

# PREA Facility Audit Report: Final

**Name of Facility:** Meherrin River Regional Jail Complex

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 08/14/2020

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Paul Perry	<b>Date of Signature:</b> 08/14/2020

AUDITOR INFORMATION	
<b>Auditor name:</b>	Perry, Paul
<b>Email:</b>	paul.perry@carolinedf.org
<b>Start Date of On-Site Audit:</b>	07/20/2020
<b>End Date of On-Site Audit:</b>	07/22/2020

FACILITY INFORMATION	
<b>Facility name:</b>	Meherrin River Regional Jail Complex
<b>Facility physical address:</b>	9000 Boydton Plank Road, Alberta , Virginia - 23821
<b>Facility Phone</b>	
<b>Facility mailing address:</b>	

<b>Primary Contact</b>	
<b>Name:</b>	Brent Wright
<b>Email Address:</b>	bwright@mrrj.org
<b>Telephone Number:</b>	434-949-6705

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Crystal Willett
<b>Email Address:</b>	cwillett@mrrj.org
<b>Telephone Number:</b>	434-949-6701

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	David Lett
<b>Email Address:</b>	dlett@mrrj.org
<b>Telephone Number:</b>	O: (434) 949-6700 ext.
<b>Name:</b>	Brent Wright
<b>Email Address:</b>	bwright@mrrj.org
<b>Telephone Number:</b>	O: (434) 949-6700x211

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Ramesha Walker
<b>Email Address:</b>	rwalker@medikopc.com
<b>Telephone Number:</b>	434-949-6700 x356

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	672
<b>Current population of facility:</b>	341
<b>Average daily population for the past 12 months:</b>	405
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Both females and males
<b>Age range of population:</b>	18-78
<b>Facility security levels/inmate custody levels:</b>	Minimum, Medium, Maxi
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	133
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	43
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	8

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	Meherrin River Regional Jail Authority
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	PO Box 10 , Alberta , Virginia - 23821
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

Agency Chief Executive Officer Information:	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	John Lucy	<b>Email Address:</b>	jlucy@mrrj.org

## 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.

The Meherrin River Regional Jail contracted with PREA Auditors of America, 14506 Lakeside View Way, Cypress, TX 77429 for Prison Rape Elimination Act audit services of both Meherrin River Regional Jail facilities. The Auditor has been certified by the United States Department of Justice to conduct PREA audits of adult facilities. The purpose of this audit was to determine the Meherrin River Regional Jail's level of compliance with standards required by the Prison Rape Elimination Act of 2003. This is the third Prison Rape Elimination Act audit of both Meherrin River Regional Jail's, Alberta and Mecklenburg facilities. Both facilities were last audited in September 2017.

The Auditor sent a notice by email to the agency's PREA Coordinator on June 8, 2020. The notice contained information and an address, informing inmates how to confidentially contact the Auditor prior to arriving on site. The notice was emailed in an English and Spanish version. The notice informed the inmate population their communications to the Auditor's address would be treated as confidential correspondence by facility staff. The notice required an agency representative's name and date upon posting the notice in areas throughout both facilities. The PREA Coordinator emailed the Auditor on June 9, 2020 to inform all notices had been posted. While touring both facilities the Auditor observed all notices were posted on June 9, 2020 in all inmate living units by the PREA Coordinator. Notices were posted in various other areas where inmates frequent. The Auditor received no correspondence from an inmate prior to arriving at the facility.

The Auditor received the MRRJ completed Pre-Audit Questionnaire through the Online Audit System (AOS). The Pre-Audit Questionnaire was completed and submitted to the AOS on July 6, 2020. The Auditor began a review of the submitted materials after receipt. The information sent by the agency's PREA Coordinator included; but was not limited to: policies, procedures, annual reports, organizational chart, forms, training materials, educational materials, staffing plan, population reports, contractor and volunteer records, Memorandums of Understanding, investigative records, medical documentation, inmate records, contracts and Inmate Handbook.

Once a contract between the PREA Auditors of America and the Meherrin River Regional Jail was signed and the Pre-Audit Questionnaire was completed, the Auditor began communications with the MRRJ PREA Coordinator through email. Prior to arriving on site, the Auditor asked questions and specifically requested additional information. The MRRJ PREA Coordinator responded quickly to communications from the Auditor. The Auditor maintained communications with the PREA Coordinator prior to arrival and after completing the on-site portion of the audit.

The Auditor observed the facility has a Memorandum of Understanding with The James House for crisis intervention services for inmate victims of sexual abuse. The Auditor requested the contact information of The James House and was provided the information by the MRRJ PREA Compliance Manager while on site. The Auditor conducted a telephone interview with a victim advocate from The James House. Details of the telephone interview are included in the applicable sections of this report.

The Auditor discovered the MRRJ has attempted to enter a Memorandum of Understanding with the Virginia Commonwealth University Medical Center for forensic examinations. The facility has been unsuccessful in receiving a signed copy of the Memorandum of Understanding. The Auditor attempted to conduct a telephone interview with a SANE from the VCU Medical Center. The Auditor was unsuccessful. Facility medical personnel direct the Shift Commander to transport inmate victims to the VCU Medical Center following a sexual abuse that occurs in a time limit that allows for the collection of evidence.

The Auditor conducted a review of the Meherrin River Regional Jail website ([www.mrrj.org](http://www.mrrj.org)). The website includes a link to access the agency's published Prison Rape Elimination Act information. The website includes information regarding the agency's zero-tolerance and investigation practices, annual reports, and previous PREA audit reports. The public can access the agency's Coordinated Response Plan and is provided information how to submit a third-party allegation.

The Auditor arrived at the Meherrin River Regional Jail's main facility on July 20, 2020. The Auditor discussed the audit process with both facility PREA Compliance Managers. The facility had made operational adjustments in an effort to reduce the risk of COVID-19 exposure. The auditor chose not to meet with command staff as is typical on the first day of the audit. The Auditor was directed to wear a face covering at all times in both facilities. Both agency PREA Compliance Managers and the Shift Commander escorted the Auditor on a complete tour of the main facility on the first day of the audit. The Auditor conducted a tour of the satellite facility (Mecklenburg) on the second day of the audit. The Mecklenburg facility's PREA Compliance Manager accompanied the Auditor on a tour of the satellite facility. The Auditor chose not to informally interview staff or inmates at either facility to mitigate the risk of COVID-19. The Auditor met with the agency's PREA Coordinator each day while on site.

The Auditor was allowed full access to all areas in the Meherrin River Regional Jail's main and satellite facilities. Both tours included visits to all inmate housing units, administrative areas, intake, property, control center, visitation, recreation areas, medical, laundry, library, and food service. While touring both facilities the Auditor observed for blind spots, opposite gender announcements, overall supervision level, staff interactions with the population and camera placements throughout each facility. The Auditor observed posted PREA materials while touring each facility.

During facility tours, the Auditor observed staff making security rounds, staff interacting with the inmate population, medical practitioners conducting pill call, commissary distribution, meal deliveries, inmates working in food service and laundry, and male and female staff making opposite gender announcements before entering opposite gender housing units. The Auditor observed all inmate restrooms and showers to ensure inmates could utilize the restroom and take a shower without staff of the opposite gender seeing the inmate fully naked.

The Auditor conducted a review of supportive documentation provided by the PREA Coordinator. Supportive documentation included; policies, procedures, staffing plan, handbooks, educational video, training records, employee, contractor and volunteer records, medical records, inmate records, investigative files, logbooks, and other relevant documents. The Auditor reviewed supportive documentation to determine the agency's level of compliance in prevention, detection, and response to sexual abuse and sexual harassment, training and education, risk screening, reporting, investigations, inmate discipline, medical and mental health care, and data collection, review and reporting practices.

The Auditor requested additional supportive records from each PREA Compliance Manager. The Auditor requested 15 randomly chosen and 15 specifically targeted inmate medical and classification records, all staff, contractor and volunteer training records, and 10 randomly chosen HR records. The Auditor

requested to formally interview the same 30 inmates. While on site, the Auditor visited with day and night shifts. Formal interviews were conducted with randomly and specifically chosen inmates. Due to current operational adjustments, the Auditor conducted formal interviews with inmates through the attorney visitation booths. The facility provided the Auditor an attorney visitation booth to ensure the interviews were not recorded or monitored. The Auditor conducted 30 formal interviews with inmates. Inmates specifically chosen for interviews included 5 who reported sexual victimization, 1 who identified as transgender, 2 who identified as gay/lesbian, 2 who were Limited English Proficient, 2 with a physical disability and 3 who reported an incident of sexual abuse/harassment at the facility. During interviews with randomly selected inmates the Auditor discovered 4 additional inmates who had been previously victimized, one who was identified with a mental disability and one who identified as bisexual and did not report the identification to the facility. There were no inmates housed at the facility who were blind or deaf at the time of the audit. The Auditor selected a relevant sample of inmates from various housing units at each facility.

Formal interviews were conducted with MRRJ staff. The Auditor conducted random formal interviews with 11 staff members and specialized interviews with 18 staff members. Specialized interviews were conducted with HR, Risk Screening, Intermediate/Higher Level, Intake, Investigator, Incident Review Team Member, Retaliation Monitors, First Responders, segregation staff, Mental and Medical Practitioners, Contractors and a victim advocate. All formal interviews were conducted in a private room.

The Auditor concluded the onsite portion of the audit on July 22, 2020. The Auditor met with the PREA Coordinator and each PREA Compliance Manager. The Auditor informed each of immediate findings after touring the facility, interviewing staff, interviewing inmates and reviewing documentation. Each was informed the Auditor still had more documentation to review after leaving the facility. The Auditor stated any recommendations and findings would be documented in the Auditor's report. It was explained that recommendations made by the Auditor were recommendations only. The Auditor informed recommendations did not need to be implemented but would strengthen the facility's compliance with the applicable standard. The Auditor informed the PREA Coordinator he would remain in contact and may need more documentation after leaving the facility. The Auditor thanked the group for their hospitality and professionalism with the Auditor while on site.

## 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.

The Meherrin River Regional Jail is operated by the Meherrin River Regional Jail Authority. The Meherrin River Regional Jail Authority includes the following jurisdictions: Brunswick, Dinwiddie and Mecklenburg Counties. The Meherrin River Regional Jail operates two facilities. The main facility is located in Brunswick County and the satellite facility is located in Mecklenburg County. The facilities are approximately a 35 minutes drive from one another. Both facilities are in the south central portion of Virginia just north of the Virginia/North Carolina border. The facility houses both male and female adult inmates. The facility houses State, local and Federal inmates. The designed capacity of the main facility is 697 while the satellite facility is 80 inmates.

The main facility (Alberta) has 17 housing units. There are 6 open bay, 3 single cell and 8 multiple occupancy housing units. The housing units are designated with an alphabetical designation, with the exception of the classification and work release housing units. The Alberta facility's open bay units are known as WR-1, WR-2, A, B, C and D. Each open bay unit has beds adjacent to a dayroom. Each dayroom has toilets protected with a half wall and showers that are protected with a shower curtain. Inmates can take a shower and use the restroom without staff of the opposite gender seeing them fully naked. The housing units have tables, chairs, televisions, microwaves and telephones. Inmates have access to an adjacent recreation yard and visitation area. The dayrooms in each open bay style unit and recreation yards are monitored by cameras. The cameras do not view into the shower or restroom areas. The Auditor observed PREA materials posted in each dayroom.

The main facility's multiple occupancy units are similar in style with a variance in numbers of cells in the units. The units are known as E, F, H, I, J, K, L and M. The facility's I unit has 12 - 6 person cells. Unit F has 12 double bunked cells while units E, K, L and M have 24 double bunked cells. Housing units H and J have 48 double bunked cells. There are several cells that are monitored by camera. The Auditor viewed the cameras and observed the cameras face away from the toilet area. Each cell in the multiple occupancy units has a toilet and sink inside. The units are two tiered and have tables, chairs, telephones, televisions and microwaves for inmate usage. Inmates have access to visitation from the units. Each dayroom is monitored by camera. There are recreation yards accessible to the inmates that are monitored by cameras. The Auditor observed PREA materials posted in each living unit dayroom.

The facility's 3 single cell housing units are known as N, G and classification. G unit has 4 single cells and is utilized to house female inmates. Each cell has a toilet, sink and shower inside. There are cameras that monitor the hallway and the recreation yard accessible to the female inmate. Inmates have access to a telephone in the hallway outside the cells. Two of the 4 cells have cameras inside. The Auditor observed the cameras do not view the toilet and shower inside the cells. The facility has posted PREA materials in the hallway outside of the cells.

N unit is divided into 3 distinct areas. N 1-8 is utilized to house inmates on protective custody status. N 9-15 houses inmates on administrative segregations status and N 16-30 house inmates placed on disciplinary status. Each cell has a toilet, sink and shower inside the cell. Several cells have cameras inside the cell. The Auditor observed the camera does not view the toilet and shower in the cells.

Inmates have access to a recreation yard that is monitored by cameras. Inmates have access to telephones in the hallway and the Auditor observed PREA materials posted on the hallway walls. There are cameras that monitor the hallway areas.

The classification unit has 5 single cells and is utilized to house inmates until they complete the classification process. Inmates are placed in the unit no longer than 72 hours. Each single cell has a toilet and sink inside. Inmates have access to a shower adjacent to the dayroom. Showers are protected with a shower curtain. There are cameras that monitor activity in the housing unit. Staff are required to conduct 3 security rounds within each hour. The Auditor observed PREA materials posted in the unit.

The Mecklenburg facility is primarily used for inmates assigned to work release and has a single cell unit, open bay style units and multiple occupancy style units. The facility has 5 open bay style housing units. Two are 4 bed units, 2 are 10 bed units and one is a 20 bed unit. Each open bay style unit has a television, seating, tables, telephones and kiosks. Inmates have access to a recreation area that is monitored by cameras and a visitation area monitored by cameras. Each unit has cameras that monitor inmate activity in the dayroom. No cameras view into the restroom or shower area. Restrooms are protected from view with a 3/4 wall while showers have curtains for protection. The Auditor observed PREA materials posted in each housing unit.

The facility has 3 multiple occupancy style housing units. One unit has 8 double bunked cells, one has 12 double bunked cells and the third has 3 - 4 person cells. Each is two tiers in height and similar in design. Each cell has a toilet and sink inside. Inmates can use the restroom without staff of the opposite gender seeing them fully naked. Each multiple occupancy housing unit has showers adjacent to the dayroom that are protected with a shower curtain. Inmates have access to television, chairs, tables, telephones and kiosks. Each housing unit has access to a recreation yard and visitation area. Cameras monitor each dayroom, recreation yard and visitation area. The Auditor observed PREA materials posted in each dayroom.

The Mecklenburg facility's segregation area has 4 single cells. Each cell has a toilet, sink and shower inside. Inmates can use the restroom and shower without staff of the opposite gender seeing the inmate fully naked. Cameras monitor the hallway outside of the cells. Inmates have access to a recreation yard that is monitored by cameras. The Auditor observed PREA materials posted outside the cells. Two of the four cells in the segregation area are monitored by camera. The Auditor observed the cameras do not view the toilet or shower areas.

The Alberta facility's intake area has 12 cells. There are two single cells utilized for female inmates. Those cells are out of sight from the other cells in the intake area. Both cells have cameras inside. The cameras do not view the toilet in the cells. There is one multiple occupancy and 9 additional single cells in the intake area. Each cell has a toilet and sink inside. Inmates can utilize the toilet without staff seeing them fully naked. The intake area has showers with doors. Access is controlled by the Intake Officer. The intake area has offices, 4 Video Tele Conference Rooms, Magistrate's area, medical office and a search room. There are telephones available and PREA materials posted in the intake area. Inmates are brought into the facility through a vehicular sallyport. All general areas in the intake and sallyport are monitored by cameras.

The Mecklenburg facility's intake area has 7 single cells. Each cell has a toilet and sink inside. Inmates can use the restroom without staff of the opposite gender seeing the inmate fully naked. Inmates have access to a shower that provides a level of privacy for the inmate. There is a sallyport area where inmates arrive. The sallyport area is monitored by cameras. The intake area has a Magistrate's room and a Video Tele Conference room. Cameras monitor the general intake area. The facility's property

room is adjacent to the intake area. The Auditor observed PREA materials posted in the area.

In 2018 the agency did not renew its contract with the food service contractor and now provides its own food service. The kitchen area in the Alberta facility is large and open with all areas visible. There are walk-in refrigerators, freezers and storage areas. Each has a sign on the door informing staff to not allow more than one inmate inside unless under direct staff supervision. The food service area employs 7 food service employees. There are 5 inmates who work in the kitchen on each shift. Cameras monitor the food service area. Inmates have access to a restroom with a locking door. Staff control access to the restroom.

The kitchen area in the Mecklenburg facility is a small rectangular shaped area that provides visibility throughout. One staff member supervises inmates working in the kitchen. The food service staff employ 2 inmates in the kitchen. Food is prepared and delivered to inmates in their housing units. The kitchen area is monitored by cameras. There is 1 walk-in refrigerator and 1 walk-in freezer. Inmates are not allowed in either without constant staff supervision. The dry storage room in the kitchen is monitored by a camera. Inmates have access to a restroom that is protected with a locking door. Staff control access to the restroom.

The agency contracts its medical and mental health services with Mediko, Inc. Mediko provides physicians, dentists, mental health practitioners and nursing staff for the agency. Medical services are provided on a 24/7 basis at the Alberta facility and Monday through Friday business hours at the Mecklenburg facility. The medical and mental health services provided for the agency are comprehensive. The medical area at the Alberta facility has 4 medical cells. One is a multiple occupancy cell with 3 beds and the other 3 cells are single occupancy. Two of the single cells have negative pressure in the event an inmate has a communicable disease. There is a pharmacy, 3 examination/treatment rooms, mental health room, biohazard room, dental lab with 1 chair and various other rooms in the medical area. One security staff member is present at all times while inmates are in the medical area. There are cameras in the general medical area. Inmates have access to showers and a toilet that is protected from staff seeing the inmate fully naked. The Auditor observed PREA materials posted in the medical area.

The medical area at the Mecklenburg facility has an examination/treatment room, waiting area, pharmacy, refuse, linen and other rooms and offices. There are 2 medical holding cells. One is a single cell and one is a 4 bed multiple occupancy cell. Inmates have access to a shower and restroom that are protected from staff seeing the inmate fully naked. Both cells have cameras inside that do not view into the toilet area. The general medical area is monitored by cameras. The Auditor observed posted PREA materials in the medical area.

Each facility has a visitation, commissary, warehouse, maintenance, library/law library and classrooms. Maintenance services are performed by MRRJ staff. Commissary services are contracted with the Keefe Group. Each facility offers video visitation and non-contact visitation. The agency offers programming and education to inmates. All programming and education have been suspended in an effort to mitigate COVID-19. Access within, to and from the facility are controlled by each facility's main control center. Staff in each main control center monitor all facility cameras. Both facilities have a laundry room. The design in each laundry room is rectangular and allows visibility throughout. Only 1 inmate works in the laundry room that is monitored by cameras.

Supervision in each facility is done remotely and directly. Staff in each facility are required to conduct a minimum of 2 security rounds each hour. Multiple occupancy housing units are viewed through a "control bubble." One staff member is assigned to the "control bubble" while another conducts security rounds

throughout the connected housing units.

On the first day of the audit there were 367 inmates incarcerated at the Meherrin River Regional Jail. The Alberta facility housed 365 while there were 2 inmates at the Mecklenburg facility. Both inmates at the Mecklenburg facility were males. The Alberta facility housed 315 males and 50 females. The youngest age of the inmate population was 18 while the oldest was 78.

## 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.

<b>Number of standards exceeded:</b>	0
<b>Number of standards met:</b>	45
<b>Number of standards not met:</b>	0

The Auditor reviewed both agency previous PREA audit reports prior to arriving at the Meherrin River Regional Jail. The previous audits determined the agency complied with PREA standards at both facilities and required no corrective actions were necessary. The Auditor observed recommendations made to the facility following the previous audit. During this audit, the Auditor determined the facility implemented practices to accommodate recommendations made during the previous PREA audit.

The Auditor determined the Meherrin River Regional Jail has developed appropriate policies and procedures that aid in prevention, detection and response to acts of sexual abuse and sexual harassment. The Auditor found the agency's staff are following the agency's policies and procedures related to sexual abuse and sexual harassment. The MRRJ training materials include elements from the agency's policies, procedures and PREA standards. The Auditor found inmates feel safe in the Meherrin River Regional Jail facilities. The MRRJ maintains multiple housing units to ensure likely abusers can be separated from those identified at risk of sexual victimization. The agency has the ability to transfer an inmate to another agency facility in the event the facility cannot safely maintain a high risk inmate from a likely abuser. Interviews with security staff, non-security staff and contract personnel revealed all have been trained and understand their responsibilities in response to acts of sexual abuse and sexual harassment.

The Auditor conducted a detailed tour of both Meherrin River Regional Jail facilities and observed staff and contractors interacting professionally with the inmate population. A review of files and other documents revealed facility personnel are documenting actions in accordance with the MRRJ policies and procedures related to sexual abuse and sexual harassment. Formal interviews with inmates reveal they are confident in staff's abilities to respond to and protect them from acts of sexual abuse and sexual harassment. Formal interviews with staff revealed they are knowledgeable in the policies and procedures to prevent, detect and respond to incidents of sexual abuse and sexual harassment. The Auditor determined the Meherrin River Regional Jail has successfully created a zero-tolerance culture in both the Alberta and Mecklenburg facilities. Interviews with MRRJ command staff reveal they are supportive of PREA standards and staff's input and efforts to prevent, detect and respond to sexual abuse and sexual harassment.

The Auditor found the agency's command staff make unannounced rounds throughout all facility areas to deter sexual abuse and sexual harassment. The MRRJ command staff have an open-door policy.

Command staff have a proactive approach towards compliance with the Prison Rape Elimination Act standards. Command staff welcome input from other staff to ensure inmates are protected from acts of sexual abuse and sexual harassment.

The Auditor determined the inmate population had been appropriately educated by facility staff. The inmate population understood the agency's prevention, detection and response efforts towards acts of sexual abuse and sexual harassment. Inmates understood how to report acts of sexual abuse and sexual harassment through the various reporting avenues made available by the agency. The inmate population overwhelmingly informed the Auditor they felt comfortable to report such directly to a staff member. The Auditor found the facility provides each inmate information and an education upon arrival at both Meherrin River Regional Jail facilities. Both facilities provide readily available information to inmates in the form of posters, postings and through the Inmate Handbook. The inmate population informed the Auditor they feel safe in the Meherrin River Regional Jail.

The Meherrin River Regional Jail staff are appropriately screening each inmate during the booking process to determine each inmate's level of risk for abusiveness or victimization. The risk screening allows the agency's classification officers to quickly identify such inmates to ensure they are protected from likely abusers through housing, programs, education and work opportunities. Each agency facility is conducting a reassessments of inmates' risk level within 30 days of arrival, after an incident of sexual abuse, referral and/or upon receiving additional information that bears on the inmate's level of risk.

The agency's investigator is conducting appropriate sexual abuse and sexual harassment investigations. Through an interview with the investigator, the Auditor determined the investigator refers criminal acts of sexual abuse to the local Sheriff's Office for criminal investigation. The Investigator refers to the Brunswick County Sheriff's Office for the Alberta facility and the Mecklenburg Sheriff's Office for the Mecklenburg facility. Investigations conducted at the facility appear objective and are conducted promptly and thoroughly. The agency Investigator informs inmates of investigative determinations at the conclusion of each investigation. Each substantiated and unsubstantiated allegation is followed with an incident review within 30 days of the conclusion of the investigation.

The Auditor determined each agency facility meets the requirement of each PREA standard. The Auditor made several recommendations to the agency in an effort to strengthen its level of compliance. Details of recommendations made are included in the applicable section of this report. The Auditor required the agency review its Memorandum of Understanding for inmate reporting of sexual abuse. The details of the memorandum and the updates made by the agency are included in the applicable standard. The Auditor determined the agency has appropriate policies, procedures and practices for prevention planning, response planning, training and education, screening for risk of victimization and abusiveness, reporting, response following a report, investigations, discipline, medical and mental health care, and data collection and review of sexual abuse and sexual harassment incidents.

