case referral from the investigators.

The facility reports that there have been no allegations against a staff member within the last twelve (12) months. If it were to have an allegation, they would follow policy for the notifications.

Reports of the findings of the investigation was found in the investigation files (notifications to inmates). These notifications are written by the Office of PREA Compliance and forwarded to the facility for distribution.

115.76 Disciplinary sanctions for staff Auditor Overall Determination: Meets Standard **Auditor Discussion** Materials Reviewed: Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Review of Investigated Staff In the past 12 months: The number of staff from the facility who have violated agency sexual abuse or sexual harassment policies: 1 The number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: 1 In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies: 0 In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies: 1 Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) IX. Staff Discipline A. The staff member shall be subject to disciplinary sanctions up to and including termination for violating DCR sexual abuse or sexual harassment policies, termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse. Disciplinary sanctions for violations of DCR policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of sexual abuse or harassment policies, or resignations by staff that would have been terminated if not for their resignation, will be documented and reported to law enforcement agencies, unless the act was clearly not criminal, and to any relevant licensing bodies. The departure of the alleged abuser or victim from the employment or control of the DCR shall not provide a basis for terminating an investigation. (115.76 (a) (b) (c) (d)) (115.71 ((i))B. Any contractor, volunteer, intern or any individual who conducts business with or uses the resources of the DCR, who engages in, fails to report, or knowingly condones sexual abuse or sexual harassment of an offender shall be subject to appropriate disciplinary action. Retaliatory action against any individual who reports or is involved in a sexual abuse or sexual

harassment investigation is strictly prohibited. Any contractor, volunteer, intern or any individual who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to law enforcement agencies and relevant licensing bodies. (115.77 ((a) (b)).

Comments:

One resignation was noted in this section. A copy of his resignation letter was provided. In addition, the auditor reviewed his investigation file. The determination was appropriately concluded as substantiated. Although this case would have been appropriate for termination, it did not rise to the level of criminal action.

There additionally was one investigation into an allegation against a staff member. This determination was also appropriate – unfounded.

115.77 Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Review of Investigated Staff

In the past 12 months:

The number of staff from the facility who have violated agency sexual abuse or sexual harassment

policies: 1

The number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: 1

In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies: 0 In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies: 1

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) IX. Staff Discipline

A. The staff member shall be subject to disciplinary sanctions up to and including termination for violating DCR sexual abuse or sexual harassment policies, termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse. Disciplinary sanctions for violations of DCR policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of sexual abuse or harassment policies, or resignations by staff that would have been terminated if not for their resignation, will be documented and reported to law enforcement agencies, unless the act was clearly not criminal, and to any relevant licensing bodies. The departure of the alleged abuser or victim from the employment or control of the DCR shall not provide a basis for terminating an investigation. (115.76 (a) (b) (c) (d)) (115.71 ((j))

B. Any contractor, volunteer, intern or any individual who conducts business with or uses the resources of the DCR, who engages in, fails to report, or knowingly condones sexual abuse or sexual harassment of an offender shall be subject to appropriate disciplinary action. Retaliatory action against any individual who reports or is involved in a sexual abuse or sexual harassment investigation is strictly prohibited. Any contractor, volunteer, intern or any individual who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to law enforcement agencies and relevant licensing bodies. (115.77 ((a) (b)).

Comments:

One resignation was noted in this section. A copy of his resignation letter was provided. In addition, the auditor reviewed his investigation file. The determination was appropriately concluded as substantiated. Although this case would have been appropriate for termination, it did not rise to the level of criminal action.

There additionally was one investigation into an allegation against a staff member. This determination was also appropriate – unfounded.

