

PREA Facility Audit Report: Final

Name of Facility: Meherrin River Regional Jail Main Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/11/2026

Auditor Certification

The contents of this report are accurate to the best of my knowledge.



No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.



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



Auditor Full Name as Signed: Ron L Kidwell

Date of Signature: 10/11/2026

AUDITOR INFORMATION

Auditor name: Kidwell, Ron

Email: ron@systemicaudits.com

Start Date of On-Site Audit: 08/25/2026

End Date of On-Site Audit: 08/27/2026

FACILITY INFORMATION

Facility name: Meherrin River Regional Jail Main Facility

Facility physical address: 9000 Boydton Plank Road, Alberta, Virginia - 23821

Facility mailing address:

Primary Contact

Name:	Brent Wright
Email Address:	bwright@mrrj.org
Telephone Number:	434-949-6700

Warden/Jail Administrator/Sheriff/Director

Name:	Rodney Jacobs
Email Address:	rjacobs@mrrj.org
Telephone Number:	434-949-6700

Facility PREA Compliance Manager

Name:	John Kelly
Email Address:	john.kelly@mrrj.org
Telephone Number:	(434) 949-6822

Facility Health Service Administrator On-site

Name:	Theresa Bagley
Email Address:	tbagley,mrrj@cbhmedical.com
Telephone Number:	434-949-6804

Facility Characteristics

Designed facility capacity:	697
Current population of facility:	198
Average daily population for the past 12 months:	223
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys

Age range of population:	18 - 70+
Facility security levels/inmate custody levels:	minimum, medium, maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	97
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	28
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	12

AGENCY INFORMATION

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

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information

Name:	Brent Wright	Email Address:	bwright@mrrj.org
--------------	--------------	-----------------------	------------------

Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

1

- 115.16 - Inmates with disabilities and inmates who are limited English proficient

Number of standards met:

44

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

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

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2026-08-25
2. End date of the onsite portion of the audit:	2026-08-27

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	☒ Yes ☐ No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	The Auditor contacted Just Detention International and the victim advocate for MRRJ The James House Rape Crisis Center.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	697
15. Average daily population for the past 12 months:	223
16. Number of inmate/resident/detainee housing units:	25
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☐ Yes ☒ No ☐ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	194
25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	1
26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	1
27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	2
30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0

31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	1
33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	1
34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	The Auditor began conducting random and targeted inmate interviews on the second day of the on-site audit. The Auditor was provided a private area to conduct the confidential interviews. All inmates were made available in a timely manner and two inmates refused to be interviewed by the Auditor. All interviews were conducted using the established DOJ interview protocols.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	97
37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	12

38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	28
39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	The Auditor began conducting random and specialized staff interviews immediately following the completion of the on-site facility tour. The Auditor was provided a private area to conduct the confidential interviews. All staff were made available in a timely manner and no staff refused to be interviewed by the Auditor. All interviews were conducted using the established DOJ interview protocols.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	16
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☒ Age ☒ Race ☒ Ethnicity (e.g., Hispanic, Non-Hispanic) ☐ Length of time in the facility ☒ Housing assignment ☒ Gender ☐ Other ☐ None

42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Inmates were selected from all housing units, using the inmate cell assignment report. The Auditor went down the list of each housing unit and selected the inmate's name from all housing units. The Auditor also ensured that a representative sample of inmates based on race, age, gender, and ethnicity were selected.
43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No
44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	There were no barriers to interviewing the random inmates.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	5
As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".	
47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1

48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported that they were not currently housing any inmates that are blind or have low vision. The Auditor met with the PREA Compliance Manager who is also the agency's American with Disabilities (ADA) Coordinator and reviewed the list of residents housed in the facility that requested accommodations, given a particular disability. The Auditor found no evidence of any inmate listed with disabilities regarding vision issues.
50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported that they were not currently housing any inmates that are deaf or hard of hearing. The Auditor met with the PREA Compliance Manager who is also the agency's ADA Coordinator and reviewed the list of residents housed in the facility that requested accommodations, given a particular disability. The Auditor found no evidence of any inmate listed with disabilities regarding vision issues.
51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	2
52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported that they were not currently housing any inmates that identified as gay, lesbian, or bi-sexual. The Auditor requested that the PREA Coordinator run another report against the risk screening questions captured during intake to ensure this information was correct. The facility determined that no inmate currently housed in their facility identified as LGBTQ.
53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported that they were not currently housing any inmates that identified as transgender or intersex. The Auditor requested that the PREA Coordinator run another report against the risk screening questions captured during intake to ensure this information was correct. The facility determined that no inmate currently housed in their facility identified as transgender or intersex.
54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	1

55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	1
56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The Facility reported no current instances of placing any inmate in segregated housing for risk of sexual victimization. This was confirmed through interviews with the staff who supervise inmates in segregated housing, and the Facility Head.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	The Auditor interviewed 5 targeted inmates at the MRRJ. Of those inmates interviewed, 1 reported sexual victimization during the risk screening process, 1 reported sexual abuse, 1 cognitively disabled, and 2 inmates that was limited English proficient. The MRRJ does not house youthful inmates and reported no inmates housed in segregation for high risk. The Auditor did not receive any correspondence from an inmate at the MRRJ for this audit through mail.

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

58. Enter the total number of RANDOM STAFF who were interviewed:

12

59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)

- ☒ Length of tenure in the facility
- ☒ Shift assignment
- ☒ Work assignment
- ☐ Rank (or equivalent)
- ☒ Other (e.g., gender, race, ethnicity, languages spoken)
- ☐ None

If "Other," describe:

The Auditor ensured that female officers were interviewed to provide their point of view working at this facility.

60. Were you able to conduct the minimum number of RANDOM STAFF interviews?

- ☒ Yes
- ☐ No

61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):

The staff were randomly selected by the PREA Auditor. The Auditor chose staff from all shifts, working different assignments, and with different levels of experience. The Auditor also made sure interviews were conducted with a proportionate number of female staff corresponding to the MRRJ's employee demographics.