## 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	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<p data-bbox="248 168 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 536 365"><b>Auditor Discussion:</b></p> <p data-bbox="248 405 1425 566">The Meherrin River Regional Jail has established a policy that prohibits all forms of sexual abuse, staff sexual misconduct and sexual harassment. The VBSO policy includes its prevention, detection, reporting and response strategies. The Prison Rape Elimination Act policy includes definitions of the following:</p> <ul data-bbox="300 633 1259 792" style="list-style-type: none"> <li>• Sexual abuse of an inmate by another inmate;</li> <li>• Sexual abuse of an inmate by a staff member, contractor, or volunteer;</li> <li>• Voyeurism; and</li> <li>• Sexual harassment.</li> </ul> <p data-bbox="248 831 1398 866">The MRRJ includes the following prevention, detection and response efforts in its policy:</p> <p data-bbox="248 904 403 940"><b>Prevention</b></p> <ul data-bbox="300 1008 1307 1384" style="list-style-type: none"> <li>• Architectural design facilitates continuous personal contact;</li> <li>• Indirect/direct supervision 24/7;</li> <li>• Slotted windows in doors for observation;</li> <li>• Sufficient lighting to see during evening hours;</li> <li>• Shower curtains that are clear at the bottom;</li> <li>• Electrical and plumbing chases only accessible by maintenance personnel;</li> <li>• Inmates receive information to avoid sexual assault;</li> <li>• all inmates are screened for victimization at intake; and</li> <li>• All staff are trained on the PREA standards in their roles.</li> </ul> <p data-bbox="248 1422 387 1458"><b>Detection</b></p> <ul data-bbox="300 1525 1465 1901" style="list-style-type: none"> <li>• Round the clock supervision with twice per hour minimum randomly conducted rounds;</li> <li>• Supervisors conduct unannounced security rounds;</li> <li>• Staff is prohibited from alerting other staff of supervisory rounds;</li> <li>• Security officers retain authority over inmates;</li> <li>• Perceived aggressive acts are reported and documented;</li> <li>• Staff are not permitted to leave their post;</li> <li>• Inmates are encouraged to report any knowledge or suspicion of sexual abuse or harassment; and</li> <li>• Third parties may report sexual misconduct.</li> </ul> <p data-bbox="248 1939 395 1975"><b>Response</b></p> <ul data-bbox="300 2042 1477 2157" style="list-style-type: none"> <li>• Facility provides multiple internal ways for reporting;</li> <li>• Facility provides at least one way to report abuse to an outside public entity or office not affiliated;</li> </ul>

- Staff must accept reports made verbally, in writing, anonymously and from third parties;
- The Superintendent notifies other agencies when receiving a report of sexual abuse;
- The facility protects staff and inmates who report sexual abuse;
- All allegations are investigated promptly, thoroughly and objectively;
- Inmates are notified of investigative results;
- Incident reviews are conducted at the conclusion of investigations; and
- Disciplinary action is taken against staff and inmates for sexual abuse incidents.

The MRRJ Authority operates two facilities. The agency has designated an agency-wide PREA Coordinator and PREA Compliance Manager at each facility. Each staff member is employed at a level to ensure the agency complies with the PREA standards. The PREA Coordinator serves as the Deputy Superintendent and reports directly to the Superintendent. The PREA Compliance Manager at the main facility serves as the Captain of Security and reports directly to the PREA Compliance Manager. The PREA Compliance Manager at the satellite facility serves as the Operations Support Sergeant and reports to the facility's Lieutenant. The PREA Coordinator has sufficient time and authority to develop, implement and oversee the Meherrin River Regional Jail's compliance efforts.

The agency's policy stipulates the PREA Coordinator is employed at an upper-level position with sufficient time and authority to develop, implement, and oversee the jail efforts to comply with PREA standards. The PREA Coordinator is tasked with auditing, collecting and maintaining information on each instance of alleged inmate-on-inmate sexual acts or abusive sexual contact, and each instance of staff-on-inmate sexual misconduct or sexual harassment.

**Evidence Relied Upon:**

Policy - Prison Rape Elimination Act, pg. 1 - 43

Organizational Chart - Alberta

Organizational Chart - Mecklenburg

Interviews with Staff

**Analysis/Reasoning:**

The Auditor conducted a review of the Meherrin River Regional Jail's Prison Rape Elimination Act policy. The Auditor observed the policy includes the agency's prevention, detection and response approaches towards sexual abuse and sexual harassment of inmates. The policy includes sanctions for those found to have violated the agency's sexual abuse and sexual harassment policies and procedures.

The Auditor reviewed the agency's organizational chart. The MRRJ has an Organizational Chart for each facility that outlines the position of the PREA Coordinator and PREA Compliance Managers. The PREA Coordinator serves as the facility's Deputy Superintendent. The Alberta facility's PREA Compliance Manager is the facility's Captain of Security. The Captain of Security reports directly to the Deputy Superintendent (PREA Coordinator). The Mecklenburg facility's PREA Compliance Manager is the facility's Operations Support Sergeant. The Operations Support Sergeant reports directly to the Lieutenant. The Mecklenburg PREA Compliance Manager reports directly to the PREA Coordinator on PREA

related issues, concerns, suggestions, etc.

The Auditor discussed the ability to develop, implement and oversee agency PREA efforts with the PREA Coordinator. The Auditor determined the PREA Coordinator has sufficient time and authority to oversee agency efforts to ensure compliance for both facilities. The PREA Coordinator responded quickly to the Auditor's questions and requests prior to, during and after the auditor conducted the site visit. The PREA Coordinator is knowledgeable regarding the requirements of the Prison Rape Elimination Act.

The Auditor conducted formal interviews with inmates. Interviews with inmates reveal they are confident in staff's ability to respond to allegations of sexual abuse and sexual harassment. Inmates were able to articulate information to the Auditor based on the agency's education efforts. Inmates stated staff respond to allegations quickly and appropriately. Each inmate was asked if he/she felt safe in the facility. Inmates informed the Auditor they feel safe in the facility. Inmates stated they trust staff to handle allegations seriously and confidentially. Most informed the Auditor they would report an allegation directly to a staff member if they were sexually abused or sexually harassed. The Auditor discovered two inmates who would not report an allegation directly to a staff member. One inmate stated "I am not putting something like that in writing" the other has not been at the facility long enough to have developed a trust with staff.

The Auditor conducted formal interviews with randomly selected staff. The Auditor determined the facility's staff were well educated and had retained the knowledge provided through MRRJ training. Each staff member understood the agency's policies and procedures for preventing, detecting and responding to sexual abuse and sexual harassment. Each staff member has been recently trained and informed the Auditor they receive training annually and receive information periodically throughout the year. Staff stated they review PREA information a couple times each year.

The agency's command staff supports subordinate staff efforts and ideas towards compliance with the Prison Rape Elimination Act. The command staff maintain an "open door" policy. Staff interviewed by the Auditor felt confident they could discuss any issue with the command staff. The facility's command staff conduct tours throughout the facility.

**Conclusion:**

The Auditor conducted a thorough review of the agency's policies, procedures, organizational charts and conducted interviews with staff and inmates. The Auditor determined the Meherrin River Regional Jail has developed an appropriate zero-tolerance policy that includes its prevention, detection and response approaches towards allegations of sexual abuse and sexual harassment. The agency has designated an appropriate staff member to develop, implement and oversee agency efforts. The Meherrin River Regional Jail has successfully created a zero-tolerance culture. The Auditor determined the MRRJ meets the requirements of this standard.

115.12	<p><b>Contracting with other entities for the confinement of inmates</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Auditor Discussion:</b></p> <p>The agency has a policy that requires any contract for the confinement of inmates include the contracting agency's obligation to adopt and comply with the requirements of the Prison Rape Elimination Act. The policy requires contracts require the agency to monitor the contractor's compliance with the Prison Rape Elimination Act standards.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 11-12</p> <p>Interviews with Staff</p> <p><b>Analysis/Reasoning:</b></p> <p>At the time of the audit the Meherrin River Regional Jail had not entered into a contract for the confinement of MRRJ inmates with another governmental or private agency.</p> <p>The Auditor conducted formal interviews with MRRJ staff. No staff member was aware of a contract with any agency for the confinement of MRRJ inmates.</p> <p><b>Conclusion:</b></p> <p>The Auditor reviewed the agency's Prison Rape Elimination Act policy and interviewed agency staff. The agency has an appropriate policy to ensure new contracts include provisions to comply with this standard. The Auditor determined the Meherrin River Regional Jail meets the requirements of this standard.</p>
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115.13	<b>Supervision and monitoring</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <hr/> <p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail has a policy that requires the agency develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides adequate levels of staffing and where applicable, video monitoring to protect inmates against sexual abuse. The agency's policy requires the following considerations when determining staffing levels and video monitoring needs:</p> <ul style="list-style-type: none"> <li>● Generally accepted detention and correctional practices;</li> <li>● Any judicial findings of inadequacy;</li> <li>● Any findings of inadequacy from Federal investigative agencies;</li> <li>● Any findings of inadequacy from internal or external oversight bodies;</li> <li>● All components of the facility's physical plant (including "bind-spots" or areas where staff or inmates may be isolated);</li> <li>● The composition of the inmate population;</li> <li>● The number and placement of supervisory staff;</li> <li>● Institutional programs occurring on a particular shift;</li> <li>● Any applicable State or local laws, regulations or standards;</li> <li>● The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and</li> <li>● Any other relevant factors.</li> </ul> <p>The Prison Rape Elimination Act policy requires the Superintendent document with justification in circumstances in which the staffing plan is not complied with. The policy requires an annual review by the Superintendent, in conjunction with the PREA Coordinator, to assess, determine, and document whether adjustments are needed to:</p> <ul style="list-style-type: none"> <li>● The staffing plan;</li> <li>● The facility's deployment of video monitoring systems and other monitoring technologies; and</li> <li>● The resources the Authority has available to commit to ensure adherence to the staffing plan.</li> </ul> <p>The MRRJ policy requires supervisors conduct unannounced rounds throughout the facility to determine the general atmosphere of the inmates and staff and to identify and deter staff sexual abuse and sexual harassment. The policy prohibits staff from alerting other staff members when supervisors are conducting their supervisory rounds.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 7, 12-13</p> <p>Staffing Plan - Alberta</p> <p>Staffing Plan - Mecklenburg</p>

Staffing Plan Review

Shift Reports

Housing Unit Logs

Interviews with Staff

Interviews with Inmates

Observations

**Analysis/Reasoning:**

The Auditor reviewed the MRRJ staffing plan for the Alberta facility. The staffing plan allows for 151 total positions. There are 127 security and 24 civilian positions authorized for the facility. At the time of the audit the Alberta facility had 41 vacant security and 1 vacant civilian positions. The Alberta facility staffing plan was predicated with the average daily population of 400 inmates. The Auditor reviewed the staffing plan for the Mecklenburg facility. The staffing plan authorizes 24 security and 4 civilian positions. At the time of the audit the Mecklenburg facility had 10 vacant security and 2 vacant civilian positions. The Mecklenburg facility was predicated with the average daily population of 80 inmates.

The Auditor determined the following staff to inmate ratios based on the staffing plan for both facilities:

- Alberta - 1 staff member for every 2.65 inmates
- Mecklenburg - 1 staff member for every 2.86 inmates

The following denotes the staff to inmate ratio utilizing facility staffing plans and the number of security personnel:

- Alberta - 1 staff member for every 3.15 inmates
- Mecklenburg - 1 staff member for every 3.33 inmates

The staffing plan reviewed by the Auditor includes provisions for administrative, support and security positions on all shifts in each facility area. The facility utilizes overtime to ensure vacant positions are filled for each shift. The facility's security staffing level was maintained at 32.3% below capacity at the Alberta facility and 41.6% below capacity at the Mecklenburg facility at the time of the audit. It should be noted the Mecklenburg facility housed 2 inmates at the time of the audit while the Alberta facility housed 54% fewer inmates than the rated capacity.

The Auditor determined the following staff to inmate ratios based on the current number of security staff and the current population count:

- Alberta - 1 security staff member for every 4.2 inmates
- Mecklenburg - 7 staff members for every 1 inmate

Both Meherrin River Regional Jail facilities operate with two day and two night shifts. The

duration of each shift is 12 hours and does not rotate. Staff are assigned on a permanent basis. The Shift Commander has the authority to utilize overtime and cancel staff holidays to fill vacant positions. Each shift at the Alberta facility is staffed with one Lieutenant and one Sergeant. Each shift at the Mecklenburg facility is staffed with a Sergeant. The Sergeant at Mecklenburg maintains the level of authority as the Lieutenant at the Alberta facility. Each facility shift has male and female staff on each day and night shift.

The Auditor reviewed shift reports. Shift reports are completed by each Shift Commander. The Auditor observed Shift Commanders are documenting daily staff vacancies on each shift and account for the vacancies. The Shift Commanders document staff working overtime and the reason for such. The Shift Commander notates the reason for staff vacancies on shift reports. The Auditor observed vacancies for the following reasons: staff on scheduled leave, staff out sick, staff at the academy, in training, military leave and FMLA. The Shift Commander fills vacant positions with staff on overtime usage.

The Auditor reviewed the Meherrin River Regional Jail's annual staffing plan review. The Staffing Plan Review was conducted on June 24, 2020. The Captain of Security, in conjunction with the PREA Coordinator, conducted the Annual Staffing Plan Review. The Annual Staffing Plan Review was sent to the Superintendent for her review and approval. The Meherrin River Regional Jail's staffing plan includes considerations of the bulleted topics in the "Auditor Discussion" portion of this standard. The review stipulated a minimum direct staff to inmate ratio of 1 staff per 3 inmates. Staff are required to document reasoning if the staffing ratio decreases from that number. The facility conducts a review of its staffing plan each year.

The Auditor reviewed samples from the previous three months of MRRJ housing unit logs from each facility. Facility Lieutenants and Sergeants are documenting unannounced rounds on each post in each facility. Each supervisor documented their unannounced security round in post log books by denoting "unannounced" and included the time of the round.

While touring the facility the Auditor observed staff making security rounds in living units and support areas of the facility. Staff were present in all areas toured by the Auditor. Security and contract personnel were observed interacting with the inmate population. The Auditor observed camera placements throughout the facility. Cameras were strategically placed to assist in the prevention, detection and response to incidents of sexual abuse. The Auditor observed supervisors making unannounced rounds throughout various facility areas, to include housing units.

The Auditor conducted formal interviews with staff and supervisors from various shifts at both facilities. Staff were asked if supervisors conduct unannounced rounds throughout the facility. Each staff stated supervisors do make unannounced rounds through the facility. Supervisors were asked if they were required to make unannounced rounds. The Auditor was informed they are required to make unannounced rounds through all facility areas. Each supervisor was asked how they keep staff from alerting other when they are making unannounced rounds. The Auditor was informed policy prohibits staff from doing so and they do not take the same route when touring the facility. Each was asked if they conduct their rounds at the same time when doing so. Each supervisor stated they vary the time of their unannounced rounds.

Each supervisor was asked what actions they take if discovering a staff member was alerting other staff when supervisors are conducting unannounced rounds. Supervisors informed the Auditor they would talk with the staff member about the importance of the unannounced

round. Each was asked what they would do if they caught the person a second time. Supervisors stated they would recommend formal discipline for the staff member. Each staff member interviewed was aware the MRRJ has a policy prohibiting staff from alerting other staff members of supervisory rounds.

The Auditor conducted formal interviews with inmates at both facilities. Inmates were asked if supervisors announce their presence when entering housing units. Inmates informed the Auditor supervisors do not always announce their presence when entering a housing unit. The Auditor asked male inmates if female supervisors announce their presence when entering female units. Inmates stated female supervisors do announce their presence as a female when entering male housing units. Female inmates were asked if male supervisors announce their presence when entering female housing units. Female inmates stated male supervisors do announce their presence as a male when entering.

Neither facility was under a consent decree, nor had a judicial finding of inadequacy, or a finding of inadequacy from a federal, internal, or external oversight body at the time of the audit.

**Conclusion:**

The Auditor concluded the facility has an adequate staffing plan to ensure the protection of inmates from sexual abuse. The staffing plan is reviewed in accordance with this standard. The Auditor reviewed policies, procedures, staffing plan, staffing plan review, Shift Activity Reports, housing unit logs, interviewed staff and inmates and made observations to determine the facility meets the requirements of this standard.

115.14	<b>Youthful inmates</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Auditor Discussion:</b></p> <p>The MRRJ has a policy which requires the facility make every effort to keep youthful inmates separate from adult inmates. Policy states youthful inmates will not be placed in a housing unit where the youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping quarters.</p> <p>The MRRJ does not house youthful inmates.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 13</p> <p>Population Reports - Alberta</p> <p>Population Reports - Mecklenburg</p> <p>WTRJ Memorandum of Understanding</p> <p>Interviews with Staff</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the previous 12 months of populations reports for each facility. Population reports reveal the MRRJ has not housed a youthful inmate in the previous 12 months. The MRRJ maintains a Memorandum of Understanding with the Western Tidewater Regional Jail to house youthful inmates on its behalf. The current memorandum was entered in March 2017. The MOU stipulates, the Western Tidewater Regional Jail agrees to house "Any person under the age of 18 who is under adult court supervision and incarcerated or detained in a prison or jail." The MOU stipulates the Meherrin River Regional Jail agrees to the following:</p> <ul style="list-style-type: none"> <li>● Will assume responsibility for any court transports;</li> <li>● MRRJ agrees to pay for major medical and catastrophic medical expenses and off-site medical visits;</li> <li>● If a Youthful inmate requires hospitalization during thier stay, MRRJ will assume custody after the first 4 hours;</li> <li>● MRRJ will assume custody of a Youthful inmate within 12 hours upon request of WTRJ; and</li> <li>● Once a Youthful inmate turns the age of 18, MRRJ will assume custody of the inmate.</li> </ul> <p>The Auditor discussed how the facility would handle a youthful inmate if one were brought to the facility. Intake and classification staff stated the youthful inmate would be placed in the Classification Unit that is adjacent to the intake area. Any adult inmates in the Classification</p>

Unit would be moved to another area in the facility. The Auditor toured the Classification Unit and observed the youthful inmate would be out of sight and sound from adult inmates. Staff informed the Auditor any youthful inmate is normally diverted to another facility and does not enter the facility booking area. Staff informed the auditor it had been "years" since a youthful inmate had been brought to the facility.

The facility has the option of housing a youthful inmate at the Mecklenburg facility. The Mecklenburg facility operates below capacity and has multiple empty housing units where a youthful inmate could be housed separately from adult inmates.

The Auditor conducted formal interviews with staff at both facilities. No staff member was aware of a youthful inmate being housed at either facility. The Auditor conducted formal interviews with intake personnel. Intake staff explained a youthful inmate is transported directly to the Western Tidewater Regional Jail and is not housed in either MRRJ facility.

**Conclusion:**

The Auditor reviewed MRRJ policies and procedures, population reports, Memorandum of Understanding, interviewed staff and made observations and determined the facility meets the requirements of this standard.

115.15	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail has a policy that prohibits staff from conducting cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical staff only. The facility has a requirement to document all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches of female inmates.</p> <p>Policy stipulates inmate will be allowed to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is during required security rounds. All staff are required to announce "Male on the Floor" or "Female on the Floor" anytime the opposite gender enters an inmate housing unit and document such announcement in the unit log book.</p> <p>The MRRJ Prison Rape Elimination Act policy prohibits staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. When a staff member cannot determine the genital status of the inmate, they are directed by policy to determine through conversations with the inmate, reviewing medical records, or as part of a broader medical examination conducted in private by a medical personnel.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 13-14</p> <p>Training Lesson Plan</p> <p>Training Attendance Rosters</p> <p>Shift Rosters</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p>Observations</p> <p><b>Analysis/Reasoning:</b></p> <p>The MRRJ houses both male and female inmates. The Auditor reviewed facility shift rosters. The agency maintains male and female staff on each shift at each facility to ensure inmates are searched by a staff member of the same sex. The agency generally does not house female inmates at the Mecklenburg facility. The agency has not had a female inmate on work release at the Mecklenburg facility during this audit period. The Auditor conducted formal interviews with inmates. Female inmates were asked if they had been pat-searched or strip</p>

searched by a male staff member. No female had been strip-searched or pat-searched by a male staff member. The Auditor asked female inmates if a male staff member had ever been present during a strip-search. None could recall such a situation. No male inmate interviewed by the Auditor had been strip searched by a female staff member. The Auditor asked if a female staff member had ever been present when a male inmate was being strip-searched. No inmate could recall such a situation.

Interviews with male and female inmates reveal they are allowed to take a shower, change clothes and use the restroom without security staff of the opposite gender seeing their breast, buttocks or genitalia. Inmates informed the Auditor staff of the opposite gender announce their presence when entering living units. The Auditor conducted formal interviews with male and female staff members. Each staff member was asked if opposite gender announcements were being made in the housing units. Each staff member informed the Auditor opposite gender announcements are being made when entering any opposite gender housing unit. Interviews with staff and female inmates reveal the facility does not restrict female inmates' access to programming or other out of cell activities in order to comply with the provisions of this standard.

The Auditor conducted formal interviews with intake personnel. The main facility conducts the intake for both facilities. There are female staff assigned to the intake area. The Auditor asked how searches of females are conducted when no female staff member is on duty in intake. The Auditor was informed a female staff member from the shift reports to the intake area to conduct the search. Intake personnel were asked what they would do if they could not determine the genital status of an inmate. The Auditor was informed they would look at supporting documents, ask the inmate and if need be, call medical personnel.

The Auditor asked staff how facility personnel conduct searches of transgender and intersex inmates. Transgenders can be pat-searched by male staff if they are housed in a male housing unit. Staff were asked if they had been trained to conduct pat-searches of transgender and intersex inmates. Staff explained their training included using the back of their hand to perform the search. Staff were asked if they would conduct a strip search of a transgender inmate if they could not determine the inmate's sex. Each staff member stated they would not conduct such a search. The Auditor was informed medical personnel were the only staff authorized to do so. Staff stated they would review documents and ask the inmate if they were unsure of the inmate's gender.

The Auditor reviewed the agency's training lesson plan and training attendance rosters. The lesson plan includes procedures how to conduct searches of transgender and intersex inmates and how to communicate with those inmates professionally. Training attendance rosters reveal staff had attended an initial training to conduct searches, including cross-gender searches. This year, the facility has trained 113 staff to conduct searches of transgender and intersex inmates. Staff attend an annual in-service training at the facility.

The Auditor conducted a detailed tour of both facilities and was granted access to all inmate housing units and other support areas. The Auditor observed all shower and restroom areas in the facility. The facility has single shower stalls and single cells have showers inside the cell. All showers are protected from staff view with a shower curtain. Inmates have the ability to shower without security staff of the opposite gender seeing them fully naked. All restrooms offer privacy for the inmates and are protected from view with a wall. The Auditor observed opposite gender announcements being made during the facility tour.

The Auditor conducted a formal interview with a transgender inmate. The inmate was asked if staff respond professionally and respectfully to the inmate. The transgender inmate stated staff are respectful. The inmate was asked if staff conducted a strip search for the sole purpose of determining the inmate's gender. The inmate stated staff had not conducted such a search.

Female inmates are not denied the opportunity for work, programming or education to comply with this standard. Each shift maintains female staff to ensure a female is available to conduct pat searches of female inmates. During interviews with randomly selected female inmates, the Auditor discovered three were working in the facility. Each was asked if they had been denied the access to work due to a lack of female staff to conduct a pat search. None had been denied access for such reason.

The facility reported no incident in which a staff member conducted a cross-gender strip search in the previous 12 months.

**Conclusion:**

The Auditor conducted a review of MRRJ policies and procedures, lesson plans, training attendance rosters, shift rosters, interviewed staff and inmates and made observations. The Auditor concluded the MRRJ staff had been appropriately trained to conduct cross-gender searches and how to make opposite gender announcements when entering housing units. Inmates have the ability to shower, change clothes and use the restroom with a level of privacy. Staff have been trained to treat transgender and intersex inmates respectfully and professionally in the facility. The Auditor determined the MRRJ meets the requirements of this standard.

115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The MRRJ has a policy that ensures inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the MRRJ's efforts to prevent, detect and respond to incidents of sexual abuse and sexual harassment. The policy includes those who are deaf or hard of hearing, blind or low vision, or those who have intellectual, psychiatric, or speech disabilities. The facility provides access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessarily specialized vocabulary. The MRRJ's Prison Rape Elimination Act policy requires the facility take reasonable steps to ensure meaningful access to all aspects of the MRRJ's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient. The facility offers a language line at no cost to the inmate and is located in the intake and medical areas.</p> <p>Policy prohibits staff from using inmate interpreters, readers or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety or the performance of the first-responder duties.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 14</p> <p>Voiance Agreement</p> <p>Training Rosters</p> <p>Inmate Handbook</p> <p>Inmate Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p>Observations</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the agency's Inmate Handbook. The Handbook is written in English and Spanish. Each inmate is provided a copy of the handbook during the booking process. The facility maintains PREA posters written in English and Spanish. Facility staff read the PREA information provided during intake to inmates who are blind or have low vision. Inmates who are deaf or hard of hearing can read the written information. The facility's PREA video is both verbal and closed captioned for those who are either deaf or blind. The facility maintains the PREA video in Spanish. In the event the facility receives an inmate with an intellectual or</p>

cognitive disability, a staff member conducts an individual session with the inmate to ensure he/she receives an understanding of the agency's PREA information. The Inmate Handbook includes the following information:

- Zero-tolerance;
- Prohibition of sexual contact;
- Reporting avenues; and
- PREA Hotline information

Inmates who cannot read English or Spanish can benefit from the facility's PREA information through the use of the language line service. The MRRJ maintains a contract with Voiance to provide telephone translation services. Staff read the information to the interpreter who translate the information to the inmate.

The facility's comprehensive educational video is maintained on a CD. The video is closed captioned for the deaf or hard of hearing. Inmates who are blind or have low vision can hear the information being played through the video. Comprehensive education is provided through televisions in the inmate housing units. In addition to receiving the comprehensive education within 30-days of booking, the video routinely plays in the housing units. Inmates who cannot otherwise benefit from the comprehensive education attend a one-on-one session with a facility staff member.