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

Interview with Superintendent Review of Investigative Reports Interviews with Medical Staff Interviews with Mental Health Staff

In the past 12 months:

The number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the

facility: 0

The number of criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred

the facility: 0

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

C. All sexual contact, whether voluntary or forced, between offenders is prohibited and subject to disciplinary action. Any mutual sexual contact between offenders is a rule violation but shall not constitute sexual abuse. Offenders shall be subject to disciplinary sanctions pursuant to an investigation that concluded that the offender engaged in offender-on-offender sexual abuse. Offender's may be charged with a facility rule violation even if they are also being charged within the court system. Sanctions shall be commensurate with the nature and circumstances of the abuse or harassment, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories. The disciplinary process shall consider whether an offender's mental disabilities or mental illness contributed to their behavior when determining what type of sanction, if any, should be imposed. The facility may discipline an offender for sexual contact with staff only upon a finding that the staff member did not consent to such contact. (115.78 (a)(b) (c) (e) (g)).

A. When an offender is found guilty of Misconduct related to sexual abuse and 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 require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. (115. 78 (d))

B. 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 (115.78 (f))

Comments:

Staff at the facility have access to a small handbook that lists all the behaviors and sanctions that could occur at the facility via a disciplinary process. There is a method in place to determine if mental, medical or other handicaps contributed to the behavior.

Inmates are aware that a good faith report found to be untrue will not rise to the level of disciplinary sanctions.

115.81 Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

Medical and MH informed consent form

Interview with Inmates

Interview with Staff Responsible for Risk Screening

On-Site Review

Medical and Mental Health File Review

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

In the past 12 months, the percent of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow up meeting with a mental health practitioner: Documentation will be available on site.

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

I. If the PREA screening indicates that an offender has experienced prior sexual victimization or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the offender is offered a follow-up meeting with the facility mental health practitioner within 14 days of the intake screening. (115.81 (a) (b) (c)) (115.83 (h)

A. Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical, and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education and program assignments, or as otherwise required by Federal, State or local law. Such practitioners shall be required to inform offenders at the initiation of services of their duty to report and the limitations of confidentiality. Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior victimization that did not occur in an institutional setting, unless the offender is under the age of 18. (115.61 (d) (I 15.8I(e) (d))

Comments:

During preparation for this audit, it was found that the facility was not keeping data on those inmates who reported prior sexual abuse, not occurring within a correctional setting.

The Mental Health Practitioner noted that she meets with inmates that has been sexually abused or have perpetrated sexual abuse within two (2) weeks or less after being notified. Mental Health Informed Consent is utilized and well as Medical Informed Consent by Medical Practitioners. Information is shared on a 'need-to-know' basis.

Note: There is no information available from medical/psych to accurately complete those areas in the assessment on medical/mental health/disabilities. This needs to be corrected.

See the beginning of this report. This item prohibits accurate completion of those items in the assessment/reassessment which remains part of the Corrective Action Plan.

Corrective Action Plan Update:

During the review of assessments and reassessments, if was noted that those reassessments that had contact with medical/mental health were documented.

115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

Medical - PREA Checklist

Interviews with Medical and Mental Health Staff

Interview with Inmates who Reported a Sexual Abuse

Interview with Staff/Volunteer/Contract

Medical and Mental Health Records

On-site visit

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) B. 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. All victims of sexual abuse shall be offered access to forensic medical examinations at the facility or an outside facility, such examinations shall be performed by a Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE's) where possible. The OCR shall document efforts to provide SAFE's or SANE's, if one is not available, the examination can be performed by other qualified medical practitioners. Treatment 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. (115.82 (a) (d)), (115.83 (g)), (115.21 (c)) C. The facility will use the list of local hospitals that employ a SANE (Sexual Assault Nurse Examiner), to determine the appropriate medical provider to transport to. Any refusal by the offender to undergo the forensic exam, must be documented. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. (115.21 (c)) (115.82 (b)

Comments:

All individuals interviewed share that moving the victim to medical was an immediate action. Medical staff at this facility are available at all times.

The facility does not provide forensic examinations. All recommendations of the SANE staff are completed at the facility. If an individual is not taken to the emergency room, the facility physician will provide services as appropriate.

There is no cost associated with PREA medical/mental health services.