Specialized Staff, Volunteers, and Contractor Interviews

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

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

18

63. Were you able to interview the Agency Head?	☒ Yes ☐ No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	☒ Yes ☐ No
65. Were you able to interview the PREA Coordinator?	☒ Yes ☐ No
66. Were you able to interview the PREA Compliance Manager?	☒ Yes ☐ No ☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

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

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

☒ Yes

☐ No

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

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

On 08/25/2026, at approximately 0800 hours a PREA audit kickoff meeting was conducted. Present at the meeting was the Agency Superintendent, Major of Security and Operations, Major of Administration and Support, Captain of Operations, and PREA Compliance Manager. The inmate population on 8/25/2023 was 194 inmates. The meeting was designed to create a positive working relationship, place names with faces, and prepare for the next three days. Soon after the conclusion of the meeting the Auditor began the facility observation tour. Accompanied by the Superintendent, Major of Administration and Support and the PREA Compliance Manager, the tour covered the entire facility over the next 3 hours. The tour covered the Front Entrance, Receiving and Intake, Food Services/Kitchen, Laundry, Gym, Program Classrooms, and twenty-five separate housing units. During the facility tour, the Auditor looked at camera placement for possible blind spots and inmate to officer supervision ratio. The Auditor looked at privacy issues, how the toilet and shower areas were configured, and did the inmates have adequate privacy. Also, did staff of the opposite gender announce their presence when entering a housing unit of the opposite sex. The Auditor documented if PREA posters and PREA audit notices were displayed in the housing units and public areas as well. The Auditor noted the number of phones in each unit and if the advocacy hotline number along with the outside reporting entity contact information was readily available in the housing units. The Auditor also conducted several test calls to the outside reporting entity to prove the effectiveness of the facility's practice and the agency advocate. Finally, the Auditor spoke to multiple inmates about if they knew how to report an allegation of sexual abuse.

The Auditor also conducted a site review on the Mecklenburg Facility. This was to ensure the facility had the appropriate and up to date signage, privacy barriers, and camera

coverage. During the tour, the Auditor observed several upgrades made from the previous PREA audit recommendations that included adding a camera in the Laundry Room to prevent a potential blind spot, adjusting two camera angles in the Intake Center that resulted in inmate privacy issues, two more camera angles in the Medical Housing Unit that also provided inmate privacy issues, and one camera angle in the Segregation Unit that was pointing in the direction of the toilet. As mentioned throughout this report, the Mecklenburg Facility is not currently operational and has not housed inmates since January 2021. However, if or when the facility is reopened, the current policies that govern the Alberta Facility and staff members assigned to the Alberta Facility will also be operating the Mecklenburg facility in the exact same fashion.

Documentation Sampling

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

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

☒ Yes

☐ No

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

At the end of the third audit day, the Auditor had reviewed 42 files: 20 inmate files, 12 staff personnel files, and 10 investigative files. The inmate files were for individuals interviewed during the audit. The staff personnel files were selected from officers hired within the past three years or during the current rating cycle. In those files, the Auditor looked for documentation of the initial criminal history check, institutional references, five-year background checks, PREA training, and PREA refresher training. For inmate files, the Auditor verified whether the PREA intake screening was completed within 72 hours, whether reassessment was documented, whether PREA information was provided at intake, and whether comprehensive PREA education was completed within 30 days of intake. Finally, in reviewing investigative files, the Auditor looked for a complete administrative investigation, including the investigative outcome, retaliation monitoring, completion of a Sexual Abuse Incident Review, use of the preponderance-of-the-evidence standard, and interviews with victims, witnesses, and the alleged perpetrator, among other factors.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	2	0	2	0
Staff-on-inmate sexual abuse	3	0	3	0
Total	5	0	5	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	2	0	2	0
Staff-on-inmate sexual harassment	6	0	6	0
Total	8	0	8	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	1	0	1
Staff-on-inmate sexual abuse	0	2	1	0
Total	0	3	1	1

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	2	0	0
Staff-on-inmate sexual harassment	0	5	1	0
Total	0	7	1	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

10

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	2
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	8
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	3
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

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

5

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

☐ Yes

☒ No

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

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

☒ Yes

☐ No

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

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

No text provided.

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

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

☐ Yes

☒ No

Non-certified Support Staff

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

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

108. Who paid you to conduct this audit?

☐ The audited facility or its parent agency

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

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

☐ Other

Identify the name of the third-party auditing entity

Corrections Consulting Services LLC

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) Meherrin River Regional Jail (MRRJ) Pre-Audit Questionnaire b) MRRJ PREA Policy 9A-00 c) MRRJ 2026 Organizational Chart d) MRRJ PREA Coordinator Memorandum dated 6/25/2026 e) MRRJ Inmate Acknowledgement Form f) PREA Brochure Interview:

1. Interview with Specialized Staff (PREA Coordinator)

2. Interview with Specialized Staff (PREA Compliance Manager)

Observations made during the On-Site Audit and Document Review

115.11 Provision (a)

The facility has provided a written policy (MRRJ OP 9A-00) that indicates that, "Meherrin River Regional Jail mandates a zero tolerance towards all forms of sexual abuse and sexual harassment." The following procedure outlines the department's approach to preventing, detecting, and responding to such conduct. There is a zero tolerance of staff on inmate, inmate on staff, staff on staff, and inmate on inmate sexual abuse and sexual harassment. The goal is to create an environment and culture of mutual respect. For the purposes of this policy, contractors and volunteers will be treated the same as staff. Also, the definitions associated with prohibited behaviors are present in this agency policy. For example: the definition of sexual abuse, sexual harassment, and voyeurism. The policy also addresses sanctions for those who violate the PREA policy with discipline up to and including termination. Finally, the MRRJ PREA Policy in its entirety incorporates the necessary fundamentals needed to describe MRRJ's approach to detecting, preventing, and responding to allegations of sexual abuse and sexual harassment.

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

115.11 Provision (b)

MRRJ PREA Policy 9A-02 states that, "The PREA Coordinator will be employed with Meherrin River Regional Jail and designated as 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. A designee may be assigned in periods of the coordinator's absence. The PREA Coordinator is in the agency's organizational structure."