The Auditor conducted formal interviews with inmates. The Auditor interviewed two inmates who were Limited English Proficient and one who was hard of hearing. Each inmate was questioned about the information provided to inmates during the booking process. All three inmates articulated responses to the Auditor that verified each had been provided the information in a manner they understood. Inmates informed the Auditor they met with a Classification Officer who explained the information and discussed the information with them. The Classification Officer stated the information is discussed with each inmate who enters the facility and each is provided the opportunity to ask questions to ensure they understand the agency's policies.

The Auditor conducted an interview with an inmate who was identified with mental illness. The inmate was provided information upon arrival and received a comprehensive education. The inmate understood the facility's policy's towards prevention, detection and response to sexual abuse and sexual harassment.

The Auditor reviewed the records of 30 inmates. All 30 inmates had signed a roster denoting their attendance and receipt of the comprehensive education. During interviews with inmates the Auditor determined inmates have observed the comprehensive educational video after arriving at the MRRJ. Inmates informed the Auditor the video routinely plays in the housing units. While the comprehensive education video is played, there are no other options for watching television until the education video is complete.

The Auditor conducted interviews with facility staff. The Auditor asked staff to explain how blind and deaf inmates benefit from the agency's information and education. Staff stated information is read to blind inmates and they can hear the video being played. Deaf inmates can read the information and closed captioning on the video. Staff informed the Auditor illiterate inmates can hear the video and they read the information to them. The Auditor was informed staff use the language line when dealing with non-English speaking inmates. The

Auditor asked how staff communicate with inmates who only understand sign language. Staff stated the MRRJ maintains video teleconferencing in the medical area that has been utilized in the past for such purposes. Each staff member was asked if inmate interpreters or inmate readers are utilized by facility staff. Each stated the facility does not utilize inmate interpreters or readers.

The Auditor conducted a detailed tour of both Meherrin River Regional Jail facilities. Observations were made of readily available sexual abuse and sexual harassment materials and PREA posters throughout both facilities, including each living unit and service areas. All posters and posted materials were written in English and Spanish. During interviews with inmates the Auditor discovered all inmates were aware of the posted materials.

**Conclusion:**

The Auditor concluded the facility provides information that ensures equal opportunity to inmates who are disabled. The facility takes reasonable steps to ensure meaningful access to all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment are provided to inmates who are limited English proficient and those who are disabled. The Auditor conducted a thorough review of the agency's policies, procedures, contracts, Inmate Handbook, inmate records, conducted interviews with staff, inmates and made observations to determine the agency meets the requirements of this standard.

115.17	<b>Hiring and promotion decisions</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <hr/> <p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy prohibits hiring or promoting anyone or enlisting the services of any contractor, who may have contact with inmates that:</p> <ul style="list-style-type: none"> <li>● Have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution;</li> <li>● Been convicted of engaging or attempting to engage in sexual activity by overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or</li> <li>● Have been civilly or administratively adjudicated to have engaged in sexual activity;</li> </ul> <p>Agency policy requires considerations of any incident of sexual harassment in determining whether to hire or promote, or enlist services. The policy requires a criminal background records check be conducted before hiring new staff employees or enlisting services from volunteers or contractors who may have contact with inmates. Policy also requires the agency 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.</p> <p>The facility has a policy to conduct a criminal background records check on all current employees, volunteers, and contractors, who may have contact with inmates at least every five years. The Meherrin River Regional Jail's policy is to ask all applicants and employees, who may have contact with inmates, directly about previous misconduct in all written applications, interviews for hiring or promotion, or during written evaluations. Policy requires employees disclose such misconduct and stipulates, "Any material omission or false information regarding misconduct will be grounds for termination."</p> <p>The facility has a requirement to provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work, unless prohibited by law.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 14-15</p> <p>Sexual Misconduct Information Release Form</p> <p>Employee Records</p> <p>Criminal Record Check Tracking Log</p> <p>Interviews with Staff</p> <p>Interviews with Contractors</p>

### **Analysis/Reasoning:**

The Auditor reviewed the facility's Sexual Misconduct Information Release form. The form asks potential employees, current employees and staff seeking promotions the following questions:

- Have you engaged in sexual abuse in a jail, prison, community confinement facility, juvenile facility, or other institution;
- Have you been convicted of engaging or attempting to engage in sexual activity in the community, facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse;
- Have you been civilly or administratively adjudicated to have engaged in the activity as described above; and
- Have you engaged in any sexual harassment incident?

The Sexual Misconduct Information Release form also states, "Refusing to disclose information on the release about past behavior at the time of employment or failing to disclose relevant information during the course of employment or at the time of promotion will constitute grounds for immediate dismissal [and] Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination."

The Auditor conducted an interview with the facility's Human Resource staff member. The Auditor was informed the interview team provides each candidate for employment the Sexual Misconduct Information Release form during the interview process. Each candidate is required to answer the questions. Employees are provided the Sexual Misconduct Information Release form and required to answer the questions on an annual basis. The Auditor was informed each employee is provided the Sexual Misconduct Information Release form prior to a promotion.

The Auditor conducted a review of employee records. The facility conducts a criminal background check of all employees every five years. The facility's Internal Affairs Investigator conducts the criminal background check electronically through the Virginia Criminal Information Network and the National Crime Information Center. Records reveal the MRRJ has conducted criminal background record checks every five years of its employees and contractors. Records reveal each employee is specifically asked questions related to sexual abuse prior to employment, promotion and annually. The Auditor reviewed the tracking log utilized by the investigator. The investigator logs the date of criminal record background checks. The log contains the date the most recent check was performed and the date at which the five year check is due.

The Auditor conducted a review of contractor records. Records reveal the MRRJ asks each contractor questions related to acts of sexual abuse. Each contractor reads and signs Sexual Misconduct Information Release form. Contractors are required to print, date and sign the form. The Auditor observed evidence the agency performs a criminal background check on each contractor prior to providing services and every five years thereafter.

The Auditor reviewed the personnel record of a MRRJ staff member who had previously been employed at another confinement facility. The Auditor observed the MRRJ specifically requests information regarding substantiated allegations and resignations during a pending investigation of sexual abuse from other institutional employers prior to offering the candidate

a position at the Meherrin River Regional Jail. The Auditor asked the Human Resource representative if information related to sexual abuse investigations is provided to other institutional employers when requested by other agencies regarding a former MRRJ employee. The Auditor was informed that information is provided when requested.

The Auditor conducted formal interviews with staff. Staff were asked if they were aware of the criminal background records check process. Each staff was aware the facility conducts a criminal background records check every five years. Staff were asked when they are asked specific questions related to sexual abuse and sexual harassment. Each staff asked informed the Auditor they answer those questions before being hired, annually and prior to promotion.

The Auditor conducted formal interviews with contractors. Contractors were asked if they were aware the agency conducts a criminal record background check. Each contractor was aware the facility conducts such checks prior to services and every five years. The Auditor asked each if they were ever questioned about prior or current acts of sexual abuse or sexual harassment. Each contractor stated they are asked those questions on the Sexual Misconduct Information Release form. Each stated they are required to sign the form.

**Conclusion:**

The Auditor concluded the Meherrin River Regional Jail is performing appropriate practices to identify previous acts of sexual misconduct prior to hiring staff and enlisting the services of contractors, and before promoting staff members. The Auditor conducted a thorough review of the MRRJ policies, procedures, employee records, contractor records, and interviewed staff and contractors to determine the agency meets the requirements of this standard.

115.18	<b>Upgrades to facilities and technologies</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 536 360"><b>Auditor Discussion:</b></p> <p data-bbox="252 400 1481 689">The Meherrin River Regional Jail policy is to consider the effect of the design, acquisition, expansion, or modification upon the MRRJ's ability to protect inmates from sexual abuse when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facility. The policy stipulates when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse.</p> <p data-bbox="252 730 574 763"><b>Evidence Relied Upon:</b></p> <p data-bbox="252 804 772 837">Policy - Prison Rape Elimination Act, pg.</p> <p data-bbox="252 878 512 911">Interviews with Staff</p> <p data-bbox="252 952 427 985">Observations</p> <p data-bbox="252 1025 545 1059"><b>Analysis/Reasoning:</b></p> <p data-bbox="252 1099 1481 1388">The Meherrin River Regional Jail has not designed or acquired any new facility or planned any substantial expansion or modification of its existing facilities since its last PREA audit. The MRRJ has not installed or updated its video monitoring system, electronic surveillance system, or other monitoring technologies during this audit period. Since the last PREA audit the facility added cameras in the dry storage room in the kitchen. The facility experienced an incident of sexual abuse in the dry storage room during the last audit cycle. To improve its efforts towards prevention, detection and response the facility added cameras in the area.</p> <p data-bbox="252 1429 1420 1718">The Auditor conducted an interview with the agency's PREA Coordinator. The PREA Coordinator is clear on the responsibility to consider the effects of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities. The PREA Coordinator is clear on the requirement to consider how technology installments or technology equipment updates may enhance the agency's ability to protect inmates from sexual abuse.</p> <p data-bbox="252 1758 427 1792"><b>Conclusion:</b></p> <p data-bbox="252 1832 1471 1991">The facility provided the Auditor the opportunity to tour each MRRJ facility. Both facilities appear to be of original construction. The Auditor observed camera placements in both facilities. The Auditor reviewed the agency's policies and procedures, interviewed staff, made observations and determined the MRRJ meets the requirements of this standard.</p>

115.21	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail has a policy that a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Policy requires all victims of inmate-on-inmate sexually abusive penetration or staff-on-inmate sexually abusive penetration are provided access to a forensic medical examination performed by a Sexual Abuse Nurse Examiner (SANE) at the Virginia Commonwealth University (VCU). The examination is provided to the victim at no cost to the victim. The agency's policy is to provide inmates with access to outside victim advocates for emotional support services related to sexual abuse through The James House. Policy stipulates the advocate may accompany the victim through the forensic medical exam process, investigatory interviews, and provide emotional support, crisis intervention, information and referrals.</p> <p>MRRJ policy requires the Superintendent or designee notify the Brunswick County Sheriff's Department of all instances of potential criminal sexual offenses committed by staff or inmates for prosecution and/or investigative purposes. The Brunswick County Sheriff's Investigator accompanies the SANE during the collection of forensic evidence and receives a statement from the inmate. Policy requires the Brunswick County Sheriff's Office contact the Commonwealth's Attorney's Office for prosecution.</p> <p>The facility transports sexual assault victims when the reported incident occurred within 96 hours to the Virginia Commonwealth University for treatment and gathering of forensic evidence by a qualified medical provider.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 16</p> <p>Brunswick County Sheriff's Office Policy - GO 2-31 Sexual Assault</p> <p>Evidence Protocol</p> <p>VCU Medical Center Cooperative Agreement</p> <p>The James House Memorandum of Understanding</p> <p>Brunswick County Sheriff's Office Memorandum of Understanding</p> <p>Mecklenburg County Sheriff's Office Memorandum of Understanding</p> <p>Interview with Investigator</p> <p>Interviews with Medical Contractors</p> <p>Interview with Victim Advocate</p>

### **Analysis/Reasoning:**

The Auditor reviewed the agency's policies and procedures. The agency has included the elements of this standard in its policies and procedures. The Meherrin River Regional Jail conducts administrative investigations of sexual abuse and sexual harassment. All criminal allegations of sexual abuse are reported to the Brunswick County Sheriff's Office for criminal investigation. Facility personnel are required to preserve any crime scene until the Brunswick County Sheriff's Office Investigator arrives to process physical evidence from the scene.

The Auditor reviewed the Brunswick County Sheriff's Office protocol utilized for the collection of evidence. The protocol is based on the U.S. Department of Justice's Office on Violence Against Women Publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents." The Auditor reviewed the Brunswick County Sheriff's Office policy for responding to sexual assaults. The policy addresses sexual assault evidence collection with appropriate response and collection protocols.

The Auditor reviewed the agency's Memorandum of Agreement with the Brunswick County Sheriff's Office. The memorandum stipulates the Brunswick County Sheriff's Office agrees to the following:

- To provide, upon request of the Meherrin River Regional Jail, an investigator to investigate criminal allegations of sexual abuse;
- To meet with the victim and the Sexual Assault Nurse Examiner at Virginia Commonwealth University for criminal investigatory purposes;
- To allow a victim advocate, chosen by the victim, to accompany and support the victim during the criminal investigation and forensic evidence gathering; and
- To follow a uniform evidence protocol from or 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 similar comprehensive and authoritative protocols developed after 2011.

The Memorandum of Understanding states the Meherrin River Regional Jail agrees to the following:

- To promptly notify the BCSO regarding allegations of sexual abuse;
- To specifically train MRRJ staff on first responder duties upon learning of an allegation;
- To keep BCSO investigators informed and provide all available evidence for criminal prosecution;
- To inform BCSO investigators of the administrative interview results concerning the alleged sexual assault;
- To work with BCSO investigators on the administrative interview results concerning the alleged sexual assault; and
- To work with BCSO investigators to maximize all prosecutorial efforts.

The facility's Memorandum of Understanding with the Brunswick County Sheriff's Office was signed by the Brunswick County Sheriff and the facility's Superintendent. The MOU was signed in March 2017 and remains in effect to date. The MOU is effective and remains in effect until either party terminates the MOU in writing and it may be amended, modified, expanded, etc. as mutually agreed upon by the parties.

The facility's Memorandum of Understanding with the Mecklenburg County Sheriff's Office mirrors the MOU with the Brunswick County Sheriff's Office.

The Auditor reviewed the facility's Memorandum of Understanding with The James House. The MOU stipulates The James House agrees to the following:

- Services provided are free and confidential;
- Provide twenty-four hour telephone crisis intervention counseling via 24 hour hotline;
- Upon request of the victim or someone calling on behalf of the victim, have a trained advocate provide services to victims at forensic programs, hospitals, or law enforcement agency within a reasonable period of time;
- Provide crisis intervention counseling, advocacy, information and referrals to victims of sexual violence detained at MRRJ;
- If possible, provide legal advocacy to victims of sexual violence who participate in protective order hearings, preliminary hearings, sentencing hearings and any other relevant legal proceedings;
- Report all services provided to detained sexual violence victims to an assigned point of contact at the Meherrin River Regional Jail; and
- Provide allied professional training as requested by the Meherrin River Regional Jail.

The MOU stipulates the Meherrin River Regional Jail agrees to the following:

- Train Meherrin River Regional Jail staff on sexual violence and services available to detained victims;
- Educate detainees on the availability of services for victims of sexual violence and inform any detainee requesting services from The James House that advocate may be required to share information with a designated staff person at Meherrin River Regional Jail in a confidential a manner as possible;
- Provide telephone access to detainees who request sexual violence hotline crisis intervention services;
- Request a James House advocate for detained victims of sexual violence who are experiencing Rape Trauma Symptoms; and
- Allow The James House staff to conduct allied professional training to Meherrin River Regional Jail regarding sexual violence.

The facility's Memorandum of Understanding with The James House was signed by The James House Director of Community Relations and the facility's Superintendent. The MOU was signed in March 2017 and remains in effect to date. The MOU is effective and remains in effect until either party terminates the MOU in writing and it may be amended, modified, expanded, etc. as mutually agreed upon by the parties.

The facility has attempted to enter a Memorandum of Understanding with the Virginia Commonwealth University Medical Center for forensic services. The facility provided the auditor with an unsigned copy of the Memorandum of Understanding that it has sent to the VCU Medical Center. To date, the VCU Medical Center has not signed the Memorandum of Understanding. The Auditor attempted to conduct a telephone interview with a Sexual Assault Nurse Examiner with the VCU Medical Center and was unsuccessful.

The Auditor conducted an interview with a representative from The James House. The

interview was conducted by telephone. The representative confirmed the James House provides victim advocacy for inmate victims of sexual abuse. The Auditor asked if a representative has attended a forensic examination in the previous 12 months. The advocate was unaware of an instance in the previous 12 months that required victim advocacy. She was able to confirm her organization representative is allowed to accompany a victim during the forensic examination if the inmate requests such. The Auditor asked who contacts The James House following a sexual abuse. The representative stated the facility contacts her organization when an inmate requests the presence of an advocate. She also stated the hospital will contact the organization. Emotional support services are provided on site with inmates if determined. The Meherrin River Regional Jail does not use staff to perform the services of victim advocacy.

The Auditor conducted formal interviews with contract medical personnel. Medical personnel were asked if they conduct forensic examinations on site. Each medical personnel stated they do not conduct forensic examinations. The Auditor was informed forensic examinations are conducted at the VCU Medical Center by a certified SANE.

The Auditor conducted a formal interview with an agency investigator. The investigator was asked to explain the process when investigation allegations of sexual abuse. The Auditor was informed criminal investigations of sexual abuse are conducted by the Brunswick County Sheriff's Office or the Mecklenburg Sheriff's Office. The Auditor asked how evidence collection occurs at the facility. The Investigator explained sheriff's office Investigator responds to the facility and collects evidence from the crime scene. The Meherrin River Regional Jail staff preserve the crime scene until the sheriff's office Investigator arrives to process and collect the evidence.

The facility reported no instance that required an inmate be transported to the Virginia Commonwealth University for a forensic examination in the previous 12 months.

**Conclusion:**

The MRRJ is utilizing an appropriate uniformed evidence protocol to maximize the potential for usable evidence. The facility makes victim advocates available to victims of sexual abuse and ensures access to a forensic examination performed by a certified Sexual Abuse Nurse Examiner. The Auditor reviewed the MRRJ policies, procedures, Memorandums of Understanding, evidence protocol and conducts interviews with staff and inmates. The Auditor determined the agency meets the requirements of this standard.

115.22	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy is to ensure an administrative and/or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. The MRRJ policy is to refer criminal allegations of sexual abuse to the Brunswick County Sheriff's Office or the Mecklenburg Sheriff's Office. The Brunswick County Sheriff's Office has the legal authority to conduct criminal investigations in the Algerta facility while the Mecklenburg Sheriff's Office has the legal authority to conduct criminal investigations in the Mecklenburg facility.</p> <p>MRRJ policy requires the Superintendent or designee coordinate referrals of allegations of sexual abuse to the Sheriff's Office. Policy states, "The Brunswick County Sheriff's Department will be notified by the Superintendent or designee of all instances of potential criminal sexual offenses committed by staff or inmates for prosecution and/or investigative purposes. The Brunswick County Sheriff's Office will contact the Commonwealth's Attorney's Office for prosecution."</p> <p>The facility maintains a Memorandum of Understanding with the Brunswick County Sheriff's Office and the Mecklenburg County Sheriff's Office to investigate criminal allegations of sexual abuse.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 16-17</p> <p>Facility Website</p> <p>MOU with Brunswick County Sheriff's Office</p> <p>MOU with Mecklenburg County Sheriff's Office</p> <p>Investigative Records</p> <p>Interview with Investigator</p> <p>Interview with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the Meherrin River Regional Jail website. The MRRJ website includes a link to access the agency's policy regarding the conduct of investigating allegations of sexual abuse and sexual harassment. The website informs administrative investigations will be conducted by the Meherrin River Regional Jail while criminal allegations of sexual abuse will be referred to the Brunswick County Sheriff's Office. The website includes the facility's Prison Rape Elimination Act policy for the public to view.</p> <p>The Auditor conducted a formal interview with a facility Sexual Abuse Investigator. The</p>

Auditor asked the investigator to explain the process once an allegation appears to be criminal in nature. The investigator stated the Sheriff's Office is notified immediately to conduct a criminal investigation. The referral to the Sheriff's Office is documented in the MRRJ written investigative report. The Meherrin River Regional Jail has one staff member who conducts administrative investigations for both facilities. The facility maintains a Memorandum of Understanding with the Brunswick County and Mecklenburg County Sheriff's Offices. Each agrees to conduct criminal investigations of sexual abuse that occur in the Meherrin River Regional Jail facilities. The investigator has determined no allegation received in the previous 12 months appeared to be criminal in nature and therefore did not refer an allegation to either Sheriff's Office.

The Auditor conducted formal interviews with inmates who filed an allegation with the facility. Each was asked if an investigator spoke to them regarding the allegation. The Auditor was informed an investigator spoke with each inmate in a timely manner. Each was asked if they were informed of the investigative results. Each inmate stated their allegation was unfounded by the investigator. The Auditor reviewed the investigative records of the allegations made by the inmates. Each was investigated promptly, thoroughly and objectively. The investigator determined each allegation was unfounded.

The facility reported 8 allegations of sexual abuse and sexual harassment were received within the previous 12 months. None of the allegations required referral to the Brunswick County Sheriff's Office or the Mecklenburg County Sheriff's Office. The agency has not received an allegation at the Mecklenburg facility in the past three years.

No department of justice component is responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in the Meherrin River Regional Jail.

**Conclusion:**

The Auditor concluded the Meherrin River Regional Jail appropriately refers criminal allegations of sexual abuse and sexual harassment to the local Sheriff's Office with the legal authority to conduct criminal investigations. The Auditor observed evidence the facility is investigating all allegations of sexual abuse and sexual harassment. After reviewing agency policies, procedures, website, MOUs, investigative records and interviewing staff and inmates, the Auditor determined the agency meets the requirements of this standard.

115.31	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy stipulates all employees who may have contact with inmates will receive training to comply with PREA standards. The facility provides refresher information to all employees every two years to ensure they know the department's most current sexual abuse policies and procedures. In years in which an employee does not receive refresher training, MRRJ provides refresher information on current sexual abuse and sexual harassment policies. The training provided is tailored to male and female inmates. Policy requires the facility maintain written documentation showing employee signatures verifying employees understand the training they received. MRRJ policy requires all employees who have contact with inmates be trained on the following:</p> <ul style="list-style-type: none"> <li>• The jail's zero-tolerance policy for sexual abuse and sexual harassment;</li> <li>• The employee's responsibilities under the jail's sexual abuse, sexual harassment prevention, detection, reporting, and response policy;</li> <li>• Inmates' rights to be free from sexual abuse and sexual harassment;</li> <li>• The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;</li> <li>• The dynamics of sexual abuse and sexual harassment in a jail setting such as: creating substitute families, power domination through aggression, and a young or LGBTI inmate being at risk for violent assault;</li> <li>• The common reactions of sexual abuse and sexual harassment victims such as: hostility, withdrawn, denial, afraid of sexual transmitted diseases, and fear of staff;</li> <li>• How to detect and respond to signs of threatened and actual sexual abuse such as: ensure safety, stabilize the situation, securing the scene, separate the ones involved, ask questions, and report incident to a Supervisor;</li> <li>• How to avoid inappropriate relationships with inmates;</li> <li>• How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or other nonconforming inmates; and</li> <li>• How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</li> </ul> <p>All facility security staff are trained on the Meherrin River Regional Jail's policy for conducting proper pat down searches on inmates to include cross-gender searches.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 17-18</p> <p>Lesson Plans</p> <p>Training Attendance Rosters</p> <p>Interviews with Staff</p>

## Interviews with Inmates

### **Analysis/Reasoning:**

The Auditor reviewed the agency's lesson plans utilized to train staff. The MRRJ lesson plans include all training topics as bulleted above. The MRRJ instructor teaches from the lesson plan and uses a PowerPoint presentation to train staff. Each new staff member is provided the training when they are initially hired. The facility provides PREA training to all staff annually. The training provided to employees is not tailored to any gender as the facility houses male and female inmates.

The Auditor reviewed the MRRJ staff training records. Training records reveal all staff are provided the PREA training. The Auditor reviewed training records for the previous 12 month period. All staff had been provided training within the previous 12 months. Each employee's understanding is recorded on the training attendance roster. The training attendance roster states, "By signing this I acknowledge that I have read and understand the following MRRJ Policy and Procedure: ..." In the past 12 months the facility has trained 195 staff and contractors.

The Auditor conducted formal interviews with specialized and randomly selected staff. Each was asked about the training provided by the agency. All staff interviewed had been provided the training and informed the Auditor they receive training every year. The Auditor asked each to explain the topics provided by the agency during their annual training. Staff were able to articulate the above listed topics. The Auditor determined staff were knowledgeable regarding those topics.

The Auditor conducted formal interviews with randomly selected and specifically targeted inmates. The inmates interviewed articulated staff appropriately respond to incidents, take sexual abuse and sexual harassment seriously and had confidence in staff's abilities. The inmates' collective responses allowed the Auditor to determine staff had received PREA training.

### **Conclusion:**

The Auditor concluded the facility has appropriately trained its staff and documented the training as required by this standard. Facility staff interviewed by the Auditor were knowledgeable in the training topics mandated in PREA standard 115.31. The Auditor reviewed agency policy, procedures, training attendance records, training lesson plans, conducted interviews with staff and inmates and determined the facility meets the requirements of this standard.