115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

Medical - PREA Checklist

Interviews with Medical and Mental Health Staff

Interview with Inmates who Reported a Sexual Abuse

Interview with Staff/Volunteer/Contract

Medical and Mental Health Records

On-site visit

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) B. 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. All victims of sexual abuse shall be offered access to forensic medical examinations at the facility or an outside facility, such examinations shall be performed by a Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE's) where possible. The OCR shall document efforts to provide SAFE's or SANE's, if one is not available, the examination can be performed by other qualified medical practitioners. Treatment 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. (115.82 (a) (d)), (115.83 (g)), (115.21 (c)) C. The facility will use the list of local hospitals that employ a SANE (Sexual Assault Nurse Examiner), to determine the appropriate medical provider to transport to. Any refusal by the offender to undergo the forensic exam, must be documented. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate

Comments:

All individuals interviewed share that moving the victim to medical was an immediate action. Medical staff at this facility are available at all times.

The facility does not provide forensic examinations. All recommendations of the SANE staff are completed at the facility. If an individual is not taken to the emergency room, the facility physician will provide services as appropriate.

There is no cost associated with PREA medical/mental health services.

medical and mental health practitioners. (115.21 (c)) (115.82 (b)

115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed:

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA)

Sexual Abuse Incident Review Form

Interview with Superintendent

Interview with PREA Compliance Manager

Interview with Incident Review Team Members

Documentation of Sexual Abuse Incident Team Reviews

Investigation File Reviews

In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only

"unfounded" incidents: 5

In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a

sexual abuse incident review within 30 days, excluding only "unfounded" incidents: 4

Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) XII. Data Collection and Review

A. The Office of PREA Compliance, in collaboration with Facility PCM shall conduct a Sexual Abuse Incident Review within 30 days of the conclusion of every sexual abuse investigation where the allegation was substantiated, or unsubstantiated. The review team shall include upper-level facility staff, with input from line supervisors, investigators, and medical or mental health practitioners. No review shall be conducted if the allegation has been determined to be unfounded. (115.86 (a)(b)(c)).

- B. The review committee shall: (115.86 (d))
- 1. Consider whether the allegation or investigation indicates need to change policy or practice to better 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.

Comments:

The Auditor found while at the facility through documentation and interviews, that the Sexual Abuse Incident Review team has only met one time and that was in November of 2019. This

review was completed with only the Superintendent and the previous PREA Compliance Manager present. Documentation was minimal.

During the exit meeting, the auditors shared that the Team should have been completing a Review after every appropriate investigation, what was required within each review, recommendations and who should be present.

Note: It was reported that the first Incident Review Team was utilized in November of 2019. This should have been started years ago. Additionally, documentation of the review must be completed and follow the language within the policy. More than just the Superintendent and the PCM should be present. Again, those who are to be present are listed in the policy.

See the beginning of this report. This will be reviewed by the auditor as part of the Corrective Action Plan.

Corrective Action Plan Update:

Since the last review, the facility has had three (3) sexual abuse investigations; two (2) unfounded and one (1) unsubstantiated. All elements required were reviewed and documented.

115.87 **Data collection Auditor Overall Determination: Meets Standard Auditor Discussion** Materials Reviewed: Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Monthly Statistical Report Review aggregated data Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) E. The facility PCM shall be responsible for ensuring that accurate information is collected for every allegation of offender-on-offender sexual abuse and staff-onoffender sexual misconduct that occurs within their facility. Incident-based data reports shall be generated each month. The data collected shall include at a minimum. (115.87 (a)) 1. The total number of allegations, Investigation number and the disposition; 3. The OCR shall maintain, review, and collect data as needed from all available incidentbased documents, including reports, investigation files, and sexual abuse incident reviews; 4. The OCR also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its offenders. (115.87 (e)) 5. The incident-based data collected shall include, at a minimum, the data necessary to complete the Survey of Sexual Violence conducted by the Department of Justice. (115.87 (c)) Comments: The Office of PREA Compliance collects data provided by each facilities PREA Compliance Manager. This data is then gathered into one annual report, accessible on the Department's website.