The MRRJ provided an organizational chart that the Auditor reviewed. The Auditor observed that the PREA Coordinator, in the rank of Captain, is subordinate to the Security & Operations Major. The Major is supervised by the Jail Superintendent of the facility. The Major (Deputy Superintendent) is second in command and falls directly under the supervision and control of the MRRJ Superintendent. Thus, providing upper-level management positions to develop and implement oversight for the facility's compliance with PREA standards.

During the interview, the PREA Coordinator confirmed that he has sufficient time to

fulfill his PREA-related responsibilities and that the agency accommodates the time and resources needed to coordinate compliance efforts. He explained that he supports compliance by ensuring required training is completed and monitoring the PREA standards for updates. When changes do not require a policy revision, he promptly updates the relevant protocols; when a policy change is necessary, he consults with the Major. He also reported communicating daily with the PREA Compliance Manager (PCM), and both have agency-issued phones that allow them to communicate as needed.

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

115.11 Provision (c)

MRRJ Policy 9A-00 states that; “MRRJ operates more than one facility. Each facility shall have a PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. The PREA Compliance Manager is in the agency's organizational structure.”

The agency has provided the MRRJ Organizational Chart that outlines the command structure in which the PREA Compliance Manager falls. The PREA Compliance Manager is a civilian position and is subordinate to the Administrative and Support Major. The PREA Compliance Manager work profile indicates that; “The role of the PREA Compliance Manager is to have specific responsibilities, such as maintaining necessary documentation of all PREA standard compliance efforts, act as primary facility contact for the PREA Coordinator in coordinating compliance and ensure compliance with all PREA relative departmental policies and procedures.”

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

Conclusion:

The MRRJ operates two separate facilities. The first facility is referred to as the Alberta Facility that has the capacity to hold 697 inmates. This facility is used as the primary housing correctional facility for the counties of Brunswick, Dinwiddie, and Mecklenburg, Virginia. At the time of this audit, all MRRJ inmates were being held at the Alberta Facility. The second facility, known as the Mecklenburg Facility, has the capacity to hold 80 inmates. It was empty and has been closed since January 8, 2021. However, the policies that govern the MRRJ and how the staff assigned to the Alberta Facility would be the same procedures, positions, and staff utilized to operate the Mecklenburg Facility if or when the facility reopens. Therefore, based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring the agency to have a written

	policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment and to employ an agency PREA Coordinator.
--	---

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Memorandum by the Commander of Administration dated 08/17/2026 "Statement of Fact" Observations made during the On-Site Audit and Document Review 115.12 Provision (a) MRRJ PREA Policy 9A-00 states that, "Any contract entered into for the confinement of inmates after August 20, 2012, or since the last PREA audit, whichever is later, requires all of the contractors to adopt and comply with PREA standards. All contracts require the agency to monitor the contractor's compliance with PREA standards." The MRRJ reports that facility does not currently have an agreement to contract with any other detention facilities to house its inmates. Additionally, the jail has not engaged in an agreement or contract of this nature within the past twelve months. Therefore, this standard is not applicable to this facility. The facility did provide a "Statement of Fact" which indicated that MRRJ does not currently have an agreement to contract with any other detention facility to house its inmates. Additionally, the jail has not engaged in an agreement or contract of this nature within the last twelve months. Conclusion: Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard because the standard is not applicable to this agency.

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard

	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents a) MRRJ 2026 Staffing Plan (Alberta) b) MRRJ 2026 Staffing Plan Review c) MRRJ 2025 Staffing Plan (Alberta) d) MRRJ 2025 Staffing Plan Review e) MRRJ PREA Policy 9A-00 f) Unit Activity Logbooks notating Unannounced Rounds Interviews: 1. Interview with Facility Head 2. Interview with PREA Coordinator 3. Interview with Intermediate or Higher-Level Facility Staff Observations made during the On-Site Audit and Document Review 115.13 Provision (a) MRRJ PREA policy 9A-02-states that, “MRRJ will develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect inmates against sexual abuse. In calculating adequate staffing levels, and determining the need for video monitoring, the following shall be taken into consideration, Generally accepted detention and correctional practices, any judicial findings of inadequacy, any findings of inadequacy from Federal investigative agencies, any findings of inadequacy from internal or external oversight bodies, all components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated), the composition of the inmate population, the number and placement of supervisory staff, institution programs occurring on a particular shift, any applicable state or local laws, regulations, or standards, the prevalence of substantiated and unsubstantiated incidents of sexual abuse and, any other relevant factors.” Staffing positions throughout the Meherrin River Regional Jail (Alberta) are allocated from the staffing model established by the Virginia Department of Corrections. The facility employs 126 sworn and 26 civilian staff members. The current staffing level of the MRRJ is within generally accepted guidelines and practice. Staffing levels are also determined by post orders, job descriptions, and adequate schedule preparation. Through these measures, supervision and facility administration will ensure that a
--	--

preferred and sufficient level of staff will be present for each shift. Video surveillance will assist staff in monitoring movement throughout the jail. This will be accomplished by utilizing centralized and area specific control rooms that are staffed around the clock. Incidents of future sexual abuse, sexual behavior, and any type of retaliation involving sexual abuse or sexual behavior may cause a necessary change in the staffing plan. The MRRJ did not have any judicial findings of inadequacy during this annual review period. The MRRJ did not have any findings of inadequacy from federal investigative agencies during this annual review period. The MRRJ did not have any findings of inadequacy from internal or external oversight bodies during this annual review period. The MRRJ Alberta Facility consists of 25 housing units with 11 direct supervision open bay/dorm units. Security rounds are made at a minimum of 30 minutes or less where every inmate is physically viewed by staff. Inmates are forbidden to create any obstruction, or otherwise inhibit any line of sight, which would create a temporary "blind spot" within the facility. Video monitoring systems are also strategically placed throughout the facility to enhance security and surveillance. MRRJ operates on a 12-hour rotation schedule with two-day shift squads and two-night shift squads. The MRRJ has four sworn supervisory Shift Commanders who hold the rank of Lieutenant and manage both day and night shifts. Each day shift consists of one (1) shift supervisor, Lieutenant, one (1) assistant shift commander, Sergeant, and a minimum of twenty (20) post officers that are assigned to confinement and intake duties. Each night shift consists of one (1) shift supervisor, Lieutenant, one (1) assistant shift commander, Sergeant, and minimum of nineteen (19) post officers that are assigned to confinement and intake duties. These supervisory levels have been shown to be appropriate through many years of operating at this level, and they coincide with generally accepted, best practices.