115.32	<b>Volunteer and contractor training</b>
	<p data-bbox="248 168 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 536 365"><b>Auditor Discussion:</b></p> <p data-bbox="248 405 1477 817">The Meherrin River Regional Jail has a policy that requires all contractors and volunteers who have contact with inmates receive training on their responsibilities under the department's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The level and type of training provided to volunteers and contractors is based on the services they provide and the level of contact they have with inmates, but all volunteers and contractors who have contact with inmates must be notified for the department's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. Policy requires the facility maintain written documentation showing the volunteers and contractor's signature verifying they understand the training and materials they have received.</p> <p data-bbox="248 862 576 898"><b>Evidence Relied Upon:</b></p> <p data-bbox="248 938 815 974">Policy - Prison Rape Elimination Act, pg. 18</p> <p data-bbox="248 1014 663 1050">Contractor Training PowerPoint</p> <p data-bbox="248 1090 592 1126">Interview with Contractors</p> <p data-bbox="248 1167 544 1202"><b>Analysis/Reasoning:</b></p> <p data-bbox="248 1243 1469 1391">The Auditor reviewed the agency's volunteer and contractor training PowerPoint presentation. Contract personnel who work regularly in the facility receive the same training as provided to all agency personnel. Contractors are required to read and sign for understanding of policies and training provided.</p> <p data-bbox="248 1431 1246 1467">The Auditor observed the following in the agency's PowerPoint presentation:</p> <ul data-bbox="300 1534 651 1736" style="list-style-type: none"> <li>• Zero-tolerance policy</li> <li>• Responsibilities</li> <li>• Discipline Measures</li> <li>• Reporting Sexual Abuse</li> <li>• First Responder Duties</li> </ul> <p data-bbox="248 1776 1477 1977">The Auditor reviewed signed contractor training acknowledgments. The acknowledgement contains the following statement, "By signing this I acknowledge I have completed and understand the training and have also read and understand MRRJ Policy and Procedure 9A on Prison Rape Elimination Act." The form requires the personnel to print and sign their name and include the date of acknowledgement.</p> <p data-bbox="248 2018 1485 2139">The facility reported 43 contractors were authorized in the facility and have contact with inmates. The Auditor reviewed the training records that reveal the facility has trained 21 contractors within the previous 12 months. All 43 contractors have received the facility's PREA</p>

training prior to providing services at the facility.

The Auditor conducted formal interviews with contract personnel. Each contractor interviewed verified they had been provided training related to the agency's PREA policies prior to beginning services. The Auditor asked each specific questions related to the facility's policy's and procedures for reporting allegations of sexual abuse and sexual harassment. Each contractor understood their requirements for reporting allegations, information and knowledge related to such. Each was asked to explain their responsibilities under the VBSO polices related to sexual abuse. Each contractor understood their rights and responsibilities for such. All contractors understood the agency has a zero-tolerance policy of sexual abuse and sexual harassment.

The facility reported 8 volunteers are currently authorized to enter the facility and have limited contact with inmates. Each contractor is provided the training in written format. Each volunteer is required to read the training and sign the acknowledgement of receipt and understanding. The Auditor reviewed records that all 8 volunteers had received the training and signed the acknowledgement form.

The Auditor conducted formal interviews with contract personnel. Each contractor interviewed verified they had been provided training related to the agency's PREA policies prior to performing services. The Auditor asked each specific questions related to the facility's policy's and procedures for reporting allegations of sexual abuse and sexual harassment. Each contractor understood their requirements for reporting allegations of sexual abuse and sexual harassment. Each was asked to explain their responsibilities under the MRRJ polices related to sexual abuse. Each contractor understood their rights and responsibilities for such. All contractors understood the agency has a zero-tolerance policy of sexual abuse and sexual harassment.

The Auditor could not conduct an interview with a volunteer as the facility has suspended volunteer services to mitigate the risk of COVID-19.

**Conclusion:**

The Auditor concluded the facility is appropriately training volunteers and contractors and staff ensures documentation of training is maintained. The Auditor determined through a review of agency policies, procedures, training curriculum, acknowledgment forms and by interviewing contract personnel the facility meets the requirements of this standard.

115.33	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>It is the policy of the Meherrin River Regional Jail to provide each inmate with PREA information and comprehensive education. Policy stipulates the education will be provided in formats accessible to all inmates, including those who are limited English proficient, hearing or visually impaired, or otherwise disabled as well as inmates who have limited reading skills. Policy requires the MRRJ to maintain written documentation of inmate participation in education sessions. Comprehensive education is provided within 30 days of the intake process and includes the following information:</p> <ul style="list-style-type: none"> <li>● Inmates rights to be free from sexual abuse and sexual harassment;</li> <li>● Inmates rights to be free from retaliation for reporting sexual abuse and sexual harassment;</li> <li>● Agency policies and procedures for responding to sexual abuse and sexual harassment;</li> <li>● The dynamics of sexual abuse in confinement; and</li> <li>● Common reactions of sexual abuse.</li> </ul> <p>The facility's policy requires inmates receive periodic refresher information to all inmates to ensure they know MRRJ provides inmate education in formats accessible to all inmates. Policy also stipulates key information will continually be made readily available and/or visible to inmates through posters or other written formats.</p> <p>The facility provides each inmate with a PREA information sheet explaining the jail's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 18-19</p> <p>PREA Inmate Education Sheet</p> <p>PREA Inmate Acknowledgement</p> <p>Inmate Handbooks</p> <p>Orientation Video</p> <p>Inmate Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p>Observations</p>

### **Analysis/Reasoning:**

Each inmate is provided an Inmate Handbook upon arrival at the Meherrin River Regional Jail. The facility has an Inmate Handbook for the Alberta and Mecklenburg facilities. The Auditor reviewed the Inmate Handbooks and determined the information provided to inmates is the same with the exception of addresses, telephone numbers and other minor information specific to each facility. The following information is included in both Inmate Handbooks:

- Zero-tolerance;
- Prohibition of sexual contact of any kind;
- Reporting sexual abuse and sexual harassment;
- Reporting avenues; and
- PREA Hotline information

Each inmate is provided an informational sheet upon arrival in the intake area. The inmate is required to read and sign acknowledgement of the information. The Intake Officer or Classification Officer makes arrangements to ensure those with disabilities can understand the information. The informational sheet is maintained in English and Spanish. The PREA Inmate Acknowledgement requires the inmate sign and a staff witness sign. The following information is included in the PREA Inmate Acknowledgement sheet:

- PREA overview;
- Definitions of rape, sexual misconduct and sexual battery;
- Zero-tolerance policy;
- How to report sexual abuse;
- Treatment options for assault victims;
- Protecting from victimization; and
- Notice to predators

The Meherrin River Regional Jail utilizes the "What You Need to Know" video. Each inmate watches the video after they are classified to a housing unit. Inmates are given an opportunity to ask questions about the facility's information and comprehensive education with the Classification Officer. The Classification Officer meets with each new inmate individually. The Classification Officer and intake officer discuss the information on the PREA Inmate Acknowledgement sheet. The facility maintains the Inmate Handbook and Comprehensive educational video in English and Spanish. The video is closed captioned in each language. The agency does not educate inmates prior to transferring them to another MRRJ facility as the policies are the same at each facility.

The Auditor reviewed 30 inmate records. The Auditor randomly chose 15 and specifically chose 15 inmate files. A review of inmate records revealed each inmate signed the PREA Inmate Acknowledgement form. Each inmate had been provided an Inmate Handbook upon intake and the comprehensive education within 30 days of arrival. Each inmate signed a PREA Inmate Education sheet denoting receipt of comprehensive education. The Auditor was able to determine by a review of a relevant sample of inmate files the inmate population receives a comprehensive education. While interviewing inmates the Auditor was informed they received an Inmate Handbook during the booking process. The Inmate Handbook includes the agency's sexual abuse and sexual harassment information.

The Auditor conducted a formal interview with an inmate who was hard of hearing. The inmate was able to read the informational sheet provided during the intake process. The inmate informed the Auditor he could read the closed captioning on the PREA comprehensive educational video. The inmate understood how to report allegations of sexual abuse. He was familiar with the agency's policies and procedures for prevention, detection and response to sexual abuse and sexual harassment.

The Auditor conducted formal interviews with inmates who were identified as Limited English Proficient. Each was asked if he was provided information during the booking process. Each inmate informed the Auditor they were provided a handbook written in Spanish. One inmate spoke the Russian language and was provided the Inmate Handbook in English. The Inmate informed the Auditor he was able to understand most information in the handbook. The Auditor asked each if they had watched the comprehensive educational video. The inmate of Hispanic decent informed the Auditor he had seen the Spanish version of the video while the inmate of Russian decent has seen the English version. The inmates were knowledgeable regarding the agencies sexual abuse and sexual harassment policies and procedures towards prevention, detection and response. The Auditor asked the inmates how the facility communicated with them. Inmates stated the facility uses interpreters to communicate or used the language line.

The Auditor conducted a formal interview with an inmate who was identified with a mental disability. The inmate was asked if he was provided a handbook upon arrival. The Auditor asked the inmate if he had watched a video about sexual abuse and sexual harassment. The inmate informed the Auditor he was provided a handbook and watched the educational video. The Auditor questioned the inmate about the contents of the handbook and video. The inmate understood how to report allegations of sexual abuse and sexual harassment, understood the facility has a zero-tolerance policy, and he has a right to be free from sexual abuse, sexual harassment and retaliation. The Auditor was able to determine the inmate identified with a mental disability had benefitted from the agency's information and comprehensive education. The inmate informed the auditor he had submitted an allegation of sexual misconduct at the facility. Information related to the allegation are included in this report in the applicable standard section.

The Auditor conducted a formal interview with classification personnel. Classification was asked how information is provided to inmates who are deaf, hard of hearing, blind, have low vision or who cannot read English. The Auditor was informed PREA information can be read by those who are deaf and is read to those who are blind. Deaf inmates can read the closed captioning on the educational video while blind inmates can hear the audio. The Auditor was informed the agency contracts for telephonic language line service to interpret for inmates who do not speak English. The Auditor asked classification personnel how they ensure inmates who cannot otherwise benefit from the agency's education and information receive the information. Classification stated they discuss options with the PREA Coordinator and provide individual information and education to the disabled inmate.

While touring the facility the Auditor observed key information readily available in the form of PREA posters and postings throughout the facility. The facility provides readily available information to inmates in its Inmate Handbook and PREA Inmate Acknowledgement sheet. The facility maintains PREA materials written in English and Spanish. During interviews with inmates and staff he Auditor was informed the educational video plays routinely in the housing

units. Inmates informed the Auditor they have seen the comprehensive educational video multiple times.

**Conclusion:**

The Auditor concluded the inmate population at the Meherrin River Regional Jail have been appropriately educated in the facility's zero-tolerance policy, how to report allegations, rights to be free from sexual abuse, sexual harassment, retaliation, and the agency's policies and procedures for responding to such. The facility maintains appropriate documentation of such in each inmate's record. The Auditor reviewed the agency's policies, procedures, inmate records, PREA Inmate Education and Acknowledgements, Inmate Handbooks, orientation video, interviewed staff, inmates and made observations to determine the facility meets the requirements of this standard.

115.34	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy requires investigators receive specialized training to conduct sexual abuse investigations in confinement settings prior to conducting such investigations. Policy requires investigators receive the general training provided to all employees, in addition to specialized training. The policy requires specialized training include the following information:</p> <ul style="list-style-type: none"> <li>● Interviewing sexual abuse victims;</li> <li>● Proper use of Miranda warning;</li> <li>● Proper use of the Garrity warning;</li> <li>● Sexual abuse evidence collection in confinement settings; and</li> <li>● The criteria and evidence required to substantiate a case for administrative action or prosecution referral.</li> </ul> <p>The facility maintains written documentation that investigators have completed the required specialized training in conducting sexual abuse investigations.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 19</p> <p>Training Curriculum</p> <p>Training Certificate</p> <p>Interview with Investigator</p> <p><b>Analysis/Reasoning:</b></p> <p>The MRRJ utilized the Training Force USA, "Prison Rape and Sex Assault Investigations Inside Correctional Facilities" course to train its investigators. The Training Force USA training includes interviewing victims, Miranda and Garrity Warnings, evidence collection, and criteria and evidence to substantiate a case. At the time of the audit the facility had one trained sexual abuse investigator. The Auditor reviewed the training record of the investigator. A review of training records revealed the investigator received the specialized training for investigators. The training record revealed the investigator received the same training offered to all MRRJ employees.</p> <p>The Auditor reviewed the Training Force USA training curriculum. The curriculum included the following:</p> <ul style="list-style-type: none"> <li>● Dynamics of inmate sexual violence;</li> <li>● Understanding offender psychology and behavior;</li> <li>● Suspect and victim interviews;</li> </ul>

- Elements of an effective investigation;
- Anticipating the suspect's legal defenses;
- Effective report writing;
- How to get your prosecutor ONBOARD; and
- (PREA) Prison Rape Elimination Act Considerations.

The Auditor formally interviewed the MRRJ Sexual Abuse Investigator. The Auditor asked the investigator to explain the topics included in the specialized training he received. The investigator articulated the topics as bulleted above. The Auditor asked the investigator to explain the process he uses when conducting investigations. His responses indicate he had been trained to conduct sexual abuse investigations in confinement settings. The investigator discussed interviewing techniques, Mirand and Garrity warnings, evidence collection and the criteria and evidence to support administrative and prosecutorial referral. The investigator attended training on October 15, 2015 in Lynchburg, Virginia. The training was conducted in person sponsored by the Training Force USA. The training was an 8-hour course.

No department of justice component is required to investigate sexual abuse allegations in the Meherrin River Regional Jail.

**Conclusion:**

The Auditor concluded the facility has provided appropriate training to it's Sexual Abuse Investigator. The Auditor conducted a review of policies, procedures, training curriculum, training records and conducted an interivew with an investigator to determine the facility meets the requirements of this standard.

115.35	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy is to provide all full-time and part-time medical and mental health care practitioners who work regularly in the facility with specialized training on working with victims of sexual abuse and sexual harassment. Policy requires the training include the following topics:</p> <ul style="list-style-type: none"> <li>● How to detect and assess signs of sexual abuse and sexual harassment;</li> <li>● How to preserve physical evidence of sexual abuse;</li> <li>● How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and</li> <li>● How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</li> </ul> <p>Policy requires the facility maintain documentation that medical and mental health practitioners have received the specialized training. The agency requires all medical and mental health care practitioners receive the same training as all other institutional staff.</p> <p>The MRRJ policy prohibits medical staff employed by the Meherrin River Regional Jail from conducting forensic examinations.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 19-20</p> <p>Training Curriculum</p> <p>PREA Training Acknowledgement Forms</p> <p>Interviews with Contractors</p> <p><b>Analysis/Reasoning:</b></p> <p>Medical and mental health services at the Meherrin River Regional Jail are conducted by Mediko INC. All Mediko medical and mental health practitioners are required by the MRRJ policy to complete specialized medical training. The Auditor reviewed the records of all medical and mental health practitioners. Records reveal each had attended the specialized medical training. Documentation for each medical and mental health practitioner's understanding of the training is recorded on the PREA Training Acknowledgement Form. The form is signed by each contractor at the conclusion of training. In addition to the specialized medical training, the Auditor verified each medical and mental health practitioner had been provided the training offered to all MRRJ staff members.</p> <p>Specialized medical training is provided to medical and mental health practitioners by Mediko. The Mediko specialized training includes detecting and assessing signs of sexual abuse and</p>

sexual harassment, preserving physical evidence, responding effectively and professionally to victims, and how to report allegations or suspicions of sexual abuse and sexual harassment. Each medical and mental health professional is provided the specialized training during their orientation and prior to performing services in the facility.

The Auditor conducted formal interviews with medical and mental health practitioners. Each Mediko employee informed the Auditor they had received both specialized training and the training offered to all MRRJ employees. Each stated they received the training upon hire before providing services. The Auditor questioned each regarding the training topics as required by this standard. The Auditor was informed how staff treat victims while preserving physical evidence. Medical professionals appeared to be well educated regarding the requirements of this standard.

Mediko medical personnel do not conduct forensic examinations in the facility.

**Conclusion:**

The Auditor concluded medical and mental health professionals at the Meherrin River Regional Jail have been appropriately trained. The facility maintains documentation that medical and mental health professionals have received specialized medical training and the same training offered to all MRRJ staff. The auditor conducted a review of MRRJ policies, procedures, training curriculum, training records and interviewed medical and mental health professionals and determined the agency meets the requirements of this standard.

115.41	<b>Screening for risk of victimization and abusiveness</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy requires an assessment of each inmate's risk of being sexually abused by other inmates or sexually abusive toward other inmates during the intake screening process. Policy requires the screening take place within 72 hours of arrival and is conducted using an objective screening instrument. The MRRJ intake screening minimally considers the following criteria to assess inmates for risk of sexual victimization:</p> <ul style="list-style-type: none"> <li>● Whether the inmate has a mental, physical, or developmental disability;</li> <li>● The age of the inmate;</li> <li>● The physical build of the inmate;</li> <li>● If the inmate has previously been incarcerated;</li> <li>● If the inmate's criminal history is exclusively nonviolent;</li> <li>● If the inmate has prior convictions for sex offenses against an adult or child;</li> <li>● If the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;</li> <li>● If the inmate has previously experienced sexual victimization;</li> <li>● The inmate's own perception of vulnerability; and</li> <li>● If the inmate is detained solely for civil immigration purposes.</li> </ul> <p>The facility is required by policy to reassess the inmate's risk of victimization or abusiveness no later than 14 days from the inmate's arrival. The agency's policy states, "Within 30 days of intake an inmate's risk level will be reassessed due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness."</p> <p>Facility staff are prohibited from disciplining an inmate for refusing to answer, or for not disclosing complete information in response to the risk screening. The facility policy requires management implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to victimization or abusiveness in order to ensure sensitive information is not exploited to the inmate's detriment by staff or other inmates. Responses to questions or other information may only be disseminated on a need to know basis and only through the Superintendent/designee or Health Services Administrator.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 20-21</p> <p>Classification PREA Questionnaire</p> <p>Medical Records</p> <p>Inmate Records</p> <p>Interviews with Staff</p>

## Interviews with Inmates

### **Analysis/Reasoning:**

The Auditor reviewed the agency's Classification PREA Questionnaire. The questionnaire includes all information as required by this standard. The questionnaire allows the Classification Officer to input information whenever an inmate answers yes to any question on the questionnaire. The Classification PREA Questionnaire includes 7 questions that require the Classification Officer to input his/her own observations of the inmate being assessed. The Classification PREA Questionnaire requires objectivity when screening inmates.

Each inmate that arrives at either Meherrin River Regional Jail facility is escorted into the intake area. During the intake process each inmate is screened by a security staff member and a medical practitioner. The Classification Officer meets with each inmate upon arrival at the facility. Each inmate is asked questions from the Classification PREA Questionnaire. The screening occurs in a private area normally within hours of the inmate's arrival to either facility. The Auditor conducted a review of 30 inmate records. Each inmate record included a completed Classification PREA Questionnaire. Each inmate had been appropriately screened within 72 hours of their arrival. The Auditor discovered the following determinations within the 30 records:

- 11 inmates who reported current or previous mental illness diagnosis;
- 2 inmates who reported a physical disability;
- 6 inmates who had current or previous charges of a sexual nature;
- 6 inmates who reported suffering sexual victimization;
- 4 inmates who identified as gay/lesbian/bisexual; and
- 1 inmate who identified as transgender.

While reviewing inmate records, the Auditor observed each file included an initial and reassessment of each inmate's level of risk for sexual victimization or abusiveness. Each reassessment was conducted within 30 days of the inmate's arrival. Reassessments were conducted by the Classification Officer. Further review revealed each inmate that reported suffering sexual victimization was offered a follow-up meeting with a mental health professional. Those who accepted the meeting had met with the mental health professional within 14 days.

The Auditor conducted a formal interview with Classification Officers at each facility. The Auditor discussed the risk screening process with Classification Officers. Classification personnel were asked if they use their professional judgement when determining an inmate's risk level. The Auditor was informed classification uses their professional judgement when conducting a risk screening and assessment of each inmate that enters the facility. Classification personnel were asked if they had received a request or referral to conduct a reassessment of an inmate. None had received a request or a referral for such. Each were asked if they had conducted reassessments of inmates following an allegation of sexual abuse. The Auditor was informed there have been no incidents that have required them to conduct a reassessment following an incident.

The Auditor asked classification personnel what they do if an inmate refuses to answer questions related to sexual abuse during the screening process. The Auditor was informed the

classification process continues and an appropriate classification decision is made. Any classification decision would be made in determination with the Classification Officer's professional judgement. The Auditor was informed classification would make those determinations based on the inmate's current behavior, a review of his/her history, physical stature and through conversations with the inmate. Classification personnel were asked if they discipline an inmate for refusing to answer questions related to sexual abuse during the risk screening. Classification personnel were aware inmates could not be disciplined for refusing or failing to answer questions related to sexual victimization.

The Auditor conducted formal interviews with staff at each facility. Staff were asked if they had access to the information obtained from the risk screening conducted by classification personnel. The Auditor determined those who make decisions had access and those who were not in a position to inform housing, work, education and programming decisions did not have access to the information. Each agency staff member is issued a unique username and password with select access to information maintained by the agency. Access to the information obtained from the risk screening is limited to medical and mental health practitioners, classification, and supervisors.

The Auditor conducted formal interviews with inmates. All inmates targeted for interviews and randomly chosen for interviews were asked if they had been asked questions as previously listed during the intake process. Most inmates stated they had been asked such questions during the booking process. Some inmates informed the Auditor they did not remember the questions asked while they were being booked into the agency facility. The Auditor asked each inmate if anyone at the facility had asked them the same questions after being booked into the facility. Inmates stated they had not been questioned again. Several inmates informed the Auditor they have been incarcerated in the facility multiple times and were questioned each time. Numerous inmates informed the Auditor they are questioned as such in every facility they have been incarcerated at.

The facility does not conduct a reassessment of vulnerability and aggressiveness upon transfer to another agency facility. Both agency facilities operate under the same policies and procedures. All information maintained in an inmate's record is accessible to staff at either facility. Inmates are issued a new agency handbook when they are transferred to another agency facility.

At the time of the Audit there were no inmates detained solely for immigration purposes.

**Conclusion:**

The agency's classification staff is attempting to discover inmates' level of risk of sexual victimization or sexual abusiveness during the booking process and within 30 days of an inmate's arrival based upon additional information, incidents and referrals. The Auditor reviewed the agency's policies, procedures, Classification PREA Questionnaire, inmate records and interviewed staff and inmates to determine the facility meets the requirements of this standard.

The Auditor made a recommendation to the agency to revise its policy language. The policy states, "Within 30 days of intake an inmate's risk level will be reassessed due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness." This statement restricts the facility to

conduct such assessments "within 30 days of intake." The Auditor discussed the restrictive policy statement with the PREA Coordinator and explained those assessments are required to be conducted at anypoint in an inmate's incarceration. The Auditor was informed the statement in the policy was an oversight.

115.42	<b>Use of screening information</b>
	<p data-bbox="248 168 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 536 365"><b>Auditor Discussion:</b></p> <p data-bbox="248 405 1481 562">The Meherrin River Regional Jail policy is to use information received from the risk screening to inform housing, bed, work, education, and program assignments to prevent inmates with the high risk of being sexually victimized from those at the risk of being sexually abusive. Policy requires individualized determinations be made to ensure the safety of each inmate.</p> <p data-bbox="248 607 1481 853">The MRRJ policy stipulates in deciding whether to assign a transgender or intersex inmate to a male or female block, and in making other housing and programming assignments, the MRRJ shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and the security needs of the Jail. Classification staff are required to seriously consider a transgender and intersex inmate's own views with respect to his or her own safety.</p> <p data-bbox="248 898 1481 1144">Classification is required to reassess placements of each transgender or intersex inmate to review any threats to safety experienced by the inmate at least twice each year. Policy requires transgender and intersex inmates be given the opportunity to shower separately from other inmates. Policy prohibits placing lesbian, gay, bisexual, transgender, or intersex inmates in dedicated units based solely on their identification or status unless in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmate.</p> <p data-bbox="248 1189 571 1225"><b>Evidence Relied Upon:</b></p> <p data-bbox="248 1256 858 1292">Policy - Prison Rape Elimination Act, pg. 21-22</p> <p data-bbox="248 1337 459 1373">Inmate Records</p> <p data-bbox="248 1417 699 1453">Classification PREA Questionnaire</p> <p data-bbox="248 1498 513 1534">Interviews with Staff</p> <p data-bbox="248 1579 555 1615">Interviews with Inmates</p> <p data-bbox="248 1659 545 1695"><b>Analysis/Reasoning:</b></p> <p data-bbox="248 1727 1481 2107">The Auditor reviewed 30 inmate classification records. Of the records reviewed there was one inmate who identified as transgender and 3 who identified as lesbian, gay or bisexual. The classification records reveal facility staff made individualized considerations when determining their housing, bed, work and other assignments to ensure each inmate was maintained safely in the facility. The assessment form considers an inmate's own views of their safety when determining assignments. The Auditor observed classification staff is utilizing information obtained from the risk screening to assign facility housing, bed, and work assignments to ensure those inmates are protected. When inmates submit a request to attend programs and educational classes the Classification and/or Programs Officer ensure's those at risk of victimization are not placed in a program with those identified as potential abusers.</p>

Classification staff considers an inmate's own perceptions of their safety before making classification decisions. The Classification PREA Questionnaire includes sections where the Classification Officer documents his/her own perceptions of the inmate. The Auditor conducted a formal interview with an inmate who identified as transgender and inmates who identified as gay, lesbian and bisexual. Each was asked if they were housed in a unit that is designated for LGBTI inmates. None were housed in a unit designated as such. The Auditor asked the transgender inmate if staff meet with the inmate to discuss the status of the inmate's incarceration. The Auditor was informed staff routinely meet with the inmate to discuss assignments. The Auditor was informed the Classification Officer is "really good" about checking on the status of the inmate. The Auditor asked the transgender inmate if mental health personnel have met with the inmate. The transgender inmate informed the Auditor the mental health professional does meet with the inmate.