| 115.88 | Data review for corrective action | | |
|--------|---|--|--|
| | Auditor Overall Determination: Meets Standard | | |
| | Auditor Discussion | | |
| | Materials Reviewed: | | |
| | Interview with PREA Compliance Manager | | |
| | Review of Annual Report | | |
| | https://dcr.wv.gov/aboutus/Pages/prea.aspx | | |
| | Comments: | | |
| | The annual report is comprehensive and provides data accumulated. The Office of PREA | | |
| | Compliance Director has been in this new department for one year. The office continues to | | |
| | improve its collection of data, working to ensure that standards are being met and that corrective action occurs. | | |

Data storage, publication, and destruction 115.89 Auditor Overall Determination: Meets Standard **Auditor Discussion** Materials Reviewed: Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) Interview with PREA Compliance Manager Website Historical Data View secured filed area - 10 years Policy Directive # 430.00; Subject: Prison Rape Elimination Act Compliance (PREA) G. All Sexual abuse data shall be securely retained for at least 10 years after the date of the initial collection (115.88 (a)) (115.89 (d)) (115.89 (a)) H. The Director of PREA Compliance shall submit an annual report of the incidentbased sexual abuse data, to include facility recommendations and corrective actions to the DCR Commissioner. The annual report shall include comparisons of the current year's data and corrective actions with those from prior years and will include an assessment of the DCR's progress in addressing sexual abuse. The annual report shall be approved by the DCR Commissioner and made readily available to the public annually through the OCR website. The OCR may redact personal identifiers or other 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. Upon request, the OCR shall provide all such data from the previous calendar year to the Department of Justice. (115.87 (b) (t)) (115.88 (b) (c) (d)) (115.89 (b) (c))

Comments:

Closed files are secured behind locked doors within the facility.

| 115.401 | Frequency and scope of audits |
|---------|--|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | The auditors were given complete access to all areas of the facility, provided any information requested and able to conduct private conversations/interviews with inmates, employees, volunteers and contractors. |

| 115.403 | Audit contents and findings |
|---------|--|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | The PREA reports are up-to-date on the West Virginia Department of Corrections and Rehabilitation website. |

| Appendix: Provision Findings | | |
|------------------------------|---|-------------|
| 115.11 (a) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
| | Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? | yes |
| | Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? | yes |
| 115.11 (b) | Zero tolerance of sexual abuse and sexual harassment; PREA | coordinator |
| | Has the agency employed or designated an agency-wide PREA Coordinator? | yes |
| | Is the PREA Coordinator position in the upper-level of the agency hierarchy? | yes |
| | Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities? | yes |
| 115.11 (c) | Zero tolerance of sexual abuse and sexual harassment; PREA | coordinator |
| | If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) | yes |
| | Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) | yes |
| 115.12 (a) | Contracting with other entities for the confinement of inmates | |
| | If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | yes |
| 115.12 (b) | Contracting with other entities for the confinement of inmates | |
| | Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | yes |
| 115.13 (a) | Supervision and monitoring | |
| | Does the facility have a documented staffing plan that provides for | yes |

| adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? | |
|---|-----|
| In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices? | yes |
| In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy? | yes |
| In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies? | yes |
| In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies? | yes |
| In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)? | yes |
| In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population? | yes |
| In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff? | yes |
| In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift? | yes |
| In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? | yes |
| In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? | yes |
| In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? | yes |

| 115.13 (b) | Supervision and monitoring | |
|------------|---|-----|
| | In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) | na |
| 115.13 (c) | Supervision and monitoring | |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? | yes |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? | yes |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? | yes |
| 115.13 (d) | Supervision and monitoring | |
| | Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? | yes |
| | Is this policy and practice implemented for night shifts as well as day shifts? | yes |
| | Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? | yes |
| 115.14 (a) | Youthful inmates | |
| | Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |

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

| 115.15 (d) | Limits to cross-gender viewing and searches | |
|------------|--|-----------|
| | Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? | yes |
| | Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? | yes |
| | Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? | yes |
| 115.15 (e) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? | yes |
| | If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? | yes |
| 115.15 (f) | Limits to cross-gender viewing and searches | |
| | Does the facility/agency train security staff in how to conduct cross- gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? | yes |
| | Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? | yes |
| 115.16 (a) | Inmates with disabilities and inmates who are limited English p | roficient |
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? | yes |
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual | yes |

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

| 115.16 (b) | Inmates with disabilities and inmates who are limited English proficient | |
|------------|---|-----|
| | Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? | yes |
| | Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? | yes |
| 115.16 (c) | Inmates with disabilities and inmates who are limited English proficient | |
| | Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? | yes |

| 115.17 (a) | Hiring and promotion decisions | |
|------------|---|-----|
| | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? | yes |
| | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? | yes |
| | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above? | yes |
| | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? | yes |
| | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? | yes |
| | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above? | yes |
| 115.17 (b) | Hiring and promotion decisions | |
| | Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? | yes |
| | Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates? | yes |

| 115.17 (c) | Hiring and promotion decisions | | |
|------------|--|-----|--|
| | Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check? | yes | |
| | Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? | yes | |
| 115.17 (d) | Hiring and promotion decisions | | |
| | Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? | yes | |
| 115.17 (e) | Hiring and promotion decisions | | |
| | Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? | yes | |
| 115.17 (f) | Hiring and promotion decisions | | |
| | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? | yes | |
| | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? | yes | |
| | Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? | yes | |
| 115.17 (g) | Hiring and promotion decisions | | |
| | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? | yes | |

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

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

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

| 115.22 (c) | Policies to ensure referrals of allegations for investigations | |
|------------|--|-----|
| | If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).) | yes |
| 115.31 (a) | Employee training | |
| | Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? | yes |
| | Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? | yes |
| | Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment | yes |
| | Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? | yes |
| | Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? | yes |
| | Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? | yes |
| | Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? | yes |
| | Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? | yes |
| | Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? | yes |
| , | Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? | yes |

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

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

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

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

| 115.35 (d) | Specialized training: Medical and mental health care | |
|------------|---|-----|
| | Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.) | yes |
| | Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.) | yes |
| 115.41 (a) | Screening for risk of victimization and abusiveness | |
| | Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? | yes |
| | Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? | yes |
| 115.41 (b) | Screening for risk of victimization and abusiveness | |
| | Do intake screenings ordinarily take place within 72 hours of arrival at the facility? | yes |
| 115.41 (c) | Screening for risk of victimization and abusiveness | |
| | Are all PREA screening assessments conducted using an objective screening instrument? | yes |

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

| 115.41 (e) | 5.41 (e) Screening for risk of victimization and abusiveness | |
|------------|---|-----|
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse? | yes |
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses? | yes |
| | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse? | yes |
| 115.41 (f) | Screening for risk of victimization and abusiveness | |
| | Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? | yes |
| 115.41 (g) | Screening for risk of victimization and abusiveness | |
| | Does the facility reassess an inmate's risk level when warranted due to a referral? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to a request? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? | yes |
| 115.41 (h) | Screening for risk of victimization and abusiveness | |
| | Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? | yes |
| 115.41 (i) | Screening for risk of victimization and abusiveness | |
| | Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? | yes |

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

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

| 115.43 (a) | 15.43 (a) Protective Custody | |
|------------|---|-----|
| | Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? | yes |
| | If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? | yes |
| 115.43 (b) | Protective Custody | |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? | yes |
| | If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |

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

| 115.51 (b) | Inmate reporting | |
|------------|--|-----|
| | Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? | yes |
| | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? | yes |
| | Does that private entity or office allow the inmate to remain anonymous upon request? | yes |
| | Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.) | na |
| 115.51 (c) | Inmate reporting | |
| | Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? | yes |
| | Does staff promptly document any verbal reports of sexual abuse and sexual harassment? | yes |
| 115.51 (d) | Inmate reporting | |
| | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? | yes |
| 115.52 (a) | Exhaustion of administrative remedies | |
| | Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. | yes |

| 115.52 (b) | Exhaustion of administrative remedies | |
|------------|---|-----|
| | Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) | yes |
| | Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| 115.52 (c) | Exhaustion of administrative remedies | |
| | Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) | yes |
| | Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) | yes |
| 115.52 (d) | Exhaustion of administrative remedies | |
| | Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) | yes |
| | If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) | yes |
| | At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) | yes |

| 115.52 (e) | Exhaustion of administrative remedies | |
|------------|--|-----|
| | Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| | Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) | yes |
| | If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.) | yes |

| Exhaustion of administrative remedies | |
|---|---|
| Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.). | yes |
| After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) | yes |
| After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.) | yes |
| Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) | yes |
| Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) | yes |
| Exhaustion of administrative remedies | |
| If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) | yes |
| | Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.). After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.) Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Exhaustion of administrative remedies If the agency disciplines an inmate for filling a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if |

| 115.53 (a) | Inmate access to outside confidential support services | |
|------------|---|-----|
| | Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? | yes |
| | Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.) | na |
| | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? | yes |
| 115.53 (b) | Inmate access to outside confidential support services | |
| | Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? | yes |
| 115.53 (c) | Inmate access to outside confidential support services | |
| | Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? | yes |
| | Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? | yes |
| 115.54 (a) | Third-party reporting | |
| | Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? | yes |
| | Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? | yes |
| | | |

| 115.61 (a) | Staff and agency reporting duties | |
|------------|--|-----|
| | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? | yes |
| | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? | yes |
| | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? | yes |
| 115.61 (b) | Staff and agency reporting duties | |
| | Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? | yes |
| 115.61 (c) | Staff and agency reporting duties | |
| | Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? | yes |
| | Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? | yes |
| 115.61 (d) | Staff and agency reporting duties | |
| | If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? | yes |
| 115.61 (e) | Staff and agency reporting duties | |
| | Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? | yes |

| 115.62 (a) | Agency protection duties | |
|------------|--|-----|
| | When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? | yes |
| 115.63 (a) | Reporting to other confinement facilities | |
| | Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? | yes |
| 115.63 (b) | Reporting to other confinement facilities | |
| | Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? | yes |
| 115.63 (c) | Reporting to other confinement facilities | |
| | Does the agency document that it has provided such notification? | yes |
| 115.63 (d) | Reporting to other confinement facilities | |
| | Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? | yes |

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

| 115.67 (a) | Agency protection against retaliation | |
|------------|---|-----|
| | Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? | yes |
| | Has the agency designated which staff members or departments are charged with monitoring retaliation? | yes |
| 115.67 (b) | Agency protection against retaliation | |
| | Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? | yes |

| 115.67 (c) Agency protection against retaliation | | |
|--|---|-----|
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? | yes |
| | Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? | yes |
| 115.67 (d) | Agency protection against retaliation | |
| | In the case of inmates, does such monitoring also include periodic status checks? | yes |

| 115.67 (e) | Agency protection against retaliation | | |
|------------|--|-----|--|
| | If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation? | yes | |
| 115.68 (a) | Post-allegation protective custody | | |
| | Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? | yes | |
| 115.71 (a) | Criminal and administrative agency investigations | | |
| | When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | yes | |
| | Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | yes | |
| 115.71 (b) | Criminal and administrative agency investigations | | |
| | Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? | yes | |
| 115.71 (c) | Criminal and administrative agency investigations | | |
| | Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? | yes | |
| | Do investigators interview alleged victims, suspected perpetrators, and witnesses? | yes | |
| | Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? | yes | |
| 115.71 (d) | Criminal and administrative agency investigations | | |
| | When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? | yes | |

| 115.71 (e) | Criminal and administrative agency investigations | |
|------------|--|-----|
| | Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? | yes |
| | Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? | yes |
| 115.71 (f) | Criminal and administrative agency investigations | |
| | Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? | yes |
| | Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? | yes |
| 115.71 (g) | Criminal and administrative agency investigations | |
| | Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? | yes |
| 115.71 (h) | Criminal and administrative agency investigations | |
| | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? | yes |
| 115.71 (i) | Criminal and administrative agency investigations | |
| | Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? | yes |
| 115.71 (j) | Criminal and administrative agency investigations | |
| | Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? | yes |
| 115.71 (I) | Criminal and administrative agency investigations | |
| | When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) | yes |