Since the last PREA audit, the average daily population of inmates at the MRRJ (Alberta) was 223 and the current staffing plan was predicated on 400 inmates housed at the facility.

After referring to the 2023 Staffing positions throughout the Meherrin River Regional Jail (Mecklenburg), they too are allocated from the staffing model established by the Virginia Department of Corrections. The facility employs 24 sworn and 4 civilian staff members. The current staffing level of the MRRJ Mecklenburg is within generally accepted guidelines and practice. Staffing levels are also determined by post orders, job descriptions, and adequate schedule preparation. Through these measures, supervision and facility administration will ensure that a preferred and sufficient level of staff will be present for each shift. Video surveillance will assist staff in monitoring movement throughout the jail. This will be accomplished by utilizing centralized and area specific control rooms that are staffed around the clock. Incidents of future sexual abuse, sexual behavior, and any type of retaliation involving sexual abuse or sexual behavior may cause a necessary change in the staffing plan. The MRRJ Mecklenburg Facility consists of 10 housing units with a medical housing unit and central control center. Security rounds are made at a minimum of 30 minutes or less where every inmate is physically viewed by staff. Inmates are forbidden to create any obstruction, or otherwise inhibit any line of sight, which would create a temporary "blind spot" within the facility. Video monitoring systems are also strategically placed

throughout the facility to enhance security and surveillance. MRRJ Mecklenburg operates on a 12-hour rotation schedule with two-day shift squads and two-night shift squads. The MRRJ has four sworn supervisory Shift Commanders who hold the rank of Sergeant and manage both day and night shifts. Each day shift consists of one (1) shift supervisor, Sergeant, and a minimum of three (3) post officers that are assigned to confinement and intake duties. Each night shift consists of one (1) shift supervisor sergeant and a minimum of three (3) post officers that are assigned to confinement and intake duties. These supervisory levels have been shown to be appropriate through many years of operating at this level, and they coincide with generally accepted, best practices.

Since the last PREA audit, the average daily population of inmates at MRRJ Mecklenburg was 0 and the current staffing plan was predicated on 80 inmates housed at the facility. This facility has been closed since January of 2021.

During the interview with the Facility Head, he was asked if the facility had a staffing plan and if the staffing levels to protect inmates from sexual abuse were considered in the plan, if video monitoring is part of this plan, and if the staffing plan is documented. The Facility Head confirmed, "Yes" to all the above questions. The Facility Head also confirmed that when reviewing the staffing plan on an annual basis they consider all the above matters. The Auditor also interviewed the PCM and asked if the above considerations are weighed when developing the staffing plan. The PCM explained that they were considered. The staffing plan is developed for 126 full-time security staff and 26 civilian staff members at the Alberta Facility. Finally, the facility provided copies of the 2026 Staffing Plan review and acknowledgement memorandum that indicate the Deputy Superintendent, Captain of Security, PREA Coordinator, and PREA Compliance Manager were all in attendance where they reviewed and signed off on the MRRJ Alberta staffing plan.

During the on-site facility tour, the Auditor looked for potential blind spots, camera placement, and understaffing or overcrowding situations. The Auditor observed and documented the staff to inmate ratio in each housing block and the number of supervisors present and working alongside staff.

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

115.13 Provision (b)

MRRJ PREA policy 9A-02 states that; "In circumstances where the staffing plan is not complied with, the Superintendent shall document and justify all deviations from the plan."

During the interview with the Facility Head, he was asked if the facility documents all instances of non-compliance with the staffing plan. The Facility Head stated that, "Yes, it is documented and the explanation for not meeting the plan must be justified. However, they have never had that situation"

The annual staffing plan review notes indicated that the attendees acknowledged that they have acceptable staffing levels given their low inmate population and that there had been no instances where the facility fell below the staffing levels while utilizing overtime personnel.

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

115.13 Provision (c)

MRRJ PREA policy 9A-02 states that, "Whenever necessary and each year at the time of budget presentation, the Superintendent, in conjunction with the PREA Coordinator, shall access, determine, and document whether adjustments are needed to the staffing plan, the facility's deployment of video monitoring systems and other monitoring technologies, and the resources the Authority has available to commit to ensure adherence to the staffing plan."

MRRJ has provided staffing plan reviews for the past four years. The PREA Coordinator prepared the 2025 and 2026 review memoranda and submitted them to the Superintendent as documentation of the reviews. These meetings addressed the Alberta Facility's staffing plan. The records show that MRRJ reviews the plan at the beginning of each fiscal year, which runs from July through June, typically documented between July and August. Each review assessed and documented whether adjustments were needed to the established staffing plan, the deployment of additional video monitoring or other monitoring technologies, and the resources available to ensure compliance with the plan.

During the PREA Coordinator interview, the coordinator was asked if he is consulted regarding any assessments or adjustments to the staffing plan. The coordinator stated that the staffing plan is reviewed annually and that the PREA Coordinator is present during the meeting and must review and acknowledge all staffing plan documentation.

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

115.13 Provision (d)

MRRJ PREA policy 9A-02 states that; "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. Staff are prohibited from alerting other staff members when the Supervisor is conducting their supervisor rounds. Any violations will result in disciplinary actions."