The Auditor formally interviewed classification staff. The Auditor discussed the classification process with classification personnel at both facilities. Classification informed the Auditor they ask transgender inmates questions regarding their own perception regarding their safety in the facility. The Auditor asked classification if they meet with transgender inmates at least two times each year to assess their placements. The Auditor was informed classification meet with transgender inmates routinely to check on their status. The Auditor asked how classification document their meetings with the inmate. Formal meetings with the inmate are documented in the 90-day reclassification section of the inmate's file. The Auditor verified through the inmate's file meetings with the inmate are documented.

The auditor observed all housing units in both facilities during a detailed tour. While touring, the Auditor observed all shower and restroom areas. Transgender inmates can change clothes and use the restroom without staff of the opposite gender seeing them fully naked. The transgender inmate interviewed by the Auditor was asked if he has the opportunity to shower separately from other inmates. The transgender inmate stated each shower is protected with walls and a shower curtain.

At the time of the audit the Meherrin River Regional Jail was not under a consent decree, legal settlement, or legal judgement for the purpose of protecting lesbian, gay, bisexual, transgender or intersex inmates.

**Conclusion:**

The Auditor concluded classification staff is making individualized determinations when assigning inmate's housing, bed, work, programming and education assignments. The agency has appropriate policies, procedures and practices in place to protect those identified at high risk of victimization. Transgender and intersex inmates can shower separately from other inmates. The Auditor conducted a thorough review of policies, procedures, classification records, Classification PREA Questionnaires, made observations and interviewed staff and inmates to determine the facility meets the requirements of this standard.

115.43	<b>Protective Custody</b>
	<p data-bbox="248 168 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 536 365"><b>Auditor Discussion:</b></p> <p data-bbox="248 405 1481 734">The Mehrrin River Regional Jail prohibits placing inmates at high risk of sexual victimization in involuntary segregated housing unless an assessment of all available alternatives have been made, and a determination has been made that there is no available alternative means of separation from likely abusers. MRRJ policy requires inmate access to programs, privileges, education, and work opportunities to the extent possible for those placed in involuntary segregated housing who have been identified at risk of sexual victimization. Staff are required to conduct a review at least every 30 days to determine whether there is a continuing need for separation from the general population.</p> <p data-bbox="248 775 576 810"><b>Evidence Relied Upon:</b></p> <p data-bbox="248 848 815 884">Policy - Prison Rape Elimination Act, pg. 22</p> <p data-bbox="248 922 528 958">30 Day Review Form</p> <p data-bbox="248 996 480 1032">Housing Records</p> <p data-bbox="248 1070 515 1106">Interviews with Staff</p> <p data-bbox="248 1144 560 1180">Interviews with Inmates</p> <p data-bbox="248 1218 427 1254">Observations</p> <p data-bbox="248 1292 547 1328"><b>Analysis/Reasoning:</b></p> <p data-bbox="248 1366 1481 1570">The facility reported no inmate was placed in involuntary segregated housing for his/her protection as a result of being identified as high risk of sexual victimization. The Auditor reviewed housing and classification records and discovered no evidence an inmate had been identified at high risk of sexual victimization and placed in involuntary segregated housing as a result of such identification.</p> <p data-bbox="248 1608 1481 2114">The Auditor conducted formal interviews with classification staff. The Auditor discussed the process of placing an inmate identified at high risk of sexual victimization in involuntary segregated housing. The Classification Officer informed the Auditor an immediate assessment is conducted to view available housing alternatives. The Auditor was informed the Meherrin River Regional Jail has numerous housing units in both facilities and therefor can separate those identified at high risk of sexual victimization without resorting to involuntary segregated housing. The Auditor asked in the case an inmate was placed in involuntary segregated housing if they can attend programs, education, work and/or receive other privileges. The Classification Officer stated they do receive such as long as no security concerns exist. The Classification Officer was aware a monthly review must take place if involuntary segregated housing extended beyond 30 days. The Classification Officer was also aware the requirement to document restrictions on education, work, programs and privileges.</p>

The facility has a 30-day Reclassification form. The 30-day review form is utilized to document a 30-day review of those placed involuntarily in segregation for protection from sexual abuse. The form includes the following:

- Review date;
- Custody level;
- Placement reason;
- Are you having any problems in your current housing area;
- Do you feel at risk for being sexually assaulted/victimized;
- Are you aware of the sexual assault information provided on the PREA Notification form;
- Did you receive a copy of the PREA Notification form;
- Are you aware of your rights as a victim of sexual assault/abuse;
- Do you need me to assist you with learning the reading materials; and
- Warranted factors.

The Auditor was informed the facility has the option to send a detainee from one Meherrin River Regional Jail facility in the event the inmate cannot be protected in either facility. The Classification Officer informed the Auditor a recommendation could be made to transfer an inmate to the Pamunkey Regional Jail if he/she could not be housed safely in either facility.

The Auditor conducted a formal interview with an officer who supervises inmates in segregated housing. The officer was asked if inmates in segregated housing receive access to programs, privileges, work and education. The Auditor was informed inmates in segregated housing do have access to such. The officer was asked if restrictions are documented. The Auditor was informed restrictions to work, education, programs and privileges are documented and forwarded to the housing unit for staff to follow the restrictive order. The officer stated any restrictions made that aren't previously determined are noted in the housing unit logbook. The Auditor asked the officer if he has supervised an inmate in segregated housing who had been identified at high risk of sexual victimization and placed in segregated housing for his/her protection. The deputy was unaware of such.

The Auditor conducted a detailed tour of both facilities. Observations were made of each inmate housing unit. The Auditor observed numerous areas which can house inmates to ensure those identified at high risk of sexual victimization are protected from sexual abusers and without placing the inmate in involuntary segregated housing.

The Auditor conducted an interview with inmates who reported an allegation of sexual abuse within the previous 12 months. The Auditor asked each if his/her housing unit changed after making the allegation. Through interviews, the Auditor determined no inmate was placed in involuntary segregated housing for his/her protection. The Auditor asked each if he/she had any contact with the person who was alleged to have committed the act of sexual abuse. None of the inmates had further contact with their alleged abuser. One inmate had made an allegation against a staff member and has seen the staff member since making the allegation. The Auditor reviewed the investigative report and observed the allegation was unfounded.

The Auditor conducted formal interviews with a transgender and gay, lesbian and bisexual inmates. Each was asked if they had ever been placed in segregation involuntarily. None of the inmates had been placed in segregation against his/her request.

**Conclusion:**

The facility has appropriate procedures in place to ensure inmates identified at high risk of sexual victimization who are placed in involuntary segregated housing receive appropriate placement, reviews and other privileges. The Auditor reviewed MRRJ policies, procedures, classification records, housing records, made observations and interviewed staff and inmates to determine the MRRJ meets the requirements of this standard.

115.51	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy is to provide inmates with multiple internal ways to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates at the Meherrin River Regional Jail may report in the following manners:</p> <ul style="list-style-type: none"> <li>● Request Forms</li> <li>● Grievance Forms</li> <li>● Verbal Reporting</li> <li>● Sexual Abuse Hotline</li> <li>● Third-party reporting</li> </ul> <p>Facility staff are required to accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. The MRRJ provides staff the option of privately reporting sexual abuse and sexual harassment of inmates directly to the their supervisor or any other facility supervisor or by using the Sexual Abuse Hotline.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 22-24</p> <p>MOU with the Pamunkey Regional Jail</p> <p>MOU with The James House</p> <p>Agency Website</p> <p>Inmate Handbook</p> <p>Investigative Records</p> <p>Facility Posters</p> <p>Staff Training Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the agency's Inmate Handbooks. Inmates are informed they may report sexual harassment, sexual abuse, retaliation by staff or other inmates for reporting sexual harassment or sexual abuse, and neglected by staff in responding. The Inmate Handbook informs inmates they may report allegations by:</p>

- Request forms
- Grievance forms
- Verbal reporting
- Sexual abuse hotline (instructions provided)
- Third-party reporting

The Auditor reviewed the Memorandum of Understanding with The James House. The James House provides a 24-hour telephone crisis intervention counseling via a 24-hour hotline. The Auditor conducted a formal interview with a victim advocate with The James House. The advocate was asked if the agency would forward an allegation of sexual abuse or sexual harassment if an inmate reports an allegation through the hotline. The advocate informed the Auditor if the inmate request the advocate to notify the facility they would do so.

The Auditor reviewed the Memorandum of Understanding with the Pamunkey Regional Jail. The MOU is a mutual agreement to provide an avenue for both agency inmates to report allegations of sexual abuse. The MOU states the Pamunkey Regional Jail agrees to the following:

- To check for messages on the Meherrin River Regional Jail PREA Hotline at phone number (number provided);
- Upon receiving an allegation that an inmate was sexually abused while confined at Meherrin River Regional Jail and/or another facility, the Superintendent or designee that received the allegation shall notify the Superintendent or appropriate office of the agency where the alleged abuse occurred;
- To notify Meherrin River Regional Jail as soon as possible, but no later than 72 hours after receiving the allegation; and
- Pamunkey Regional Jail shall document that it has provided Meherrin River Regional Jail notification of the allegation.

The Memorandum of Understanding with the Pamunkey Regional Jail does not require the Pamunkey Regional Jail to "immediately forward" reports to the Meherrin River Regional Jail. The memorandum does not stipulates the Pamunkey Regional Jail will allow inmates to remain anonymous upon their request. The MRRJ Superintendent revised the Memorandum of Understanding with the Pamunkey Regional Jail on July 30, 2020 and now stipulates the Pamunkey Regional Jail agrees to the following:

- To check for messages on the Meherrin River Regional Jail PREA hotline at phone number (number provided in the MOU);
- Upon receiving an allegation that an inmate was sexually abused while confined at Meherrin River Regional Jail and/or another facility, the Superintendent or designee that received the allegation shall notify the Superintendent or appropriate office of the agency where the alleged abuse occurred;
- To notify Meherrin River Regional Jail immediately after receiving the allegation;
- Pamunkey Regional Jail shall document that it has provided Meherrin River Regional Jail notification of the allegation; and
- Pamunkey Regional Jail will allow the inmate to remain anonymous upon their request.

The Auditor participated in a detailed tour of both facilities. The tour included all inmate housing units and support areas. Observations were made of posters and postings throughout each facility that inform inmates about the agency's zero-tolerance to sexual abuse and sexual harassment and how to report allegations of sexual abuse and sexual harassment. The postings include the agency's available hotline number and informs inmates to push option 8 on the telephone. Inmates are not required to input a designated PIN number for identity purposes.

The Auditor reviewed staff training records. The agency's training includes the reporting avenues available to the inmate population. All staff are provided the training in orientation and during their annual in-service training. Staff are informed of their avenue for privately reporting allegations of sexual abuse and sexual harassment in the agency's policy.

The Auditor reviewed the Meherrin River Regional Jail website. The website includes a link to access its PREA information. The public has access to the MRRJ Prison Rape Elimination Act policy. The policy includes information how the public can make a report of sexual abuse or sexual harassment on behalf of an inmate. The telephone number for reporting such is included for the public. The public is informed of the agency that is accepting the third party reports on their behalf.

The Auditor conducted formal interviews with randomly chosen staff. Each staff member was asked if he/she is required to accept any and all reports of sexual abuse, sexual harassment, retaliation and staff neglect. Staff informed the Auditor they are required to accept such reports. Staff stated they are required to report allegations immediately to their Shift Commander and include the information on a written Incident Report. Each staff member was asked how they would privately report an allegation. The Auditor was informed staff would call the PREA Hotline or verbally inform a supervisor or command staff member.

The Auditor conducted formal interviews with randomly chosen and specifically targeted inmates. Inmates were asked to explain how they would report an allegation of sexual abuse, sexual harassment, retaliation, or staff neglect. An overwhelming majority informed the Auditor they would tell a staff member. The population has confidence in the MRRJ staff to handle the allegation appropriately. The inmates understood the available reporting avenues and are aware of the hotline, anonymous reporting and third-party reporting. Each inmate understood they could make an allegation through the formal grievance mechanism.

The Auditor reviewed investigative records. Investigative records included Incident Reports written by staff after learning of an allegation. The Incident Reports reveal staff are immediately reporting the information to their Shift Commander. The Auditor questioned staff during interviews regarding accepting verbal and anonymous reports. Staff informed the Auditor they are required to report any and all knowledge, suspicion or information related to sexual abuse and sexual harassment verbally and include the information on an Incident Report.

At the time of the Auditor there were no inmates detained solely for civil immigration purposes.

**Conclusion:**

The Meherrin River Regional Jail provides multiple ways for inmates to report allegations of sexual abuse and sexual harassment, including a public office who can immediately forward reports of sexual abuse and sexual harassment to the MRRJ. The facility requires staff to

accept, report and document all allegations of sexual abuse and sexual harassment. The Auditor reviewed the agency's policies, procedures, Inmate Handbook, postings, agency website, MOUs, investigative reports, training records, interviewed staff and inmates and determined the facility meets the requirements of this standard.

115.52	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail is not exempt from this standard as it maintains procedures to address inmate grievances alleging sexual abuse. Facility policy does not impose a time limit on any portion of a grievance alleging sexual abuse and does not impose a time limit when an inmate may file a grievance alleging sexual abuse. Inmates are not required to exhaust informal means or attempt to resolve with staff an alleged incident of sexual abuse. Inmates are not required to submit a grievance to a staff member who is the subject of complaint and the facility is prohibited from referring a grievance to a staff member who is the subject of complaint.</p> <p>MRRJ policy requires a final decision be rendered within 90 days of the initial filing. Policy allows for an extension up to 70 days to respond if the normal response time is insufficient to render an appropriate decision. The inmate must be notified in writing and provide a date by which a decision will be made. The Meherrin River Regional Jail allows third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates to assist inmates in filing requests for grievances relating to allegations of sexual abuse and to file such requests on behalf of the inmate. If the inmate declines third-party assistance in filing the grievance, facility personnel are required to document the inmate's decision to decline.</p> <p>MRRJ policy requires all emergency grievances alleging a substantial risk of imminent sexual abuse be immediately forwarded to the Shift Commander or their designee. The Shift Commander or designee is required to take immediate action on an issue and provide an initial response within 48 hours. A final decision is required to be provided within five calendar days. The MRRJ policy requires a copy of the emergency grievance and all responses to the PREA Coordinator.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 24-25</p> <p>Inmate Handbook</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the MRRJ Inmate Handbook. The Inmate Handbook includes the MRRJ grievance procedures. The handbook informs inmates they may report an allegation of sexual abuse through the grievance mechanism. The Auditor read the grievance section of the Inmate Handbook and found no information that informs inmates how the facility processes grievances related to sexual abuse or an imminent risk of sexual abuse.</p> <p>The Auditor conducted formal interviews with inmates. Inmates were asked to explain the</p>

various ways of reporting sexual abuse allegations. The majority of inmates asked were aware the facility allows them to report allegations of sexual abuse through the grievance mechanism. None of the inmates interviewed by the Auditor had filed a grievance alleging sexual abuse or alleging an imminent risk of sexual abuse. Inmates were aware they could file a grievance to report sexual abuse anonymously.

The Auditor conducted interviews with facility staff. Staff were asked if inmates could submit a grievance alleging sexual abuse and/or alleging an imminent risk of sexual abuse. Each staff member was aware inmates could file such grievances. Supervisors interviewed by the Auditor explained their responsibilities in responding to grievances alleging an imminent risk of sexual abuse. Supervisors informed the Auditor they take immediate action to ensure the inmates safety. The Auditor was informed an initial response is provided to the inmate within 48 hours and a final decision within 5 days. The Auditor asked what is included in the final written response. The Auditor was informed they include whether the inmate is at risk and the supervisor's actions taken in response to the allegation.

The Meherrin River Regional Jail reported no inmate submitted a grievance alleging sexual abuse or an imminent risk of sexual abuse within the previous 12 months.

**Conclusion:**

The Auditor determined the MRRJ has appropriate policies and procedures in place for addressing inmate grievances alleging sexual abuse and emergency grievances alleging an imminent risk of sexual abuse. Facility staff understand the agency's procedures and the inmate population is aware they can submit grievances alleging sexual abuse and/or risk of imminent sexual abuse. The Auditor reviewed the agency's policies, procedures, Inmate Handbook and conducted interviews with staff and inmates to determine the facility meets the requirements of this standard.

The Auditor recommends the agency consider updating it's Inmate Handbook to inform inmates how the agency processes and responds to grievances related to sexual abuse and an imminent risk of sexual abuse.

115.53	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail has a policy to offer and provide inmates with access to outside victim advocates for emotional supportive services related to sexual abuse that occurred in the facility. Inmates are provided mailing addresses and telephone numbers, including the toll-free hotline numbers of a rape crisis center. The facility ensures reasonable communications between inmates and the organization. Policy stipulates the facility ensures communications with such advocates are private, confidential, and privileged, to the extent allowable by Federal, State and local law. The policy requires the facility inform inmates to the extent such communications will be private, confidential, and/or privileged.</p> <p>Facility policy states, "The James House provides support, advocacy and education for inmates/victims who are affected by domestic violence, sexual violence and stalking. A representative from The James House will make referrals for assistance when returning to the community."</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 25</p> <p>PREA Inmate Acknowledgment</p> <p>MOU with The James House</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the agency's Memorandum of Understanding with The James House. The MOU stipulates The James House agrees to the following:</p> <ul style="list-style-type: none"> <li>• Services provided are free and confidential;</li> <li>• Provide twenty-four hour telephone crisis intervention counseling via 24 hour hotline;</li> <li>• Upon request of the victim or someone calling on behalf of the victim, have a trained advocate provide services to victims at forensic programs, hospitals, or law enforcement agency within a reasonable period of time;</li> <li>• Provide crisis intervention counseling, advocacy, information and referrals to victims of sexual violence detained in MRRJ;</li> <li>• If possible, provide legal advocacy to victims of sexual violence who participate in protective order hearings, preliminary hearings, sentencing hearings and any other relevant legal proceedings;</li> <li>• Report all services provided to detained sexual violence victims to an assigned point of contact at the Meherrin River Regional Jail;</li> </ul>

- Provide allied professional trainings as requested by the Meherrin River Regional Jail.

The Memorandum of Understanding stipulates the Meherrin River Regional Jail agrees to the following:

- Train Meherrin River Regional Jail staff on sexual violence and services available to detained victims;
- Educate detainees on the availability of services for victims of sexual violence and inform any detainee requesting services from The James House that advocate may be required to share information with a designated staff person at Meherrin River Regional Jail in as confidential a manner as possible;
- Provide telephone access to detainees who request sexual violence hotline crisis intervention services;
- Request a James House advocate for detained victims of sexual violence who are experiencing Rape Trauma Symptoms; and
- Allow The James House staff to conduct allied professional training to Meherrin River Regional Jail regarding sexual violence.

The Auditor conducted formal interviews with inmates who filed an allegation of sexual abuse and inmates who reported suffering sexual victimization in the community. Each was asked if they were aware of confidential support services. Some were not aware of confidential supportive services. Those inmates were asked if they were provided information upon their arrival in the booking area. They were provided the PREA Inmate Acknowledgement form. The inmates had not read the form and did not remember the information being on the form. The Auditor asked randomly selected inmates if they were aware of confidential supportive services. Most inmates were aware the facility makes confidential support services available. Those that were not aware had seen the posters in the housing units and were provided the information during booking.

The Auditor conducted an interview with an advocate from The James House. The advocate was asked to discuss the services provided to victims of sexual abuse at the Meherrin River Regional Jail. The advocate discussed the items agreed to in accordance with the MOU with the MRRJ. The advocate was asked if any inmate has contacted The James House within the previous 12 months to request services. The advocate was unaware of an inmate who attempted such.

The Auditor conducted a review of the PREA Inmate Acknowledgement form. The form includes a section titled, "Treatment Options for Assault Victims." This section of the form includes information informing inmates of the services offered through The James House. The telephone number and address to The James House are included on the PREA Inmate Acknowledgement form. The auditor observed a statement on the form that notifies inmates calls are not monitored or recorded.

The Auditor conducted an interview with a facility investigator. The investigator was asked if inmate victims have access to confidential support services. The investigator stated victims are informed of The James House services following an incident of sexual abuse. The facility's medical and mental health practitioners also discuss services with the inmate victim. The investigator stated The James House is contacted immediately following an incident of sexual abuse as they provide support during the forensic examination.

At the time of the audit there were no inmates detained solely for civil immigration purposes.

**Conclusion:**

The facility maintains documentation it provides emotional support services for sexual abuse victims through written agreements. Contact information with the organization is provided by intake personnel in the PREA Inmate Acknowledgement form. The Auditor reviewed the MRRJ policies, procedures, Memorandum of Understanding, PREA Inmate Acknowledgement form and interviewed staff and inmates to determine the MRRJ meets the requirements of this standard.

The Auditor recommends the agency consider adding the contact information of The James House to its Inmate Handbook.

115.54	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>It is the policy of the Meherrin River Regional Jail to accept reports of sexual abuse and sexual harassment from third parties. The policy states, "Third-party reports regarding sexual abuse or sexual harassment may be made to the Brunswick County Sheriff's Office at [number provided]." The policy requires the jails PREA policy be published on the agency's website.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 25</p> <p>Agency Webiste</p> <p>Inmate Handbook</p> <p>Posted PREA Materials</p> <p>Interviews with Investigator</p> <p>Interviews with Inmates</p> <p>Observations</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor conducted a review of the agency's Inmate Handbook. The handbook includes a section titled, "Inmate Rights." This section of the handbook includes information regarding the agency's policies towards sexual abuse and sexual harassment. The handbook informs inmates they may report allegations through a third-party. The handbook states, "If you are not comfortable reporting the incident to staff, you may report incidents to the PREA Hotline by dialing Option 8 on any inmate phone. You may also seek the support of a trusted friend or family member. Meherrin River Regional Jail will take reports from third parties on your behalf." Each inmate is provided an inmate handbook upon booking at both facilities.</p> <p>The Auditor reviewed the agency's website. The webiste includes a link to the Prison Rape Elimination Act policy. The policy directs the public to call the Sheriff's Office to make a third-party report of sexual abuse or sexual harassment. The telephone number for the Sheriff's Office is included.</p> <p>The Auditor participated in a detailed tour of both Meherrin River Regional Jail facilities. During the tour the Auditor observed PREA materials posted in all housing units and service areas. The MRRJ posted materials inform inmates they may have a third party make an allegation of sexual abuse and sexual harassment on their behalf.</p> <p>The Auditor conducted formal interviews with staff. Staff were asked about accepting reports of sexual abuse and sexual harassment. Each staff member stated they were required to accept all reports of sexual abuse and sexual harassment, including third party reports. Staff</p>

stated they immediately report the allegation to their supervisor and document the information on an Incident Report.

The Auditor conducted formal interviews with inmates. Each inmate was asked what avenues were available for making an allegation of sexual abuse or sexual harassment. The inmates stated they could tell a staff member, put the allegation in writing, or have another person make the allegation on their behalf. Each inmate understood how to have a third party file an allegation on their behalf.

The Auditor conducted a formal interview with a facility investigator. The investigator was asked in what ways he has received reports of sexual abuse and sexual harassment. The investigator explained in his response he has received third-party reports of sexual abuse. The Auditor was informed most third-party reports of sexual abuse are received through the sexual abuse hotline number.

**Conclusion:**

The Auditor determined the facility accepts all reports, including third party reports, of sexual abuse and sexual harassment. The public is informed through the facility's website how to make a third party report on behalf of inmates. The Auditor reviewed agency policy, procedures, website, posted PREA materials, Inmate Handbook, interviewed staff and inmates, made observations and determine the facility meets the requirements of this standard.

115.61	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>All MRRJ staff, contractors and volunteers are required to immediately report any and all knowledge, suspicion, or information regarding an incident of sexual abuse, sexual harassment, retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. The policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in MRRJ policies to make treatment, investigations and other security and management decisions, other than reporting to designated supervisors or officials.</p> <p>Medical and mental health practitioners are required to report sexual abuse and are required to inform inmates of their duty to report and the limitations of confidentiality at the initiation of services. The facility is required to ensure an allegation of an alleged victim under the age of 18 or an inmate considered a vulnerable adult under state or local vulnerability statute, is reported to the appropriate State or local services agency under applicable mandatory reporting laws.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 25-26</p> <p>Incident Reports</p> <p>Training Records</p> <p>Investigative Records</p> <p>Interviews with Medical Practitioners</p> <p>Interviews with Mental Health Practitioner</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed investigative records of inmates who filed an allegation of sexual abuse and sexual harassment. The Auditor observed Incident Reports in investigative records. The Incident Reports included allegations that were made verbally to staff. The auditor observed investigative records of allegations that were made anonymously and those made by third parties. Incident Reports reveal staff accepted a verbal report made by inmates and immediately reported the allegation to their supervisor. Supervisors ensured the inmates' safety and the facility investigated each allegation.</p> <p>The Auditor conducted formal interviews with randomly selected and specifically targeted staff</p>

at the Meherrin River Regional Jail. Each staff member was asked if they were required to report any and all knowledge, suspicion or information related to sexual abuse or sexual harassment. The Auditor was informed staff are required to report the information immediately to a supervisor. The Auditor asked each staff member if they were required to report knowledge, suspicion or information related to retaliation, staff neglect or a violation of duties which may have contributed to sexual abuse or sexual harassment. All staff informed the Auditor they were required to report such. Staff informed the Auditor they were required to document such allegations on an Incident Report. Staff informed the Auditor they submit incident reports promptly after an allegation.