| 115.72 (a) | Evidentiary standard for administrative investigations | | |
|------------|--|-----|--|
| | Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? | yes | |
| 115.73 (a) | Reporting to inmates | | |
| | Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? | yes | |
| 115.73 (b) | Reporting to inmates | | |
| | If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) | yes | |
| 115.73 (c) | Reporting to inmates | | |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit? | yes | |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? | yes | |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has beer indicted on a charge related to sexual abuse in the facility? | yes | |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? | yes | |

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

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

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

| Medical and mental health screenings; history of sexual abuse | |
|---|--|
| Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? | yes |
| Access to emergency medical and mental health services | 4 |
| Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? | yes |
| Access to emergency medical and mental health services | |
| If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? | yes |
| Do security staff first responders immediately notify the appropriate medical and mental health practitioners? | yes |
| Access to emergency medical and mental health services | |
| Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? | yes |
| Access to emergency medical and mental health services | |
| Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? | yes |
| Ongoing medical and mental health care for sexual abuse victi abusers | ms and |
| Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? | yes |
| | Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? Access to emergency medical and mental health services Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? Access to emergency medical and mental health services If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Access to emergency medical and mental health services Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? Access to emergency medical and mental health services Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? Ongoing medical and mental health care for sexual abuse victia abusers Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual |

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

| Ongoing medical and mental health care for sexual abuse victims and abusers | |
|---|--|
| If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) | yes |
| Sexual abuse incident reviews | |
| Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? | yes |
| Sexual abuse incident reviews | |
| Does such review ordinarily occur within 30 days of the conclusion of the investigation? | yes |
| Sexual abuse incident reviews | |
| Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? | yes |
| | abusers If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) Sexual abuse incident reviews Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? Sexual abuse incident reviews Does such review ordinarily occur within 30 days of the conclusion of the investigation? Sexual abuse incident reviews Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health |

| 115.86 (d) | Sexual abuse incident reviews | |
|------------|---|-----|
| | Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? | yes |
| | Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? | yes |
| | Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? | yes |
| | Does the review team: Assess the adequacy of staffing levels in that area during different shifts? | yes |
| | Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? | yes |
| | Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? | yes |
| 115.86 (e) | Sexual abuse incident reviews | |
| | Does the facility implement the recommendations for improvement, or document its reasons for not doing so? | yes |
| 115.87 (a) | Data collection | |
| | Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? | yes |
| 115.87 (b) | Data collection | |
| | Does the agency aggregate the incident-based sexual abuse data at least annually? | yes |
| 115.87 (c) | Data collection | |
| | Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? | yes |

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

| 115.88 (d) | Data review for corrective action | |
|-------------|---|-----|
| | Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? | yes |
| 115.89 (a) | Data storage, publication, and destruction | |
| | Does the agency ensure that data collected pursuant to § 115.87 are securely retained? | yes |
| 115.89 (b) | Data storage, publication, and destruction | |
| | Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? | yes |
| 115.89 (c) | Data storage, publication, and destruction | |
| | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? | yes |
| 115.89 (d) | Data storage, publication, and destruction | |
| | Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? | yes |
| 115.401 (a) | Frequency and scope of audits | |
| | During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.) | yes |

| 115.401 (b) | Frequency and scope of audits | |
|-------------|---|-----|
| | Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.) | no |
| | If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.) | na |
| | If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.) | yes |
| 115.401 (h) | Frequency and scope of audits | |
| | Did the auditor have access to, and the ability to observe, all areas of the audited facility? | yes |
| 115.401 (i) | Frequency and scope of audits | |
| | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? | yes |
| 115.401 (m) | Frequency and scope of audits | |
| | Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? | yes |
| 115.401 (n) | Frequency and scope of audits | |
| | Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? | yes |
| 115.403 (f) | Audit contents and findings | |
| | The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.) | yes |