MRRJ provided 22 pages of Unit Activity Logs documenting unannounced PREA

	supervisory rounds conducted over the past three years in multiple housing units on both day and night shifts. The logs identify the supervisors, shifts, housing units, and times associated with the rounds. During the on-site review, the Auditor examined several Officer Unit Logbooks at security posts and confirmed that these unannounced rounds were being conducted. During the interview process, the Auditor interviewed an intermediate or higher-level supervisory staff member about unannounced rounds. The supervisor was asked if they conduct unannounced rounds and if they documented those rounds. The supervisor stated that, "Yes, they perform unannounced rounds and that they are documented on the 'Unit Logbook.'" When asked how the supervisor would prevent staff from alerting other staff members about unannounced rounds; The supervisor responded that they approach the post from different directions at random times. The supervisor further indicated that if staff alert other staff members that these supervisory rounds are being conducted then staff members could face disciplinary actions. The evidence collected for this provision shows that the agency has a written policy that addresses performing unannounced rounds. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring the agency to have supervision and monitoring. The agency has provided staffing plans for both Alberta and Mecklenburg facilities. As stated before, the Mecklenburg facility is closed. However, the policies and staff members interviewed would be identical and used in both facilities.
--	---

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) 17 months of Population Analysis Observations made during the On-site Audit and Document Review

	115.14 Provision (a) MRRJ PREA policy 9A-02 states that, “Meherrin River Regional Jail will make every effort to keep youthful inmates separate from adult inmates. Youthful inmates will not be placed in any housing unit within sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping area.” The facility provided the Auditor with 17 months of population analysis of age ranges by date through their “Jail Tracker” jail management system for January 2025 through July 2026. The Auditor found no evidence of a juvenile being committed to the MRRJ within that timeframe. The facility also reported no instances of housing any juveniles during this rating period. If the facility was to receive a juvenile committed to their custody by court order the PCM explained that juveniles would be housed in classification cells located in the Intake Center but completely removed from all other inmate housing units. The Auditor did not conduct interviews with line staff that supervise youthful inmates or youthful inmates because no staff member has had experience with that situation and there were no youthful inmates present at the time of the onsite audit. 115.14 Provision (b) &(c) MRRJ PREA policy 9A-02 states that, “Meherrin River Regional Jail will make every effort to keep youthful inmates separate from adult inmates. Youthful inmates will not be placed in any housing unit within sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping area.” The MRRJ has not held or housed any youthful inmates during this rating period During the on-site tour of the physical plant, the Auditor did not witness any youthful inmates housed in the general or restricted housing units. After conducting 48 interviews with staff and inmates there was no evidence to suggest that the MRRJ houses youthful inmates. Also, no interviews were conducted for this standard because there have been no incidences involving youthful inmates. Therefore, this standard is not applicable, however, the agency does have policies and procedures in place to manage youthful inmates when these situations occur. Conclusion: Based upon the review and analysis of all the available evidence the PREA Auditor has determined that the facility is fully compliant with this standard. Neither the Alberta nor Mecklenburg facilities house juvenile inmates.
--	--

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard

Auditor Discussion

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

Documents:

- a) MRRJ PREA Policy 9A-00
- b) MRRJ Statement of Fact memorandum dated 08/17/2026
- c) Searches of LGBTQ & Cross-gender searches Lesson Plan
- d) MRRJ Semi-annual PREA Training Acknowledgment Report
- e) MRRJ PREA Training Modules
- f) MRRJ New-Hire Training Acknowledgement forms
- g) MRRJ Zero-Tolerance Lesson Plan

Interviews:

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

Observations made during the On-Site Audit and Document Review

115.15 Provision (a)

The MRRJ houses both pre-trial detainees and convicted inmates for the counties of Brunswick, Dinwiddie, and Mecklenburg. The facility also houses both male and female inmates. MRRJ PREA policy 9A-02 states that, "The Meherrin River Regional Jail employees will not conduct cross-gender strip searches or cross-gender visual body cavity searches (anal or genital opening) except in exigent circumstances or when performed by medical staff only."

There were no examples of exigent circumstances in the last 12 months where a cross-gender strip search had to be conducted, and it's against policy. When conducting the on-site review of the facility, the Auditor observed adequate female staff to accommodate any day-to-day operations involving gender specific searches. When interviewing the non-medical staff responsible for conducting strip searches, the officer was asked under what circumstance would it require a cross-gender strip search. The officer replied that she could not think of any circumstances that would constitute the need to cross gender strip-search an inmate of the opposite gender unless in a life-threatening situation.

The facility provided a statement of fact in a memorandum indicating that the MRRJ has not conducted cross-gender strip searches or cross-gender visual body cavity searches during this rating period.

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

115.15 Provision (b)

MRRJ PREA Searches Training Lesson Plan page 12, slide 29 states that; "It is the policy of MRRJ that no male or female staff members will conduct cross-genders searches of a male or female inmates."

During the on-site phase, the Auditor interviewed 12 random staff members from both day and night shifts. When asked, "If female staff are not available to search female inmates does the jail limit those inmates' access to programs?" All twelve officers stated no, it had never occurred, and the supervisory staff would ensure if the shift was short female officers, then a female officer would be called in to cover that shift. In addition, 21 inmates were interviewed during the on-site phase of the audit. Out of those 21 inmates interviewed, 3 of them were female. When asked by the Auditor if they had ever been unable to participate in activities outside their cell because of the lack of female officers to perform pat searches all 3 stated, "No."

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

Recommendation: The Auditor is recommending that the facility include specific language to their PREA policy that specifies cross-gender pat-down searches of female inmates are not permitted except in exigent circumstances.

115.15 Provision (c)

MRRJ PREA policy 9A-02 states that, "All cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches of female inmates will be documented."

The facility reported that there were no instances regarding the need to document a cross-gender pat-search that occurred during this rating period.

The evidence collected for this provision shows that the facility has a written policy and training that prohibits staff from conducting cross-gender strip searches and

cross gender visual body cavity searches, except in exigent circumstances when performed by medical practitioners. Therefore, through written policy, the facility has demonstrated that it meets this provision.

115.15 Provision (d)

MRRJ PREA policy 9A-02 states that, "Inmates 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." The policy further states that; "Staff will announce 'Male on the Floor' or 'Female on the Floor' anytime the opposite gender enters an inmate housing unit. This announcement will be documented in the unit logbook."

When conducting the site review, the Auditor observed half wall partitions separating toilets from view, full shower curtains with clear plastic at the bottom to view the calf down to the ankle for privacy when showering, and monitoring screens that did not have camera coverage in these specific areas so staff could not view inmates when using the restrooms or showers. The Auditor also witnessed officers announce their presence when entering a housing block of inmates of the opposite sex. Finally, the facility provided the Auditor with Unit Logbooks with notations made by officers documenting their opposite gender announcements. The Auditor also reviewed several of these Unit Logbooks on posts during the facility tour to confirm practice.