During interviews with staff the Auditor questioned staff to gain an understanding of staff's ability to maintain confidentiality with any reported information obtained related to sexual abuse or sexual harassment. The Auditor asked staff to explain who they report or discuss details of a sexual abuse or sexual harassment allegation with. Staff informed the Auditor they only discuss details with supervisors, medical/mental health practitioners and investigators. Staff understood the agency's policy requiring them to discuss information with those who can make treatment, medical and housing decisions.

The Auditor conducted formal interviews with Mediko medical and mental health practitioners. Each was asked if they were required to report information, knowledge, or suspicions of sexual abuse, sexual harassment, retaliation, staff neglect or violations of responsibilities which may have contributed to an incident of sexual abuse. Each informed the Auditor they were required to report such immediately. The Auditor asked how they would report the information. Practitioners informed the Auditor they immediately report the information to the Shift Commander and submit a report regarding the information. Practitioners stated they are required to inform inmates of their duty to report and the limitations on confidentiality at the initiation of services. Inmates are provided a consent form at the initiation of services.

The Auditor asked medical and mental health practitioners who they report information related to a sexual victimization that occurred in a community setting to. Medical and mental health practitioners stated they do not report community victimization without obtaining written informed consent from the inmate. The Auditor asked each if there has been a situation where they had to report sexual victimization that occurred in a community setting. Medical and mental health practitioners stated they have not had a need to report such information. Each informed the Auditor they are mandatory reporters for youthful inmates and of victimization that occurred in a confinement setting. Practitioners stated they do not use a different consent form for youthful inmates and the facility does not house youthful inmates.

The Auditor conducted formal interviews with a facility investigator. The Auditor asked the investigator he had conducted investigations of allegations that were reported by third parties. The investigator stated he has conducted investigations into allegations made by a third party. The Auditor asked if he has conducted investigations that were made anonymously. The investigator has conducted anonymously reported investigations. The investigator stated he conducts a full investigation regardless of how the allegation is made. The investigator was asked if he/ attempts to discover if staff actions or lack thereof, contributed to an incident of sexual abuse. The Auditor was informed the investigator does attempt such.

The Auditor conducted formal interviews with randomly selected and specifically targeted inmates. Each inmate was asked if they were confident in staff's ability to maintain confidentiality of an allegation of sexual abuse after learning of a reported incident. Most

inmates stated the staff are professional and felt confident the staff would maintain confidentiality of the information. There were no youthful inmates housed at the facility for the Auditor to interview at the time of the audit.

The Auditor reviewed facility training curriculum. Training curriculum for staff and contractors includes reporting of sexual abuse and sexual harassment allegations. Each volunteer is required to read the agency's PREA training documents and sign an acknowledgement form. The training documentation includes information informing volunteers how to report allegations of sexual abuse and sexual harassment. The Auditor verified through training records each staff member, contractor and volunteer had received training how to report sexual abuse and sexual harassment information.

The Auditor was not able to interview a facility volunteer as volunteer services have been canceled to comply with facility operational changes due to COVID-19 mitigation practices. The Auditor did observe each volunteer had received training in their reporting requirements.

**Conclusion:**

The Auditor concluded staff, volunteers and contractors are aware of the MRRJ requirement to report any knowledge, suspicion or information related to sexual abuse and sexual harassment. Staff understands the requirement to maintain confidentiality with the information obtained of an allegation. Interviews with medical and mental health practitioners reveal they understand the requirements for reporting sexual abuse that occurred in a community setting and for youthful inmates. The Auditor reviewed agency policies, procedures, training records, investigative records and conducted interviews with staff, contractors and inmates to determine the facility meets the requirements of this standard.

115.62	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy requires facility staff take immediate action to protect an inmate after learning an inmate is subject to a substantial risk of imminent sexual abuse. The agency assesses each inmate for potential vulnerabilities and tendencies for perpetrating sexual abuse within 72 hours of arriving at the Meherrin River Regional Jail facilities. Classification Officers ensure inmates identified at a substantial risk of sexual abuse are housed safely in the facility.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 26</p> <p>Classification Records</p> <p>Investigative Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p>Observations</p> <p><b>Analysis/Reasoning:</b></p> <p>The facility reported no instance in the previous 12 months where facility personnel learned an inmate was identified at a substantial risk of imminent sexual abuse. There was no inmate who alleged an imminent risk of sexual abuse in the previous 12 months.</p> <p>The Auditor conducted a review of investigative records. Investigative records reveal staff take immediate action after learning of a sexual abuse incident. Reports reveal staff immediately separate an inmate from an alleged abuser following an allegation of sexual abuse. The Auditor conducted formal interviews with randomly selected staff and staff first responders. Each staff member was asked what actions they would take if learning an inmate was at a substantial risk of imminent sexual abuse. Staff informed the Auditor they would immediately remove the inmate from the potential threat and stay with him/her until a supervisor arrived. Staff stated they would immediately inform their supervisor of the incident.</p> <p>A review of inmate records reveal no alleged victim had been housed with an alleged perpetrator following an allegation of sexual abuse. The Auditor conducted formal interviews with inmates who made an allegation of sexual abuse at the facility. Each of those inmates were asked if they have been in contact with the alleged perpetrator following the allegation. Each stated they had not had further contact with the alleged perpetrator with the exception of one. The inmate made an allegation against a staff member. The allegation was unfounded by the investigator. Each was asked how quickly staff responded to their allegation of sexual abuse. The inmates informed the Auditor staff responded quickly. None of the alleged victims</p>

were placed in segregated housing as a result of their allegation.

The Auditor conducted formal interviews with facility supervisors. Facility supervisors were asked to explain what steps are taken to protect an inmate after learning the inmate is at a substantial risk of imminent sexual abuse. The Auditor was informed the potential victim and potential aggressor would be separated from one another. The facility investigator would immediately be notified so an investigation could begin to determine the risk.

The Auditor conducted formal interviews with randomly selected and specifically targeted inmates. The Auditor asked each if he/she felt safe in the facility. All inmates, excluding one, stated they felt safe in the facility. The inmate stated he did not trust staff and he just did not feel safe in jail. The Auditor asked each if they felt confident in staff's ability to maintain their safety. A majority of inmates were confident in staff's ability to maintain their safety in the facility.

The Auditor participated in a detailed tour of both Meherrin River Regional Jail facilities. The Auditor observed multiple housing units in both facilities that provide an opportunity to ensure inmates who are identified at a substantial risk of imminent sexual abuse could be housed safely from a potential aggressor. The facility has the option to transfer inmates from one facility to the other or to transfer inmates to the Pamunkey Regional Jail if the inmate could not be housed safely in the facility.

**Conclusion:**

The Auditor concluded the MRRJ takes immediate and appropriate actions to ensure the protection of inmates who are identified at a substantial risk of imminent sexual abuse. The Auditor reviewed agency policy, procedures, classification records, investigative records, conducted interviews with staff and inmates, made observations and determined the MRRJ meets the requirements of this standard.

115.63	<b>Reporting to other confinement facilities</b>
	<p data-bbox="252 168 901 201"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 246 526 280"><b>Auditor Discussion</b></p> <p data-bbox="252 324 534 358"><b>Auditor Discussion:</b></p> <p data-bbox="252 392 1484 683">The MRRJ policy requires the Superintendent to notify the Superintendent or appropriate office of the agency where an alleged sexual abuse occurred upon receiving an allegation that an inmate was sexually abused while confined at another facility. Policy requires the notification be made as soon as possible, but no later than 72 hours after receiving the notification. The MRRJ staff is required to document the notification. The MRRJ policy is to ensure an allegation received by another agency is investigated in accordance with MRRJ policy.</p> <p data-bbox="252 728 574 761"><b>Evidence Relied Upon:</b></p> <p data-bbox="252 795 813 828">Policy - Prison Rape Elimination Act, pg. 26</p> <p data-bbox="252 873 510 907">Interviews with Staff</p> <p data-bbox="252 952 542 985"><b>Analysis/Reasoning:</b></p> <p data-bbox="252 1019 1460 1176">The Meherrin River Regional Jail reported there were no allegations received that an inmate had allegedly been sexually abuse while confined at another facility. The facility reported there were no notifications received from another facility that a former MRRJ inmate alleged sexual abuse while incarcerated at the Meherrin River Regional Jail.</p> <p data-bbox="252 1220 1476 1601">The Auditor conducted formal inteviews with MRRJ staff. Each staff member was asked what actions they take if an inmate alleges to have been sexual abused while confined at another facility. Each staff member stated they would immediately report the allegation to their supervisor and submit an Incident Report including the details of the allegation as reported to them. The Auditor asked facility supervisors what their actions would be after receving such information. The Auditor was informed the agency investigator would immediately be notified. The investigator stated he would ensure the superintendent is notified so proper notification could be made in a timely manner. The investigator stated he would conduct an investigation into the allegations.</p> <p data-bbox="252 1646 1452 1713">The agency's command staff are aware of the notification and investigatory requirements of this standard. Notifications are made by telephone and through email.</p> <p data-bbox="252 1758 422 1792"><b>Conclusion:</b></p> <p data-bbox="252 1825 1476 2116">The MRRJ understands the requirement to report allegations to other confinement facilities and to ensure allegations received are investigated by the facility. Staff at the Meherrin River Regional Jail understand the agency's requirement to immediately report allegations of sexual abuse and sexual harassment so allegations can be investigated. The Auditor reviewed the agency's policies, procedures and conducted interviews with agency staff and determined the facility has appropriate procedures in place to comply with this standard. The Auditor determined the agency meets the requirements of this standard.</p>

115.64	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail maintains a policy that requires the first security staff member to respond to an alleged sexual abuse perform the following steps:</p> <ul style="list-style-type: none"> <li>• Separate the alleged victim and abuser;</li> <li>• Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;</li> <li>• If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and</li> <li>• If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure 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.</li> </ul> <p>MRRJ policy requires if the first responder is not a security staff member, the responder will request that the alleged victim not take any actions that could destroy physical evidence, and then notify a security staff member.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 26-27</p> <p>Coordinated Response Plan</p> <p>Training Records</p> <p>Investigative Reports</p> <p>Interviews with Security First Responders</p> <p>Interviews with Non-Security Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor conducted interviews with security and non-security staff responders. All security first responders were asked to explain the actions they take when responding to a sexual abuse incident. First responders stated they would maintain separation of the victim and abuser and immediately notify the Shift Commander. Security staff stated they would request the victim and ensure the abuser not shower, eat, use the restroom, brush their teeth, drink or take any actions that could destroy physical evidence. The Auditor asked each what action they take regarding the crime scene. Staff stated they ensure the crime scene is secured.</p>

The Auditor asked each if they knew who would be allowed in the crime scene to process the evidence. Staff understood the Sheriff's Office would process evidence from the crime scene.

The Auditor reviewed the MRRJ Coordinated Response Plan. The Coordinated Response Plan includes the required actions of security and non-security first responders to incidents of sexual abuse. The Auditor observed the bulleted items above listed in the MRRJ Coordinated Response Plan. The Auditor reviewed the agency's training records. Training curriculum includes first responder duties of both security and non-security personnel. The Auditor observed all staff, contractors and volunteers have been trained to appropriately respond to incidents of sexual abuse.

The Auditor conducted formal interviews with non-security first responders. Non-security first responders informed the Auditor they would immediately notify a security member and ask the victim not take actions that would destroy physical evidence. The Auditor asked non-security first responders if they know what actions would lead to the destruction of forensic evidence. Each were aware that brushing teeth, using the bathroom, bathing, eating and drinking could potentially destroy physical evidence. Non-security first responders stated they would stay with the alleged victim until security staff arrived.

The MRRJ reported no allegations of sexual abuse were received within the previous 12 months. There were no instances that required a security staff member follow the first responder duties as required by this standard. There were no instances that required a non-security staff member follow the first responder duties as required by this standard. The Auditor reviewed investigative records that reveal staff enact quickly to allegations of sexual harassment and sexual misconduct. Investigative records reveal staff immediately separate inmates after making an allegation of sexual misconduct. Interviews with staff reveal they are aware of the requirements as a first responder following an incident of sexual abuse.

Each staff member interviewed by the Auditor was asked how they preserve evidence of a crime scene. Staff stated they would either secure access to the area or position a staff member in the area to ensure no one enters the crime scene. Staff stated the population would be locked down following the incident until the evidence could be processed. The Auditor asked how they document their actions. Each staff member stated they are required to submit an Incident Report and required to include a chronological log of the events in the crime scene in the unit logbook. The Auditor asked who would be allowed into the crime scene. Staff at the Alberta facility stated the Brunswick County Sheriff's Office and staff at the Mecklenburg facility informed the Mecklenburg Sheriff's Office investigators would process the crime scene.

The Auditor conducted formal interviews with Mediko medical personnel. Medical personnel have been trained to treat an inmate while preserving physical evidence. Medical personnel stated their priority is treating life threatening injuries. The Auditor asked how they treat an inmate with injuries. The Auditor was informed if the injuries are not life threatening treatment would ensue after the forensic examination. The Auditor was informed if the victim did not have injuries they would simply take vital signs and speak to the inmate prior to transporting the victim for a forensic examination. The Auditor was informed any clothing or other evidence removed from the victim would be provided to the Sheriff's Office investigator if treating a victim with life threatening injuries.

At the time of the audit there were no inmates at the facility who made an allegation of sexual abuse. The Auditor conducted a formal interview with inmates who made allegations of sexual misconduct. The inmates informed the Auditor staff responded quickly to their allegation and separated them from the alleged perpetrator. Inmates stated they did speak to a facility investigator following their allegation. The Auditor asked each inmate if he/she had further contact with the alleged perpetrator. One inmate stated he has seen his alleged perpetrator who was as staff member. A review of the investigative record revealed the allegation was an unfounded allegation of sexual misconduct.

**Conclusion:**

The Auditor determined both security and non-security staff are knowledgeable in their duties as first responders to incidents of sexual abuse. The Auditor reviewed agency policy, procedures, coordinated response plan, training records, investigative records, interviewed staff, inmates and determined the facility meets the requirements of this standard.

115.65	<b>Coordinated response</b>
	<p data-bbox="248 168 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 536 365"><b>Auditor Discussion:</b></p> <p data-bbox="248 405 1453 521">The agency's policy includes a written plan to coordinate the actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership</p> <p data-bbox="248 562 576 598"><b>Evidence Relied Upon:</b></p> <p data-bbox="248 638 815 674">Policy - Prison Rape Elimination Act, pg. 27</p> <p data-bbox="248 714 619 750">Coordinated Response Plan</p> <p data-bbox="248 790 480 826">Training Records</p> <p data-bbox="248 866 512 902">Interviews with Staff</p> <p data-bbox="248 943 555 978">Interviews with Inmates</p> <p data-bbox="248 1019 528 1055"><b>Anlysis/Reasoning:</b></p> <p data-bbox="248 1095 1445 1162">The Meherrin River Regional Jail has developed a written Coordinated Response Plan. The MRRJ Coordinated Response Plan includes actions of the following personnel:</p> <ul data-bbox="300 1225 863 1641" style="list-style-type: none"> <li>● Volunteers;</li> <li>● Contractors;</li> <li>● Support Staff;</li> <li>● Security Staff;</li> <li>● Shift Commander;</li> <li>● Captain of Security (PREA Coordinator);</li> <li>● Staff First Responders;</li> <li>● Medical and Mental Health Practitioners;</li> <li>● Investigators; and</li> <li>● Facility Leadership</li> </ul> <p data-bbox="248 1682 1481 2098">The Auditor conducted formal interviews with facility staff and contractors. First responders, medical and mental health practitioners, investigators, supervisors and facility leadership were asked questions related to their specific duties in response to a sexual abuse incident. Each person interviewed was knowledgeable regarding their specific duties as required in the MRRJ Coordinated Response Plan. The Auditor determined the facility has preaped its staff to take appropriate actions in response to sexual abuse. The Auditor found facility staff, volunteers and contractors have been trained in their responsibilities in response to an allegation of sexual abuse. The agency includes elements of its coordinated response plan in training efforts. The Auditor verified all agency personnel, volunteers and contractors had received the training.</p>

There were no inmates incarcerated at the time of the audit who filed an allegation of sexual abuse. The facility reported no allegations of sexual abuse were received in the past 12 months. The Auditor conducted formal interviews with inmates who filed an allegation of sexual misconduct. Through interviews the Auditor determined staff immediately responded and ensured the safety of each inmate who filed an allegation of sexual misconduct. No reported incident required staff to take first responder duties as required by the first responder standard.

**Conclusion:**

The Auditor determined the facility maintains an appropriate response plan that coordinates the actions of personnel following an incident of sexual abuse and trained its personnel to follow such plan. Based on a review of the agency's policies, procedures, coordinated response plan, training records, and interviews with staff and inmates, the Auditor determined the MRRJ meets the requirements of this standard.

The Auditor made a recommendation for the facility to consider adding the medical and mental health practitioner response efforts of its Coordinated Response Plan to agency training for medical and mental health contractors. In addition to Mediko provided training, this would allow medical and mental health contractors additional knowledge regarding their responsibilities under the agency's Coordinated Response Plan.

115.66	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 536 360"><b>Auditor Discussion:</b></p> <p data-bbox="252 405 1469 819">The Meherrin River Regional Jail has a policy that prohibits the agency from entering into a collective bargaining agreement that limits 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. The agency's policy stipulates, "Nothing in this standard shall restrict the entering into or renewal of agreements that limit the conduct of the discipline process, as long as such agreements are not inconsistent with the provisions of 9A-08 and 9A-09; or whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated."</p> <p data-bbox="252 864 571 898"><b>Evidence Relied Upon:</b></p> <p data-bbox="252 931 858 965">Policy - Prison Rape Elimination Act, pg. 27-28</p> <p data-bbox="252 1010 1098 1043">Virginia Code 40.1 - 57.2 Prohibition against collective bargaining</p> <p data-bbox="252 1088 512 1122">Interviews with Staff</p> <p data-bbox="252 1155 544 1189"><b>Analysis/Reasoning:</b></p> <p data-bbox="252 1234 1453 1480">Virginia Code 40.1-57.2 stipulates, "No state, county, municipal, or like governmental officer, agent or governing body is vested with or possesses any authority to recognize any labor union or other employee association as a bargaining agent of any public officers or employees, or to collectively bargain or enter into any collective bargaining contract with any such union or association or its agents with respect to any matter relating to them or their employment or service."</p> <p data-bbox="252 1525 1477 1715">The Meherrin River Regional Jail has not entered into any agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. There were no allegations of sexual abuse against a staff member alleged during the previous 12 months.</p> <p data-bbox="252 1760 1469 1839">Interviews with staff reveal they do not participate with or are members of any organization or agency responsible for collective bargaining on their behalf.</p> <p data-bbox="252 1883 424 1917"><b>Conclusion:</b></p> <p data-bbox="252 1951 1430 2074">The Auditor concluded the MRRJ has not entered into any collective bargaining that would restrict its ability to remove staff sexual abusers from contact with inmates. The Auditor determined the facility meets the requirements of this standard.</p>

115.67	<b>Agency protection against retaliation</b>
	<p data-bbox="248 168 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 536 365"><b>Auditor Discussion:</b></p> <p data-bbox="248 405 1458 562">The Meherrin River Regional Jail policy is to ensure the protection of inmates and staff who report sexual abuse of sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other staff or inmates. The agency requires the following protection methods in its policy:</p> <ul data-bbox="300 633 1445 835" style="list-style-type: none"> <li>• Housing changes;</li> <li>• Transfers for inmate victims or abusers;</li> <li>• Removal of alleged staff or inmate abusers from contact with victims; and</li> <li>• Emotional support services for inmates or staff members who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with an investigation.</li> </ul> <p data-bbox="248 875 1473 1249">The Meherrin River Regional Jail has designated the Classification Officers responsible for monitoring for acts of retaliation. The agency's policy requires monitoring the conduct and treatment of inmates or staff who reported sexual abuse and 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. The Classification Officer is required to monitor for at least 90 days following a report of sexual abuse. If the Classification Officer determines a need to continue monitoring, the policy requires the monitoring continue beyond the 90 days. The staff member is required by policy to act promptly to remedy any retaliation. The items monitored by the Classification Officer include the following:</p> <ul data-bbox="300 1321 799 1523" style="list-style-type: none"> <li>• Discipline reports;</li> <li>• Housing changes;</li> <li>• Program changes;</li> <li>• Negative performance reviews; and</li> <li>• Reassignments of staff.</li> </ul> <p data-bbox="248 1563 1445 1720">Policy requires the the monitoring of staff and inmates to include periodic status checks and the monitoring will terminate if the agency determines the allegation is unfounded by the agency investigator. The MRRJ is required to take appropriate action if any other individual who cooperates with the facility investigator expresses a fear of retaliation.</p> <p data-bbox="248 1760 574 1796"><b>Evidence Relied Upon:</b></p> <p data-bbox="248 1836 815 1872">Policy - Prison Rape Elimination Act, pg. 28</p> <p data-bbox="248 1912 533 1948">Investigative Records</p> <p data-bbox="248 1989 512 2024">Interviews with Staff</p> <p data-bbox="248 2065 557 2101">Interviews with Inmates</p>

**Analysis/Reasoning:**

The Meherrin River Regional Jail has an appropriate policy to ensure inmates and staff are monitored and protected from acts of retaliation by staff or other inmates. The MRRJ has designated its Classification Officers responsible for monitoring for acts of retaliation. The Auditor conducted a formal interview with a Classification Officer assigned to each facility who are responsible for monitoring retaliation. The Auditor asked each staff member to explain how retaliation monitoring is conducted at the facility. The retaliation monitors explained they review disciplinary charges, housing changes, program changes, grievances, Incident Reports, classification actions, evaluations and shift assignments. The Auditor asked each monitor if they are required to meet with inmates or staff who allege or who are being monitored for retaliation. Each monitor stated they do meet with those being monitored for retaliation. The Auditor was informed status checks are conducted with the individual. When asked how often each Classification Officer meets with the individual the Auditor was informed they will formally meet with the individual at least monthly. Each monitor explained they would informally meet with the individual at least weekly. Each monitor documents their contacts with the individual in the electronic record.

The Auditor conducted a review of investigative records. The facility received 8 allegations during the previous 12 months. Each allegation was unfounded by the facility investigator. There were no inmates who files an allegation of sexual abuse, sexual misconduct or sexual harassment that were substantiated or unsubstantiated within the previous 12 months. The Auditor conducted formal interviews with inmates who filed an allegation of sexual misconduct. Each was asked if he/she met with staff after making the allegation. The inmates informed the Auditor they met with investigators and a Classification Officer following the allegation. The Auditor asked how Classification Officers are notified when they need to monitor inmates or staff for acts of retaliation. The Auditor was informed the agency investigator informs the Classification Officer who needs to be monitored.

The Auditor asked each Classification Officer what actions they take to ensure the protection of an inmate. The Auditor was informed the initial response is to make a housing change. Each was asked if they reviewed or changed assignments to work, education or programming. Classification Officers stated those items are reviewed to ensure the protection of the inmate. Each Classification Officer has the ability to recommend an inmate be transferred to the other agency facility in the event the inmate could not be housed safely. When staff are being retaliated against, the Classification Officer meets with command staff to develop a recommendation and solution to the retaliation.

Each Classification Officer was asked if they were currently monitoring any inmates or staff for retaliation. There were no inmates or staff being monitored. The facility was not required to monitor any staff member or inmate for retaliation in the past 12 months.

**Conclusion:**

The Auditor determined the facility has appropriate policies and practices in place to ensure staff and inmates are protected from retaliation. The Auditor reviewed the MRRJ policies, procedures, investigative records, conducted interviews with staff and inmates and determined the facility meets the requirements of this standard.

115.68	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail requires any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of MRRJ policy (9A-05).</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 28</p> <p>Interviews with Segregation Housing Staff</p> <p>PREA 30-Day Reclassification Form</p> <p>Interviews with Inmates</p> <p>Classification Records</p> <p>Observations</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the 9A-05 section of the agency's Prison Rape Elimination Act policy. The MRRJ policy is not to place inmates in involuntary segregated housing for the protection from sexual abuse unless no other available alternatives of housing exist. The policy allows such inmates access to programs, privileges, education and work opportunities to the extent possible. Agency policy requires a review every 30 days to determine whether there is a continuing need for separation from the general population.</p> <p>The agency's policy does not stipulate the facility can place an inmate in involuntary segregated housing for up to 24 hours if an immediate assessment cannot be made. The policy does not stipulate staff clearly document the basis for concern for the safety of the inmate. The policy also does not require staff document the reason why no alternative means of separation exist or the alternative means that were considered. Furthermore the policy does not stipulate written justification for the opportunities that have been limited, the duration for the limitation and the reason for limitation when access to programs, work, education or privileges have been limited.</p> <p>The Auditor conducted formal interviews with staff who supervise inmates in the segregated housing unit. The Auditor asked if staff supervised an inmate who has been placed in segregated housing after allegedly suffering sexual abuse for their protection. Each informed the Auditor they had not supervised an inmate in the segregated housing area strictly for the protection from sexual abuse. Staff were asked if inmates in the segregated housing have access to programs, privileges, education and work opportunities. The Auditor was informed they have access to such if no security considerations exist.</p>

The Auditor conducted formal interviews with supervisors. The Auditor asked if the reasons for restrictions of programs, privileges, education and work of inmates in segregated housing are documented. Supervisors informed the Auditor every aspect of the inmate's placement in segregation is documented, including any restrictions that may apply. The Classification Officer maintains written documentation in the inmate's file. Any restrictions are forwarded to the housing unit so staff supervising the inmate are aware of the restriction. The Auditor was informed an inmate's status in segregation is reviewed every 30 days by the Classification Officer. The Classification Officer documents the review on the PREA 30-Day Reclassification form. The Auditor was informed the facility has numerous housing units and therefore does not typically have the need to place an inmate in segregated housing for the protection from sexual abuse. No staff member interviewed could recall supervising an inmate placed in segregated housing for the protection from sexual abuse.

There were no inmates housed at the facility who made an allegation of sexual abuse in the previous 12 months. The facility reported receiving no allegations of sexual abuse in the previous 12 months. The Auditor conducted formal interviews with inmates who filed an allegation of sexual misconduct. Each was asked if they were placed in segregated housing after making the allegation. No inmate had been placed in segregation. The Auditor interviewed inmates who had been victimized by sexual abuse in the community setting. None had been placed in segregation for their protection. The facility reported no inmates were identified at high risk of sexual victimization in the previous 12 months.

The Auditor conducted a detailed tour of both Meherrin River Regional Jail facilities. The Auditor observed numerous housing units available for the facility to house inmates without having to place them in involuntary segregated housing. The agency has the option to transfer inmates between the two facilities to ensure inmates are housed safely without placing them in involuntary segregation.

**Conclusion:**

The agency's policy includes some elements of PREA standard 115.43 to ensure sexual abuse victims receive privileges, programs, education and work opportunities if a victim is placed in segregated housing for the protection from sexual abuse. The Auditor reviewed the agency's policies, procedures, classification records, PREA-30-day Reassessment Form, interviewed staff and inmate, made observations and determined the agency meets the requirements of this standard.

The Auditor made a recommendation for the facility to consider updating its policy to include all elements of PREA standard 115.43. The addition to the policy would ensure supervisors and classification personnel are clear on the documentation and practices that must be met to comply with PREA standard 115.43 and 115.68 in the event an inmate requires involuntary segregation for his/her protection from sexual abuse.

115.71	<b>Criminal and administrative agency investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Auditor Discussion:</b></p> <p>The agency conducts administrative investigations only. All criminal allegations of sexual abuse and sexual harassment are referred to the Brunswick County Sheriff's Office for the Alberta facility and the Mecklenburg County Sheriff's Office for the Mecklenburg facility. The MRRJ has a Memorandum of Understanding with both Sheriff's Offices to conduct criminal investigations into allegations of sexual abuse at the applicable facility. The MRRJ policy is to ensure all allegations of sexual abuse and sexual harassment are investigated promptly, thoroughly, and objectively. The MRRJ requires its investigators receive specialized training in conducting sexual abuse investigations in a confinement facility.</p> <p>Meherrin River Regional Jail investigators are required to gather and preserve direct and circumstantial evidence, available physical and DNA evidence, and available electronic monitoring data. Policy requires the investigator interview alleged victims, suspected perpetrators, and witnesses and will review prior complaints and reports of sexual abuse involving the suspected perpetrator. Policy prohibits compelled interviews until consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.</p> <p>Investigators are required to assess the credibility of an alleged victim, suspect, or witness on an individual bases and may not determine credibility on the person's status as an inmate or staff member. Agency policy prohibits requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation. When conducting administrative investigations, investigators must attempt to determine if staff actions or failures to act contributed to the abuse.</p> <p>Policy requires the following be documented in administrative investigation reports:</p> <ul style="list-style-type: none"> <li>● Description of the physical evidence;</li> <li>● Description of the testimonial evidence;</li> <li>● The reason behind credibility assessments; and</li> <li>● Investigative facts and findings.</li> </ul> <p>Policy requires criminal investigative reports be documented in written reports that include a thorough description of physical, testimonial and documentary evidence and attach copies of all documentary evidence if applicable. All written reports retained by the facility will be kept for as long as the alleged abuser is incarcerated or is employed by teh agency, plus five (5) years. Policy requires the MRRJ to cooperate with outside investigators and remain informed about the process of the investigation.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 29-30</p>

MOU with Brunswick County Sheriff's Office

MOU with Mecklenburg County Sheriff's Office

Investigative Records

Training Records

Interview with Investigator

Interviews with Inmates

Observations

**Analysis/Reasoning:**

The Auditor conducted a review of the Memorandums of Understanding with the Mecklenburg and Brunswick County Sheriff's Offices. Each memorandum stipulates the Sheriff's Offices agree to conduct criminal investigations of sexual abuse in the applicable facility. Each memorandum stipulates the Sheriff's Offices agree to inform the MRRJ administration regarding the process of the criminal investigation. The MRRJ agrees to notify the Sheriff's Offices regarding allegations of sexual abuse.

The Auditor conducted a formal interview with the agency investigator. The investigator discussed the procedures utilized when conducting sexual abuse investigations. The Investigator begins with a review of information concerning the alleged victim and abuser. During the investigation he interviews the alleged victim, perpetrator and all witnesses, including staff witnesses. The Auditor asked what information is reviewed concerning the victim and abuser. The Investigator stated he reviews criminal and institutional history, grievances, discipline history, Incident Reports, Request Forms, video footage, telephone records and any other relevant information. The investigator was asked how he determines the credibility of a witness, abuser and witnesses. The Auditor was informed credibility is based on a review of documents, information, video footage, phone records, and statements made during the interview and subsequent interviews.

The Investigator was asked if he attempts to determine if staff actions or failure to act may have contributed to an incident of sexual abuse. The Investigator stated he does attempt to determine if staff actions or lack thereof contributed to the incident. The Auditor asked the Investigator what types of evidence he attempts to gather. The Auditor was informed the Investigator gathers staff reports, housing records, logs, video footage, telephone records, grievances, discipline records, testimonial evidence and any other relevant documents or information. The Investigator was asked when he begins investigative efforts. The Auditor was informed the Investigator begins efforts immediately. As the agency has only one Investigator, the Auditor asked how investigations are conducted when the Auditor is off duty. The Investigator stated he is called into the facility. When asked how they are conducted when the Auditor is on vacation or out of town, the Investigator stated a Sheriff's Office Investigator would cover for him.

The Auditor toured the area where investigative records are maintained. The agency Investigator maintains his records securely from other staff in his office. Electronic data is securely maintained on his computer that requires an individual username and password.

Printed documents and files are maintained in a cabinet in the Investigators locked office. The Investigator was asked how long he maintains investigative records. The Auditor was informed the data is maintained for 5 years after the abuser has either been released or is no longer employed by the MRRJ. The Investigator was asked if he requires the victim to submit to a polygraph examination. The Auditor was informed the MRRJ does not polygraph alleged victims or use any other truth telling devices.

The Auditor asked the agency Investigator if he has conducted an investigation that was reported anonymously or by third-party. The Investigator has conducted such investigations. The Investigator stated he attempts to investigate every allegation to the fullest extent no matter how it is reported. The Investigator was asked to explain the investigative process if an inmate is released or a staff member terminates employment. The Investigator stated he continues with the investigation as normal and will attempt to call a former staff member at their residence. He stated he will travel to another facility if an inmate is incarcerated at another facility or attempt to call them at their home. The Investigator will coordinate with the Sheriff's Office if need be.

The Investigator was asked to explain his role when an outside agency conducts investigations in the facility. The Investigator stated he coordinates efforts with the Sheriff's Office and assists when asked to do so by the Sheriff's Office Investigator. He communicates with the Sheriff's Office and attempts to remain informed during the investigative and prosecutorial efforts.

The Auditor reviewed investigative records from the previous 12 months. Each investigation was conducted by a facility trained investigator. The Auditor observed investigative reports include physical and circumstantial evidence and documented the investigator's interviews with alleged victims, perpetrators and witnesses. Investigative records include a review of video monitoring when applicable and include efforts to reveal if staff actions or lack thereof, contributed to an incident of sexual abuse or sexual harassment. The Auditor determined each investigation was conducted promptly, objectively and thoroughly.

The Auditor conducted a review of the Meherrin River Regional Jail training records. Records reveal the agency's Investigator has received specialized training to conduct sexual abuse investigations in a confinement setting.

The Auditor conducted formal interviews with inmates who made allegations during the previous 12 months. Each inmate was asked if they met with the facility investigator after making the allegation. Each inmate stated the facility investigator did meet with them. When asked how long it took before the investigator spoke to them, the Auditor was informed the investigator met with them quickly.

No department of justice component is responsible for conducting investigations in either Meherrin River Regional Jail facility.

The facility received no allegations that were referred for criminal investigation in the previous 12 months.

**Conclusion:**

The Auditor determined the Meherrin River Regional Jail investigator is conducting appropriate, objective and thorough sexual abuse and sexual harassment investigations. The Investigator has received appropriate training to conduct sexual abuse and sexual harassment

investigations in a confinement setting. Each allegation in the previous 12 months was investigated by a trained facility Investigator. The facility refers all criminal allegations to the local Sheriff's Office for criminal investigation. The Auditor reviewed agency policy, procedures, investigative records, training records, Memorandums of Understanding, made observations, interviewed staff and inmates to determine the facility meets the requirements of this standard.

115.72	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail has a policy that imposes no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The policy states, "The Jail will not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated."</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 30</p> <p>Interview with Investigator</p> <p>Investigative Reports</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor conducted a formal interview with the agency's sexual abuse investigator. The investigator informed the Auditor the agency's policy requires the use of preponderance as the standard of evidence to substantiate an allegation of sexual abuse or sexual harassment. The Auditor asked the investigator what is the meaning of preponderance. The Investigator explained a preponderance is the greater weight of evidence.</p> <p>The Auditor reviewed agency investigative records. A review of the records revealed the agency Investigator is using a preponderance of evidence to support his findings. There were no substantiated allegations of sexual abuse or sexual harassment during the previous 12 months. The investigator received 8 allegations throughout the previous 12 months. Each allegation was unfounded. The Auditor reviewed the investigative reports to determine the standard of evidence used by the investigator.</p> <p><b>Conclusion:</b></p> <p>The Auditor was able to determine the Investigator is using a preponderance as the basis for determining investigative outcomes. The Auditor reviewed the agency's policies, procedures, investigative records and interviewed the agency Investigator and determined the facility meets the requirements of this standard.</p>

115.73	<b>Reporting to inmates</b>
	<p data-bbox="248 168 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 536 365"><b>Auditor Discussion:</b></p> <p data-bbox="248 405 1453 607">The Meherrin River Regional Jail policy requires inmates be notified whether a sexual abuse allegation has been determined to be substantiated, unsubstantiated or unfounded following an investigation. Policy requires following an allegation that a staff member has committed sexual abuse against an inmate (unless the allegation is unfounded), the facility shall inform the inmate whenever:</p> <ul data-bbox="300 674 1465 920" style="list-style-type: none"> <li>• The staff member is no longer posted within the inmate's housing unit;</li> <li>• The staff member is no longer employed at the Jail;</li> <li>• The Jail learns that the staff member has been indicted on a charge related to sexual abuse within the Jail; and</li> <li>• The Jail learns that the staff member has been convicted on a charge related to sexual abuse within the Jail.</li> </ul> <p data-bbox="248 960 1445 1037">MRRJ policy requires following an allegation that another inmate has sexually abused them, the Jail will inform the alleged victim whenever:</p> <ul data-bbox="300 1104 1465 1267" style="list-style-type: none"> <li>• The Jail learns that the alleged abuser has been indicted on a charge related to sexual abuse within the Jail; and</li> <li>• The Jail learns that the alleged abuser has been convicted on a charge related to sexual abuse within the Jail.</li> </ul> <p data-bbox="248 1308 1453 1384">Agency policy stipulates the facility will document its attempted notifications to inmates. The facility's obligation to report shall terminate upon an inmate's release from the Jail's custody.</p> <p data-bbox="248 1424 576 1460"><b>Evidence Relied Upon:</b></p> <p data-bbox="248 1498 855 1534">Policy - Prison Rape Elimination Act, pg. 30-31</p> <p data-bbox="248 1570 847 1606">Allegation of Sexual Abuse - Report to Inmate</p> <p data-bbox="248 1641 533 1677">Investigative Records</p> <p data-bbox="248 1713 592 1749">Interview with Investigator</p> <p data-bbox="248 1785 560 1821">Interviews with Inmates</p> <p data-bbox="248 1861 544 1897"><b>Analysis/Reasoning:</b></p> <p data-bbox="248 1937 1485 2139">The Auditor conducted a formal interview with the agency's Sexual Abuse Investigator. The Investigator informed the Auditor he makes the notifications to inmate victims at the conclusion of an investigation. The Auditor asked the Investigator who notifies the inmate following an indictment and criminal charges placed against an inmate or staff member. The Investigator stated he attempts to get that information from the Brunswick and Mecklenburg Sheriff's</p>

Offices Investigators so he can make the notification to the inmate.

The Auditor reviewed facility investigative records. Each investigative record reviewed included a copy of the notification of the investigative results to the inmate victim. The notifications were typed on the agency's Allegation of Sexual Abuse - Report to Inmate form. Each notification was signed by the agency Investigator. Each notification was made within a couple days of the conclusion of the investigation. The facility had no incidents which required an inmate be notified of an indictment or conviction of an inmate or a staff member.

The agency's Allegation of Sexual Abuse - Report to Inmate form requires the Investigator check a box next to the investigative finding; substantiated, unsubstantiated or unfounded. The form includes a section where the investigator checks a box next to items being reported to the inmate. The items included on the form are listed above in bulleted format. The Investigator and inmate are required to sign and date the form. If the inmate refuses to sign the form a witness signature is required. The inmate receives a copy of the form and the investigator places a copy in the investigative record.

The Auditor interviewed inmates who made allegations of sexual misconduct and sexual harassment. The Auditor asked each if he/she met with a facility investigator. Each had met with a facility investigator following the allegation. The Auditor asked each what the outcome of their investigation was. Each informed the Auditor of their investigative result. The Auditor determined one inmate had not received the investigative findings. When asked how long ago the inmate made the allegation, the Auditor was informed it was just made a few days earlier.

**Conclusion:**

The Auditor concluded the Meherrin River Regional Jail informs inmates of investigative results at the conclusion of an investigation. The Auditor reviewed agency policy, procedures, investigative records, Allegation of Sexual Abuse - Report to Inmates, interviewed staff and inmates and determined the agency meets the requirements of this standard.

115.76	<b>Disciplinary sanctions for staff</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 536 360"><b>Auditor Discussion:</b></p> <p data-bbox="252 405 1474 730">The Meherrin River Regional Jail staff are subject to disciplinary sanctions up to and including termination for violating the agency's sexual abuse or sexual harassment policies. The MRRJ makes termination the presumptive disciplinary measure for those who have engaged in sexual abuse. Policy requires disciplinary sanctions for violation of agency policies related 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.</p> <p data-bbox="252 775 1452 931">It is the policy of the Meherrin River Regional Jail to notify the local law enforcement agency and licensing bodies when terminations for violations of sexual abuse or sexual harassment policies, or when a resignation by a staff member who would have been terminated if not for their resignation, unless the activity was clearly not criminal.</p> <p data-bbox="252 976 574 1010"><b>Evidence Relied Upon:</b></p> <p data-bbox="252 1043 810 1077">Policy - Prison Rape Elimination Act, pg. 31</p> <p data-bbox="252 1122 513 1155">Interviews with Staff</p> <p data-bbox="252 1200 545 1234"><b>Analysis/Reasoning:</b></p> <p data-bbox="252 1267 1474 1469">The Auditor conducted formal interviews with MRRJ staff. Each was asked regarding what actions would be taken against them if they were found to have violated the agency's sexual abuse policies. Each staff member stated they would be terminated. Staff questioned were aware of the MRRJ policy that makes termination the presumptive disciplinary sanction. Staff were also aware the MRRJ reports criminal violations to relevant licensing bodies.</p> <p data-bbox="252 1480 1474 1682">The agency's command staff has a zero-tolerance approach and disciplines staff for violating the agency's sexual abuse and sexual harassment policies. Command staff informed the Auditor they would recommend termination for anyone who committed an act of sexual abuse. Recommendations for violation of other acts would depend on the specific circumstances of the incident.</p> <p data-bbox="252 1727 1458 2096">The Auditor conducted a formal interview with the agency Investigator. The Investigator informed the Auditor if the act was criminal in nature the investigator would contact the local Sheriff's Office for a criminal investigation. The Investigator immediately ceases efforts once he determines there is sufficient evidence to support criminal activity. The investigator coordinates with the Sheriff's Offices Investigators. The Auditor asked how the investigation is handled if the act was not criminal in nature. The Investigator continues the investigation until a determination is made. The results of the investigation are shared with command staff so appropriate discipline can be sanctioned if warranted.</p>

The Auditor discussed the process of notifying relevant licensing bodies of staff found to have engaged in a criminal act of sexual abuse. The Auditor was informed the Virginia Department of Criminal Justice Services would be notified if an officer is found to have engaged in a criminal act of sexual abuse. When nursing staff are discovered to have engaged in such acts, the Virginia Department of Health Professionals, Board of Nursing would be notified of the criminal act. The facility notifies other relevant licensing bodies for persons in other positions such as counselors and Chaplains if they are licensed. The Auditor was informed no relevant licensing body is notified if an act was clearly not criminal. The Investigator notifies the International Association of Directors of Law Enforcement Standards and Training (IADLEST). The IADLEST maintains a database of certified officers whose licensing or certifications have been removed.

The Meherrin River Regional Jail reported no staff member had been found in violation of agency sexual abuse policies in the past 12 months. The MRRJ Superintendent has the authority to discipline staff, including suspension and termination.

**Conclusion:**

The Auditor determined the agency has appropriate policies and practices in place to ensure staff are disciplined for violating the agencies sexual abuse and sexual harassment policies. The agency makes termination the presumptive discipline measure for engaging in acts of sexual violence. Facility command staff do report violations of sexual abuse to local law enforcement and relevant licensing bodies. The Auditor reviewed the agency's policies, procedures, and conducted interviews with staff and determined the agency meets the requirements of this standard.

115.77	<b>Corrective action for contractors and volunteers</b>
	<p data-bbox="248 168 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 536 365"><b>Auditor Discussion:</b></p> <p data-bbox="248 405 1485 651">The Meherrin River Regional Jail has a policy that mandates contractors and volunteers who engage in sexual abuse are prohibited from contact with inmates. Policy stipulates those found to have engaged in sexual abuse will be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. MRRJ policy requires in case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, the Jail will consider whether to prohibit further contact with inmates.</p> <p data-bbox="248 689 576 725"><b>Evidence Relied Upon:</b></p> <p data-bbox="248 763 858 799">Policy - Prison Rape Elimination Act, pg. 31-32</p> <p data-bbox="248 837 480 873">Training Records</p> <p data-bbox="248 911 608 947">Interviews with Contractors</p> <p data-bbox="248 985 515 1021">Interviews with Staff</p> <p data-bbox="248 1059 547 1095"><b>Analysis/Reasoning:</b></p> <p data-bbox="248 1133 1485 1464">The Meherrin River Regional Jail reported there were no incidents in which a volunteer or contractor engaged or was alleged to have engaged in sexual abuse or sexual harassment in the previous 12 months. The Auditor conducted formal interviews with contract personnel. Each contractor interviewed was aware of the agency's discipline sanctions for violating sexual abuse or sexual harassment policies. Each was aware they would be removed from contact with inmates following an allegation of sexual abuse and will be removed from facility access if found to have engaged in such acts. Each understood the facility reported criminal violations of sexual abuse policies to the appropriate law enforcement agency.</p> <p data-bbox="248 1503 1457 1798">Volunteers and contractors are made aware of the MRRJ sexual abuse and sexual harassment policies during their initial training and prior to providing services in either of the Meherrin River Regional Jail facilities. Each volunteer and contractor sign a form of their understanding of the training they received from the facility. The Auditor verified through training records each volunteer and contractor in the facility had received such training. The Auditor was unable to interview a facility volunteer as the MRRJ has made adjustments to its operational procedures to mitigate risks of COVID-19.</p> <p data-bbox="248 1836 1485 2132">The MRRJ leadership is aware of the requirement to notify relevant licensing bodies following a contractor or volunteer's participation in a criminal act of sexual abuse. Command staff informed the Auditor a contractor or volunteer would be prohibited from inmate contact if determined to have participated in an act of sexual abuse. The Auditor was informed the MRRJ does not notify relevant licensing bodies if the volunteer or contractor engaged in an act of sexual abuse that was clearly not criminal in nature. The Auditor asked what types of relevant licensing bodies would be notified. Staff stated the Virginia Board of Nursing and any</p>

other body that holds the license for those who are licensed.

Command staff were asked if a contractor or volunteer had been disciplined within the previous 12 months for violating the MRRJ sexual abuse or sexual harassment policies and procedures. The Auditor was informed no contractor or volunteer had been found in violation of those policies. The Auditor was informed a contractor or volunteer would be removed from inmate contact pending the investigative result of an investigation of sexual abuse or sexual harassment.

**Conclusion:**

The MRRJ maintains appropriate policies to ensure contractors and volunteers at the MRRJ are removed from inmate contact after committing an act of sexual abuse or sexual harassment of an inmate. The Auditor reviewed the agency's policies, procedures, training records and conducted formal interviews with staff and contractors to determine the facility meets the requirements of this standard.

115.78	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The MRRJ policy is to subject inmates to disciplinary sanctions after an administrative finding that the inmate engaged in an act of inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Inmate disciplinary sanctions are pursuant to a formal disciplinary process. Policy prohibits disciplining an inmate for sexual contact with a staff member if the staff member consented to a sexual act with the inmate. The MRRJ policy requires discipline sanctions consider the following:</p> <ul style="list-style-type: none"> <li>● The nature and circumstances of the abuse committed;</li> <li>● The inmate's disciplinary history;</li> <li>● The sanctions imposed for similar offenses by other inmates with similar histories; and</li> <li>● The inmate's mental disabilities or mental illness.</li> </ul> <p>The MRRJ contracts medical and mental health services with Mediko. Mediko mental health practitioners offer therapy, counseling, and other interventions designed to address and correct underlying reasons or motivations for abuse only when requested by the abuser. The facility does not require the inmate's participation in such interventions as a condition of access to programming or other benefits.</p> <p>MRRJ staff are prohibited from disciplining an inmate for falsely reporting an incident of sexual abuse made in good faith and based on a reasonable belief the incident occurred, even if the investigation does not establish sufficient evidence to substantiate the allegation. Sexual activity between inmates at both Meherrin River Regional Jail facilities is prohibited. Inmates found to have participated in sexual activity (even consensual) are subject to disciplinary action. If sexual activity between inmates is found to have been consensual the sexual activity between the inmates may not be considered as an act of sexual abuse if it was not coerced.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 32</p> <p>Investigative Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor conducted a formal interview with the agency's Investigator. The Investigator informed the Auditor disciplinary charges are placed following a substantiated administrative allegation and/or following a criminal finding of guilt. The Investigator does not place charges on an inmate if the investigative determination is unfounded or unsubstantiated. The investigator was asked if charges are placed on inmates if an act is consensual. The Auditor</p>

was informed disciplinary charges are placed on inmates for participating in sexual activity but the inmates would not be charged for sexual abuse. The Auditor asked the Investigator how many of the 8 inmates who filed an allegation in the previous 12 months were disciplined as each was unfounded. The Investigator did not place discipline charges on any of the inmates who filed an allegation in the past 12 months.

The Auditor conducted formal interviews with medical and mental health practitioners. The Auditor asked the mental health practitioner what services he offers to inmates. The mental health practitioner stated Mediko offers counseling, therapy and other interventions of treatment to inmates, . The Auditor asked mental health practitioners if inmates are required to participate in any meetings or sessions. The Auditor was informed inmates are not forced to participate. Mental health services are voluntary for inmate participation.

The Auditor interviewed inmates who filed allegations during the previous 12 months. The Auditor asked each if he/she had been disciplined for making the allegation. None of the inmates stated they were disciplined for making an allegation. The facility reported there was no inmate disciplined for making an allegation of sexual abuse in bad faith during the previous 12 months. The facility reported no inmate has been found guilty of a criminal charge of sexual abuse and no allegation had been referred to the Sheriff's Office in the previous 12 months. The Auditor reviewed the records of inmates and did not discover evidence an inmate had been disciplined for making an allegation of sexual abuse.

**Conclusion:**

The Auditor discovered the agency maintains policies that align with PREA standard 115.78 Discipline Sanctions for Inmates. Facility personnel ensure the policy is applied when choosing whether to discipline an inmate for reporting or participating in an act of sexual abuse. The Auditor reviewed the facility's policies, procedures, investigative records and interviewed staff and inmates. The Auditor determined the facility meets the requirements of this standard.