During the on-site phase, the Auditor interviewed both random staff and inmates. The 12-random staff were asked if they or other officers announce their presence when entering a housing unit of inmates of the opposite sex. All 12 officers stated that they do. When asked if inmates can dress, shower, and use the restroom without being viewed by officers of the opposite sex, 12 officers stated yes. The Auditor also interviewed 17 random inmates and 4 targeted inmates. When asked if officers of the opposite gender announce their presence when entering the housing block; 20 inmates stated yes, and 1 inmate indicated no. When asked if they, or other inmates, are ever naked in full view of officers of the opposite gender all 21 inmates stated no, that they are not.

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

115.15 Provision (e)

MRRJ PREA policy 9A-02 states that, "Staff will not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the genital status is unknown, it may be determined during

conversations with the inmate, reviewing medical records, or as part of a broader medical examination conducted in private by medical personnel.”

When interviewing random staff, they were asked if they were aware of the agency’s policy prohibiting staff from searching or physically examining a transgender person for the sole purpose of determining the inmate’s genital status. All random officers that were interviewed stated that yes, they are aware and searching for the sole purpose of identifying gender is prohibited. At the time of this audit, the MRRJ informed the Auditor that there were no transgender inmates housed in their facility. Therefore, a transgender or intersex inmates’ perspective could not be obtained during the on-site interview phase of this audit.

The evidence collected for this provision shows that the agency has a written policy that directs staff not to search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate’s genital status. The interviews conducted with random staff confirmed that these policies are being practiced by staff.

This provision of this standard is no longer applicable.

115.15 Provision (f)

MRRJ does not conduct cross-gender pat searches except in exigent circumstances. The agency provided training records and curricula showing that staff received instruction on professionally conducting cross-gender pat searches and searches of transgender and intersex inmates. During the on-site review, the Auditor interviewed 12 randomly selected staff members about whether, and when, they had received this training. Nine officers reported receiving the training, including six who said they received it upon hire. Two officers stated that they had not received the training, and one stated that only female staff may search female inmates.

The evidence collected for this provision shows that the agency has a written policy that directs security staff to be trained on how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner. The interviews conducted with random staff confirmed that these policies are being practiced by staff. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring the agency to have limits on cross-gender viewing and searches.

The policies, procedures, training, and protocols that govern this standard provided by the MRRJ are the same exact procedures used when the Mecklenburg Facility is operational. In addition, the staff interviewed during this audit are the same staff that would be assigned to supervise and manage the Mecklenburg facility, if it were to reopen.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) MRRJ Inmate Handbook in both English & Spanish c) MRRJ Semi-annual PREA Training Acknowledgement d) ADA Resources; Fluentalk Portable Translator, Ubi Duo, and C*Pen Readerpen Secure e) Voiance Language Line Contract f) Voiance Language Services Invoice g) Intake PREA Handout in both English & Spanish h) PREA Informational Posters in both English & Spanish i) PREA Inmate Acknowledgement in both English & Spanish j) Inmate PREA educational video in both English & Spanish Interviews: a) Agency Head b) Random Staff c) Inmates with Disabilities or limited English proficient 115.16 Provision (a) MRRJ PREA policy 9A-02 states that, “The Intake Officer, during the intake process, will identify inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities.) The Intake Officer will generate a list of names daily and forward to the Deputy Superintendent. A language line is offered at no cost to the inmate and is located in intake and medical.” The agency provided documentation of MRRJ’s contract with Voiance Language Services for interpretation services. The contract provides qualified American Sign Language (ASL) interpreters for face-to-face video interpretation through a tablet, as

well as foreign-language interpretation by telephone. The facility also equips staff with a Fluentalk Portable Translator, which supports voice translation in 40 languages and 93 dialects and includes one-click, chat, listening, and photo translation modes. In addition, the facility uses a Ubi Duo, a split-screen device that enables direct, face-to-face text communication among individuals who are deaf, hard of hearing, late-deafened, or hearing. The facility also uses a C*Pen ReaderPen, an assistive literacy device that scans words, lines, or paragraphs and reads the text aloud through a built-in speaker or earphones. The MRRJ provides an Inmate PREA training video in English and Spanish, closed caption for those inmates that are deaf or hard of hearing and audio for those inmates that may be blind or have limited vision. During the site review, the Auditor observed the PREA Posters located in the housing units in both English and Spanish and watched the PREA video.

The Agency Head was interviewed and was asked if his agency has established procedures to provide inmates with disabilities and inmates who are limited English the ability to participate in, or benefit from, all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Agency Head/Designee stated that, "Yes, his staff is aware of the Language Line Services that are provided." In addition, one inmate identified as disabled was interviewed during the on-site review phase. The inmate was asked if the facility provided information about sexual abuse that he was able to understand, and if not, did the facility provide someone to help, write, read, or explain? Finally, did the inmate understand the information that was provided? The inmate stated, "Yes" to these questions explaining that the nursing staff assists in the day-to-day interactions.

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

115.16 Provision (b)

MRRJ PREA policy 9A-02 states that, "A language line is offered at no cost to the inmate and is located in intake and medical."

The Inmate Intake Brochure is available for inmate review during the Booking and Processing stages. The Brochure is available in both English and Spanish. The Intake Officer ensures inmates waiting for the Initial Housing Assessment have the opportunity to review the brochure and acknowledges the information by signing for it. The second phase of the inmate educational information is that a PREA video runs daily during mealtime in which the channels cannot be changed, and the video is provided in both English and Spanish. In addition, the MRRJ Handbook is made available on the inmate tablet in both English and Spanish.

The agency has provided documentation of contracts between Voiance Language Services and the MRRJ to provide interpreting services. The facility provided a Spanish-Inmate PREA Training Acknowledgement form that the inmate signs

acknowledging receiving the PREA training. During the site review, the Auditor observed PREA Posters and PREA brochures located in the housing units both in English and Spanish.

During the interview, the Agency Head was asked whether the agency had established procedures enabling inmates with disabilities and limited English proficiency to participate in and benefit from all aspects of its efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Agency Head/ Designee confirmed that staff are aware of the available Language Line services.