115.81	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy requires an inmate be offered a follow-up meeting with a medical or mental health practitioner that must occur within 14 days of arriving at the facility to any inmate who informs staff he/she experienced sexual abuse in an institutional setting or in the community. The agency's policy stipulates information related to sexual victimization and abusiveness that occurred in an institutional setting be strictly limited to medical, mental health, and other staff on a need to know basis.</p> <p>Medical and mental health practitioners at the Meherrin River Regional Jail are required to 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.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 33</p> <p>Inmate Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor randomly selected 15 inmate records and specifically selected 15 records to review. Of the 30 records reviewed the Auditor discovered 5 inmates reported suffering sexual abuse during their initial risk assessment in booking. The Auditor reviewed the records of the inmates who reported suffering sexual victimization. A review of records reveal they were offered a follow-up with a mental health practitioner. Each who accepted the meeting was seen within 14 days of booking.</p> <p>The Auditor conducted formal interviews with medical and mental health practitioners at both facilities. Medical practitioners stated they meet with every inmate who enters the facility during the booking process. The Auditor was informed when inmates answer yes to the victimization questions during booking the mental health practitioner is automatically emailed for a scheduled follow up appointment. When a staff member clicks the "yes" box on the medical screening or on the Classification PREA Questionnaire an email is automatically sent to the mental health practitioners so a meeting can be scheduled. The Auditor asked a mental health practitioner if he meets with sexual abusers. The mental health practitioner stated he does meet with sexual abusers if those inmates chose request mental health services. Each medical and mental health practitioner was asked who they share their information with. The Auditor was informed they only discuss the information they learn with those who have a need to know. The Auditor asked medical and mental health practitioners if</p>

they obtain written informed consent prior to sharing information related to sexual victimization. The Auditor was informed if the victimization occurred in a community setting then written informed consent would be obtained prior to reporting. No medical or mental health practitioner has reported such victimization.

The Auditor asked medical and mental health practitioners who they discuss information regarding a sexual victimization or abusiveness that occurred in an institutional setting with. The Auditor was informed they report such information to the Shift Commander and classification personnel. The Auditor asked who has access to the electronic records. Only medical and mental health practitioners have access to an inmate's medical and mental health records.

The Auditor conducted a formal interview with classification personnel at each facility. Each was asked if they offer a follow up with a medical or mental health practitioner if an inmate reports suffering sexual victimization during the booking process. Each stated that is automatically offered when the inmate answers "yes" to the victimization questions on the Classification PREA Questionnaire. The Auditor was informed an email is automatically sent to the mental health practitioner for the follow up meeting. Each Classification Officer was asked who has access to the information obtained on the Classification PREA Questionnaire. The Auditor was informed that information is limited to select personnel.

The Auditor conducted formal interviews with inmates who reported suffering sexual abuse. Each was asked if they were offered a follow-up with a medical or mental health practitioner. Each inmate informed the Auditor they were offered a follow-up with a mental health practitioner. The inmates were asked how long it took before a mental health practitioner met with them. The inmates who accepted a meeting stated they met with a mental health practitioner within a few days.

**Conclusion:**

The Auditor concluded inmates are offered a follow-up with a medical or mental health practitioner after reporting they have suffered sexual victimization. Medical and mental health practitioners inform only those with a "need to know" of information related to sexual victimization. The Auditor reviewed the agency's policies, procedures, inmate records and conducted interviews with staff and inmates at each facility. After a thorough review the Auditor concluded the agency meets the requirements of this standard.

115.82	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy requires inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The MRRJ medical and mental health practitioners are required by policy to offer information and access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate to inmate victims of sexual abuse.</p> <p>Policy states, "All treatment services for sexual abuse will be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident."</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 33-34</p> <p>MOU with The James House</p> <p>Inmate Records</p> <p>Staff Training Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor conducted formal interviews with medical and mental health practitioners. Each was asked if they feel medical and mental health services offered at both Meherrin River Regional Jail facilities are consistent with a community level of care. Each informed the Auditor they do feel services are consistent with those offered in the community. Each was asked if there was ever a time when no medical staff are present in the facility. The Auditor was informed there is never a time at the main facility when no medical staff are on duty because Mediko provides 24/7 coverage in the facility. The medical services at the Mecklenburg facility are not offered on a 24/7 basis. Security staff at both facilities are mandated to maintain certification in CPR and First Aid in the event they are required to render aid before medical help arrives. The Shift Commander at the Mecklenburg facility contacts 911 in the event emergency medical services are required for an inmate. The Shift Commander contacts the main facility in the event medical services may be required that are non-life threatening when no medical personnel are at the Mecklenburg facility.</p> <p>The Auditor reviewed security staff training records. Security staff are provided training in CPR and first aid in the event first responder treatment is needed. The Auditor conducted formal</p>

interviews with security staff. Each informed the Auditor they take immediate steps to ensure victims are protected and receive emergency medical care in the event needed. Security staff immediately notify their supervisor and medical personnel following an incident of sexual abuse. Security supervisors were asked what actions they take to ensure the safety of the inmate following a sexual abuse incident. The Auditor was informed the inmate is immediately escorted to the medical area.

Medical and mental health practitioners informed the Auditor inmates receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The Auditor asked nursing staff if they offer timely information and access to sexually transmitted infection prophylaxis to inmates who are victimized by sexual abuse. Nursing staff informed the Auditor inmates do receive such. Nursing staff informed the Auditor sexually transmitted infection prophylaxis is offered during the forensic examination. Nursing staff stated if an inmate refuses a forensic examination they will offer the sexually transmitted infection prophylaxis as ordered by the physician.

Medical and mental health practitioners were asked if inmates are charged a fee for treatment services related to a sexual abuse victimization. The Auditor was informed all services related to sexual abuse victimization are free to the victim. Each inmate interviewed by the Auditor were aware treatments related to sexual victimization are provided at no cost to the victim. The Auditor reviewed inmate records to verify no inmate who was alleged to have been victimized at the facility was charged a fee for medical or mental health related services.

The Auditor reviewed the MRRJ Memorandum of Understanding with The James House. The memorandum stipulates The James House agrees to offer crisis intervention services to inmate victims of sexual abuse. The Auditor conducted a telephone interview with a victim advocate from The James House. The Auditor discussed the Memorandum of Understanding with the victim advocate. The advocate explained the crisis intervention services offered to inmate victims at both facilities. The MOU applies to all MRRJ inmates, regardless of the facility they report victimization from. The victim advocate was unaware of an inmate who has requested crisis intervention services in the previous 12 months.

The Auditor conducted formal interviews with inmates. Most inmates were aware of the services offered by The James House. All informed the Auditor they had seen the postings in the housing units. The postings include contact information to The James House. Each inmates was asked if they were aware services related to sexual abuse are free to the inmate victim. Each was aware those services are free.

The agency has not sent an inmate for a forensic examination in the previous 12 months.

The Auditor attempted to conduct a telephone interview with a SANE at the VCU Medical Center and was unsuccessful.

**Conclusion:**

The Auditor determined the facility provides inmates access to timely and unimpeded access to emergency medical services. Medical practitioners provide inmate victims with sexually transmitted infections prophylaxis when ordered by the Physician. The Auditor reviewed the agency's policies, procedures, inmate records, MOU, and interviewed staff, victim advocate and inmates. The Auditor determined the agency meets the requirements of this standard.

The Auditor recommends the facility add additional information in its Inmate Handbooks to include crisis intervention and emergency services related to sexual abuse treatment are free to the inmates. The facility will strengthen its education efforts by adding information related to services provided by The James House in its handbooks.

115.83	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The VBSO policy is to offer medical and mental health evaluations and treatment services to inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. MRRJ evaluations and treatments include the following:</p> <ul style="list-style-type: none"> <li>• Follow-up services;</li> <li>• Treatment plans;</li> <li>• Referrals for continued care following transfer or release.</li> </ul> <p>The agency's policy requires Mediko personnel offer pregnancy tests for sexually abusive vaginal penetration and comprehensive information about lawful pregnancy-related medical services. The MRRJ offeres inmate victims of sexual abuse tests for sexually transmitted infections as medically appropriate. All medical and mental health treatment services are provided to inmate victims of sexual abuse without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 33-34</p> <p>Medical Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor conducted formal inteviews with medical and mental health practitioners. Mental health practitioners do not stipulate a minimum or maximum time they meet with victims of sexual abuse. The mental health practitioner stated he meets with victims and abusers if the victim or abuser requests such meeting or if medically necessary. Treatments and evaluations occur as needed or until treatment plans determine a need no longer exists. The Auditor asked what kind of services are offered to victims of sexual abuse. The Auditor was informed counseling sessions, referrals if appropriate and follow-up services, if needed. Medical and mental health practitioners stated they do create and follow treatment plans.</p> <p>The Auditor asked medical and mental health practitioners if they felt their services are consistent with a community level of care. Each informed the Auditor they feel their services are consistent with community level services. The Auditor discussed the practice of offering sexually transmitted infection prophylaxis and pregnancy tests. The Auditor was informed they are offered at the time of the forensic examination. In the event the inmate requests such at a later time they are offered such as ordered by the Physicain. The Auditor asked medical and mental health practitioners how much money the victim pays for their services</p>

related to a sexual abuse victimization. The Auditor was informed there are no costs for evaluations and treatments related to sexual victimization.

Facility medical practitioners were asked to discuss the process if a sexual abuse of a female inmate results in pregnancy. Medical practitioners stated female inmates are offered a pregnancy test. When sexual abuse of a female inmate results in pregnancy the female inmate is offered lawfully related pregnancy services and are ordered by the physician. Medical practitioners stated they offer female victims the "morning after pill" following a sexual abuse, when ordered by the Physician.

The Auditor conducted interviews with inmates who have previously suffered sexual abuse. Those inmates were asked if they have met with a mental health practitioner. Some informed the Auditor they requested to see the mental health practitioner and were granted such. One informed the Auditor he did not wish to see the mental health practitioner. The inmates were asked if they were charged a fee for the services. No inmate had paid for such. Each was asked how many times they have met with the mental health practitioner. Some have seen the mental health practitioner routinely since their incarceration.

The Auditor attempted to conduct a telephone interview with a SANE at the VCU Medical Center and was unsuccessful.

**Conclusion:**

The facility's medical and mental health practitioners offer counseling, treatment, sexually transmitted infection prophylaxis and make referrals for continued care when necessary. The services provided to inmate victims are consistent with a community level of care. The Auditor reviewed policies, procedures, medical records, interviewed inmates, medical and mental health practitioners to determine the facility meets the requirements of this standard.

115.86	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy is to conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation where the allegation was substantiated or unsubstantiated, unless the allegation has been determined to be unfounded. The policy requires the team ordinarily conduct the review within 30 days of the conclusion of the investigation. The MRRJ policy requires the review team consist of the following:</p> <ul style="list-style-type: none"> <li>● Upper-level management officials</li> <li>● Supervisors</li> <li>● Investigators</li> <li>● Medical/Mental health personnel</li> </ul> <p>The MRRJ has a policy that requires the review team consider the following:</p> <ul style="list-style-type: none"> <li>● A need to change policy or practice to better prevent, detect, or respond to sexual abuse;</li> <li>● If the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, perceived status, gang affiliation or other group dynamics;</li> <li>● The area in the Jail where the alleged incident occurred to assess whether physical barriers in the area may permit abuse;</li> <li>● The adequacy of staffing levels in that area during different shifts;</li> <li>● Whether monitoring technology should be deployed or augmented to supplement supervision by staff;</li> <li>● The review team will prepare a report of the findings, determinations, and any recommendations for improvement and submit the report to the Superintendent and the PREA Coordinator; and</li> </ul> <p>The MRRJ policy requires the Jail implement the review team's recommendations for improvements, or will document the reasons for not doing so.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 35</p> <p>Sexual Abuse Incident Review Form</p> <p>Investigative Records</p> <p>Interviews with Staff</p> <p><b>Analysis/Reasoning:</b></p> <p>The facility reported 8 allegations of sexual abuse and sexual harassment during the previous</p>

12 months. The Auditor determined the facility was not required to conduct an incident review as the investigations determined the incidents of sexual abuse were unfounded. The Auditor confirmed the results of all investigations through a review of investigative records. There were no substantiated or unsubstantiated allegations of sexual abuse within the previous 12 months.

The Auditor conducted a review of the agency's Sexual Abuse Incident Review Report. The Sexual Abuse Incident Review Report includes the following personnel attendance: Deputy Superintendent, PREA Coordinator, Shift Supervisor, Investigator and Medical Personnel. All team members are required to sign and date the form. The form includes a section for submission to the PREA Coordinator and Superintendent. The Auditor observed the following sections in the Sexual Abuse Incident Review Report:

- Members of the Team;
- Need to Change Policy or Practice;
- Motivation of Incident or Allegations;
- Assessment of Physical Scene;
- Adequacy of Staffing Levels;
- Assessment of Monitoring Technology;
- Determinations by Team;
- Recommendations for Improvement;
- Submission;
- Recommendations Implemented;
- Reasons for not Implementing; and
- Signatures.

The Auditor conducted a formal interview with a staff member who serves on the Incident Review Board. The staff member discussed the process of the review board with the Auditor. The staff member explained at the initiation of the meeting the investigator discusses the allegation. The team member informed the Auditor the team follows the format of the Sexual Abuse Incident Review Report to ensure all elements of this standard are considered. The team member stated the team does discuss recommendations for improvement and include those recommendations on the final report. The Incident Review Team Member was asked when the team meets following the investigation. The Auditor was informed the team meets within 30 days following the investigation.

**Conclusion:**

The Auditor determined the facility is conducting incident reviews within 30 days of the conclusion of each substantiated and unsubstantiated sexual abuse investigation. The Incident Review Team documents the performance of each incident review. The Auditor reviewed the MRRJ policies, procedures, Investigative Records, Sexual Abuse Incident Review Report and conducted interviews with staff and determined the facility meets the requirements of this standard.

115.87	<b>Data collection</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy requires the Jail will collect accurate, uniform data for every allegation of sexual abuse necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The Jail is required to provide all such data from the previous calendar year to the Department of Justice no later than June 30, upon request of the D.O.J.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 35</p> <p>Sexual Assault In-Custody Data Report</p> <p>Survey of Sexual Violence</p> <p>Agency Website</p> <p>Interviews with Staff</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the MRRJ 2019 Sexual Assault In-Custody Data Report published on its website. The public can access the report through a "Documents" link. The Auditor observed definitions of the following included in the annual report:</p> <ul style="list-style-type: none"> <li>• Rape</li> <li>• Nonconsensual Sex Acts</li> <li>• Abusive Sexual Contact</li> <li>• Sexual Harassment</li> <li>• Staff Sexual Misconduct</li> <li>• Staff Sexual Harassment</li> </ul> <p>Data in the agency's annual report was aggregated from January 1, 2019 to December 31, 2019. The facility's Sexual Assault In-Custody Data Report includes data collected from the Alberta and Mecklenburg facilities. The Auditor reviewed the Bureau of Justice's, Survey of Sexual Victimization and compared it to the facility's report. The facility's Sexual Assault In-Custody Data report is based on the questions asked on the Bureau of Justice's, Survey of Sexual Violence. The report is sufficient to answer all questions on the Survey of Sexual Violence. The Department of Justice did not request information from the facility for the 2019 year. The facility is aware the Survey of Sexual Violence is due to the Department of Justice by June 30 of the applicable year.</p> <p>The Auditor interviewed staff responsible for obtaining and maintaining data at the facility. All data collected is maintained by the agency investigator and the PREA Coordinator. The</p>

Investigator and PREA Coordinator maintain their files from investigations and other collected data in their locked offices. Data is provided by the Investigator to the PREA Coordinator who compiles the data. Electronic data is maintained on the Investigator and PREA Coordinator's computers. Each computer requires a username and password to gain access to the protected data. The Auditor was informed data is compiled from Incident Reports, Grievances, Discipline Reports, Incident Reviews, Investigative Reports and any other relevant documents.

**Conclusion:**

The Auditor observed evidence the facility is collecting and aggregating sexual abuse data annually. The reported data utilizes a standardized set of definitions. The Auditor reviewed the agency's policies, procedures, website, Sexual Assault In-Custody Data Report, Survey of Sexual Violence and interviewed staff and determined the agency meets the requirements of this standard.

115.88	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail policy requires data be collected and aggregated in order to assess and improve the effectiveness of the agency's sexual abuse prevention, detection and response policies, practices and training. The data review is conducted to:</p> <ul style="list-style-type: none"> <li>• Identify problem areas</li> <li>• Take corrective actions on an ongoing basis</li> <li>• Prepare an annual report of findings and corrective actions for each facility, as well as the agency as a whole</li> </ul> <p>The agency's PREA Coordinator completes the annual report. MRRJ policy requires the annual report include a comparison of the current year's data and corrective actions with those from prior years and to provide an assessment of the agency's progress in addressing sexual abuse. The policy requires the annual report be approved by the agency head and made readily available to the public on the agency's website, or through other means. The MRRJ may redact specific material from the annual report when publication would present a clear and specific threat to the safety and security of a facility. Any redacted material from the report must include the nature of the material redacted.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - Prison Rape Elimination Act, pg. 36</p> <p>Agency Website</p> <p>Annual Reports</p> <p>Interviews with Staff</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the Meherrin River Regional Jail website. The agency maintains annual reports which include its findings and corrective actions for each of its facilities. Each report is accessible through the "Documents" link. After opening this link the public can gain access by clicking the "PREA Annual Data Collection and Review Report" link. The agency maintains a report for the Alberta and Mecklenburg facilities. The agency's website includes annual reports published from 2013 through 2019.</p> <p>A review of the agency's annual reports reveals the agency attempts to discover problem areas within each facility based on a review of data collected. The agency's annual report includes any corrective actions taken by the MRRJ. The 2019 annual report included a statement the agency continued upgrading its electronic monitoring system by adding cameras in the Alberta facility. No cameras were added in the Mecklenburg facility as there</p>

have been no allegations in the past three (3) years. The report attributes the agency's progress towards prevention, detection and response efforts to its training of staff and education to inmates. Each report included data compared with the Mecklenburg and Alberta facilities.

The Auditor discussed the annual reporting process with the facility investigator and the PREA Compliance Manager. The information for the annual report is derived from investigative reports, Incident Reviews and other relevant documents. Corrective actions are implemented when needed as the Incident Review Team recommends corrective actions when warranted following the incident review. Any corrective actions taken will be documented in the agency's annual report. When problem areas are discovered, facility staff recommend a solution to address the problem area and include the specifics in the annual report.

The Superintendent approves the agency's annual report prior to publishing the report on the agency's website. The Auditor did not observe any redacted materials from any of the MRRJ published reports. Each annual report includes the signature of the PREA Coordinator and the Superintendent.

**Conclusion:**

The Auditor concluded the agency completes an annual review of collected and aggregated sexual abuse data. The annual report addresses problem areas and corrective actions taken and is approved by the Superintendent prior to publishing on the agency's website. The Auditor reviewed the agency's policies, procedures, website, PREA Annual Reports and interviewed staff to determine the agency meets the requirements of this standard.

115.89	<b>Data storage, publication, and destruction</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 536 360"><b>Auditor Discussion:</b></p> <p data-bbox="252 400 1437 607">The Meherrin River Regional jail policy is to ensure all data relevant to sexual abuse are securely retained for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise. The MRRJ policy is to make its annual report readily available to the public through the Jail's website, excluding all personal identifiers after final approval by the Superintendent.</p> <p data-bbox="252 647 574 680"><b>Evidence Relied Upon:</b></p> <p data-bbox="252 721 815 754">Policy - Prison Rape Elimination Act, pg. 36</p> <p data-bbox="252 795 464 828">Agency Website</p> <p data-bbox="252 869 443 902">Annual Report</p> <p data-bbox="252 943 512 976">Interviews with Staff</p> <p data-bbox="252 1016 427 1050">Observations</p> <p data-bbox="252 1090 544 1124"><b>Analysis/Reasoning:</b></p> <p data-bbox="252 1164 1458 1406">The Auditor conducted a formal interview with personnel responsible for maintaining facility data. Information for the agency's annual report is maintained by the PREA Coordinator and is derived from investigative files and reports. Agency data is maintained electronically on a computer that requires a username and password to gain access to the data. The PREA Coordinator maintains the electronic data on his computer and other relevant documents locked in his office.</p> <p data-bbox="252 1447 1469 1823">The Auditor reviewed the agency's website. The website included annual sexual abuse data collection in an annual report. The Auditor observed data collected from 2013 included in the agency's reports. There were no personal identifiers included in any agency annual reports. The Auditor was informed sexual abuse and sexual harassment data is maintained by the PREA Coordinator for a minimum of 10 years after collection. A username and password are required to gain access to the computers used by the PREA Coordinator. All investigative data used to compile the data is maintained in the Investigator's locked office and on his computer that requires a username and password. The Auditor observed the office areas of the Investigator and PREA Coordinator.</p> <p data-bbox="252 1863 427 1897"><b>Conclusion:</b></p> <p data-bbox="252 1937 1474 2011">The Auditor reviewed the facility's website, collected data, made observations and interviewed staff to determine the agency meets the requirements of this standard.</p>

115.401	<b>Frequency and scope of audits</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 536 360"><b>Auditor Discussion:</b></p> <p data-bbox="252 405 1445 562">The Meherrin River Regional Jail operates two facilities. One facility is located in Brunswick County, Virginia in the town of Alberta and the other in Mecklenburg County, Virginia. Both facilities were audited during the last three year audit cycle. The Alberta and Mecklenburg facilities were last audited in September 2017.</p> <p data-bbox="252 607 574 640"><b>Evidence Relied Upon:</b></p> <p data-bbox="252 685 539 719">Previous Audit Report</p> <p data-bbox="252 763 427 797">Facility Tours</p> <p data-bbox="252 842 533 875">Interactions with Staff</p> <p data-bbox="252 920 545 954"><b>Analysis/Reasoning:</b></p> <p data-bbox="252 999 1477 1267">The agency has ensured both facilities were audited during the first year of the current audit cycle. The Auditor was provided and reviewed all relevant agency policies, procedures, documents and other applicable reports to assist with rendering a decision on the agency's level of compliance with relevant standards. The Auditor reviewed a relevant sampling of documentation from the previous 12 month period. The facility allowed the Auditor to conduct formal interviews with inmates and staff at both facilities. Agency personnel provided the Auditor with a detailed tour, allowing the Auditor access to all areas in each facility.</p> <p data-bbox="252 1312 1477 1469">During the audit the agency provided additional documents that were requested by the Auditor to aid in a determination of the agency's level of compliance. The Auditor requested and was provided a random selection of video footage of several inmate areas. The inmate population was allowed to correspond confidentially with the Auditor prior to the Auditor's arrival.</p> <p data-bbox="252 1514 1461 1715">The Auditor reviewed the agency's previous PREA audit reports and observed both facilities complied with all standards without the requirement of corrective action. Each facility allowed access to all facility areas, interviews with staff and inmates and provided facility documents during the previous audit. During the previous PREA audit the facility allowed inmates to confidentially correspond with the Auditor.</p> <p data-bbox="252 1760 1439 1827">The Auditor communicated with a victim advocate with The James House and attempted to communicate with a SANE from the VCU Medical Center.</p> <p data-bbox="252 1872 1471 2119">On June 8, 2020 the Auditor sent a letter to be posted in all inmate living areas at each facility that included the Auditor's address. The Auditor sent the agency an English and Spanish version of each notice. The Auditor did not receive a correspondence from an inmate prior to arriving on site for the audit. The Auditor observed the confidential correspondence notices posted in all inmate housing units at both facilities. All notices were posted in both facilities on June 9, 2020. The notices were posted for 6 weeks prior to the audit.</p>

The Department of Justice did not send a recommendation to the Meherrin River Regional Jail for an expedited audit of either MRRJ facility during this audit period.

**Conclusion:**

The Auditor determined the MRRJ meets the requirements of this standard.

115.403	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Meherrin River Regional Jail has published its previous PREA audit reports for both facilities on its website.</p> <p><b>Evidence Relied Upon:</b></p> <p>Agency Website</p> <p>Previous PREA Audit Reports</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the MRRJ website which includes a link to access its previous PREA audit final reports from each facility. The agency website includes both final reports from the second audit cycle. Both facilities were audited in September 2017.</p> <p><b>Conclusion:</b></p> <p>The Auditor determined the agency meets the requirements of this standard.</p>

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

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

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

<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.16 (a)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual	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

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

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

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

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

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

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

<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	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

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

<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	no
<b>115.33 (d)</b>	<b>Inmate education</b>	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

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

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

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

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

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

<b>115.42 (a)</b>	<b>Use of screening information</b>	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of 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
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	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

<b>115.42 (d)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes

<b>115.43 (a)</b>	<b>Protective Custody</b>	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
<b>115.43 (b)</b>	<b>Protective Custody</b>	
	Do inmates who are placed in segregated housing because they 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

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

<b>115.51 (b)</b>	<b>Inmate reporting</b>	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

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

<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (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
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

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

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

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

<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report 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
<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

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

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

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

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

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

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

<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	no
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

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

<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

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

<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	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
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

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

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

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