The Auditor interviewed two inmates with limited English proficiency. They were asked whether the facility provided information about sexual abuse in a form they could understand and if needed, whether someone was available to help them write, read, or understand the information. Both inmates stated that they received the facility handbook in Spanish. One inmate also reported that the facility typically uses a telephone interpretation service to communicate important information.

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

115.16 Provision (c)

MRRJ PREA policy 9A-02 states that, "The Meherrin River Regional Jail shall not utilize inmate interpreters, inmate 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."

During the audit interview process, the Auditor asked 12 random staff if the facility ever allows the use of inmate interpreters. From that, 8 officers stated that they would not use inmate interpreters and 4 staff members stated that they would. When asked further about when and how, no officer could reflect back on a situation where an inmate interpreter was used. When asked why they would use an inmate interpreter, all 4 officers stated when the alleged victim could not communicate the situation in English.

The evidence collected for this provision shows that the facility has a written policy that addresses that the facility shall not rely on inmate interpreters. Therefore, through written policy, observations, and interviews conducted the facility has demonstrated that it meets this provision.

Recommendation: The Auditor is recommending refresher training be provided to security staff regarding in what circumstances an inmate interpreter can and should be used to assist in making an alleged sexual abuse report at the MRRJ.

	Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant and exceeds this standard referencing requirements for inmates with disabilities and inmates who are limited English proficient having equal opportunity or benefiting from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility has numerous technology equipment and options to communicate with inmates that have disabilities or limited English proficient. The policies, procedures, and protocols that govern this standard provided by the MRRJ are the same exact procedures used when the Mecklenburg Facility is operational. In addition, the staff interviewed during this audit is the same staff that would be assigned to supervise and manage the Mecklenburg facility if it were to reopen. The Auditor conducted a facility tour of the Mecklenburg facility and found the appropriate PREA posters both in English and Spanish displayed in every housing unit. There were TV monitors and phones also stationed in each unit.
--	---

115.17 Hiring and promotion decisions	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Sexual Misconduct Information Release forms c) VCIN Security Staff Background Checks d) VCIN Contractor/Volunteer Background Checks e) VCIN 5-year Background Checks excel spreadsheet f) MRRJ Staff Employee Files Interviews: a) Interview with Human Resources Staff Observations made during the On-Site Audit and Document Review 115.17 Provision (a)

MRRJ PREA policy 9A-02 states that, "A criminal background records check will be conducted before hiring new employees or enlisting services from volunteers or contractors, who may have contact with inmates. The Meherrin River Regional Jail will not hire or promote anyone or enlist the services of any contractor, who may have contact with inmates, that:

Ø Have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution.

Ø Have 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.

Ø Have been civilly or administratively adjudicated to have engaged in sexual activity."

During the audit's file review, the Auditor sampled 12 personnel files. All 12 documented an initial criminal history check and completion of subsequent checks on a five-year cycle. The facility also provided examples of MRRJ Sexual Misconduct Information Release forms showing that staff answered the sexual misconduct questions and signed and dated the forms during initial hiring, annual performance evaluations, and promotional processes. During the interview, the Human Resources staff member stated that background checks are conducted for all newly hired employees and contractors. The facility provided documentation of these background investigations, along with a VCIN list showing five-year background checks for security staff and contractors.

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

115.17 Provision (b)

MRRJ PREA policy 9A-02 states that, "The Jail shall consider any incidents of sexual harassment in determining whether to hire or promote or enlist services."

During the audit interview, the Human Resources staff member was asked whether the agency considers prior incidents of sexual harassment when making hiring and promotion decisions or engaging contractors. She confirmed that such incidents are considered when reviewing new-hire applications and employee evaluations, and that the information is forwarded to the Deputy Superintendent and Superintendent for final approval.

The evidence collected for this provision shows that the facility has a policy requiring the consideration of any incidents of sexual harassment in determining whether to

hire or promote anyone. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.

115.17 Provision (c)

MRRJ PREA policy 9A-02 states that, “A criminal background records check will be conducted before hiring new employees or enlisting services from volunteers or contractors, who may have contact with inmates. Consistent with federal, state, and local law, MRRJ makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.”

During the audit interview, the Human Resources staff member was asked whether the facility conducts criminal history checks for all newly hired sworn employees, employees considered for promotion, and contractors who may have contact with inmates. She stated that the agency uses the VCIN system to conduct checks on all new hires, volunteers, contractors, and current employees every five years. The facility investigators also complete the checks. The Auditor reviewed 12 personnel files and found evidence of an initial VCIN background check in each file, as well as recurring five-year checks in several files. The facility also provided Applicant Summary forms documenting the date of each check and the initials of the facility investigator who conducted it. A record-check log identified each person screened, the date, and the reason for the check, including pre-employment screening. Of the 12 employee files reviewed, five also contained institutional reference checks for employees previously employed by a law enforcement agency, regional jail, or state correctional facility.

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

115.17 Provision (d)

MRRJ PREA policy 9A-02 states that, “A criminal background records check will be conducted before hiring new employees or enlisting services from volunteers or contractors, who may have contact with inmates.”

During the audit interview process, the H.R. staff member was asked if the facility performs criminal record background checks for all newly hired sworn employees considered for promotion and any contractor that may have contact with inmates. The H.R. staff member stated that; “The facility performs a criminal record check on all volunteers, contractors, prior to having access to the facility and every five years after that through the VCIN system.” The facility provided several examples of contractors’ background investigations that documented a VCIN criminal history record being run prior to enlisting their services.

The evidence collected for this provision shows that the facility has a policy requiring that criminal records be run on all new contractors that have contact with inmates.

Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

115.17 Provision (e)

MRRJ PREA policy 9A-00 states that, "Criminal background records checks will be conducted on all current employees, volunteers, and contractors, who may have contact with inmates at least every five (5) years."

During the audit interview process, the H.R. staff member was asked if the facility performs criminal record background checks for all sworn employees and any contractor that may have contact with inmates. The H.R. staff member stated that; "The agency performs a criminal record check on all new hires, volunteers, contractors, and current employees every five years through the VCIN system." The Auditor reviewed 12 personnel files. The Auditor determined that all the staff files contained a record of a criminal background check and those employed for more than five years also had evidence of the five-year background check. The facility also provided the Auditor with Applicant Summary applications from contractors and volunteers where the background investigator documented when a query was run on the applicant in VCIN with their initials and date the history was run.

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

115.17 Provision (f)

MRRJ PREA policy 9A-02 states that, "All applicants and employees, who may have contact with inmates, will be asked directly about previous misconduct in all written applications, interviews for hiring or promotion, or during written evaluations. Employees must disclose any such misconduct. Any material omission or false information regarding misconduct will be grounds for termination."

The MRRJ requires all sworn staff to answer the Sexual Misconduct Release Questionnaire as part of the hiring process. The agency also requires all candidates participating in a promotional process to answer the Sexual Misconduct Information Release Questionnaire while in this process. Finally, the agency requires all staff that have contact with inmates to answer the questionnaire during the annual performance evaluation. The form is used for all three situations and there is a section on the form to indicate what purpose the form was used for. Furthermore, the document states that, "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." This form is then acknowledged by the employee/contractor, signed, and dated.

During the interview with the H.R. staff member, she was asked if the facility asks all applicants and employees about previous misconduct regarding inmates and does

the facility impose upon employees a continuing affirmative duty to disclose previous misconduct. The H.R. staff member stated that the agency has a list of questions that must be answered during the applicant's interview as part of the background investigation. She also stated that, "Yes, all employees must report any misconduct or interaction with law enforcement."

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

115.17 Provision (g)

MRRJ PREA policy 9A-02 states that, "Employees must disclose any such misconduct. Any material omission or false information regarding misconduct will be grounds for termination."

There are no examples or circumstances during this audit rating period to provide as proof or documentation for this provision.

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

115.17 Provision (h)

MRRJ PREA policy 9A-02 states that, "The Meherrin River Regional Jail will 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."

The H.R. staff member was asked during the interview, "If a former employee applies for work at another institution and a request by that institution is made, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving that former employee?" The H.R. staff member stated that she would require a signed release of information from the requesting agency prior to allowing the background investigator to review the former employee's personnel file.

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

Conclusion:

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

	promotional decisions. The policy and procedures in place to hire MRRJ staff do not differentiate between facilities. Therefore, regardless of what facility a staff member is assigned, the same exact procedures are followed.
--	--

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) 2025 PREA Data Collection & Review Interviews a) Interview with Agency Head b) Interview with Facility Head Observations made during the On-Site Audit and Document Review 115.18 Provision (a) MRRJ PREA policy 9A-02 states that, “The Meherrin River Regional Jail will consider the Jail's ability to protect inmates from sexual abuse during any planned expansions, modifications, or video equipment updates to the Jail.” The agency has reported that there have been no new expansions or modifications to either facility since the last PREA Audit. During the audit interviews, the Agency Head was asked how the agency considers the impact of substantial facility modifications on its ability to protect inmates from sexual abuse. The Agency Head stated, “One of the first considerations is ensuring adequate coverage and identifying potential blind spots, camera angles, and toilet and shower locations.” The Facility Head was asked the same question and stated, “There have been no renovations to the facility since 2021.” The evidence collected for this provision shows that the facility shall consider the effect of such design to improve the ability to protect inmates from sexual abuse. Therefore, through personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

	Provision B: MRRJ PREA policy 9A-02 states that, “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.” The facility has provided a copy of the 2025 PREA Data Collection and Review memo authored by the Deputy Superintendent. This document indicates that in 2022, the facility upgraded the electronic monitoring system which expanded their capability to review film footage of inmate actions and staff actions. Cameras were added to all intake cells. There was also a security electronic upgrade replacing existing cameras with newer version cameras that allowed for better coverage and technology. The facility did report that a camera was added to the laundry room in the Mecklenburg facility due to a recommendation by the PREA Auditor during the last 2023 PREA Audit. The Auditor toured this facility and observed the additional camera. This facility has been closed since January 7, 2021. During the audit interviews, the Agency Head was asked how monitoring technology is used to protect inmates. The Agency Head explained that cameras are added as needed to improve coverage, address potential blind spots and camera angles, and to preserve video footage as evidence. In response to the same question, the Facility Head stated that video coverage had previously been added to address blind spots, review areas where incidents occurred, and to monitor cleaning and storage closets. During the on-site review tour, the Auditor observed security cameras and monitors located throughout the facility. The evidence collected for this provision shows that the facility has considered how technology may enhance the facility’s ability to protect inmates from sexual abuse. Therefore, through written memorandums, personal observations, and interviews conducted the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard addressing upgrades to facilities and technology.
--	---

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) MRRJ PREA Policy 9A-00
- b) Memorandum of Understanding (MOU) between Meherrin River Regional Jail and the Brunswick County Sheriff's Office (BCSO) (Effective date 09/02/2025)
- c) Memorandum of Understanding (MOU) between Meherrin River Regional Jail and the Mecklenburg County Sheriff's Office (MCSO)(Effective date 08/29/2025)
- d) Brunswick County Sheriff's Office (BCSO) General Order (GO) Sexual Assault
- e) Memorandum of Understanding (MOU) between Meherrin River Regional Jail and the Virginia Commonwealth Health System Authority & VCU Injury and Violence Prevention Program (IVPP) (Effective date 11/04/2025)
- f) Memorandum of Understanding (MOU) between Meherrin River Regional Jail and the James House(Effective date 09/19/2025)
- g) The James House Handout Brochure
- h) Statement of Fact memorandum dated 10/20/2025

Interviews

- a) Interview with SANE/SAFE staff
- b) Interview with inmate who reported a sexual abuse
- c) Interview with the PREA Coordinator
- d) Interviews with Random Staff

Observations during on-site review of physical plant

115.21 Provision (a)

During the review phase of the Pre-Audit Questionnaire, the Auditor reviewed the standing Memorandum of Understanding (MOU) between the MRRJ, the BCSO, and MCSO. These MOUs indicated that the BCSO and MCSO were responsible for all criminal investigations that occur in the facility for which the alleged sexual abuse occurred. If the alleged incident occurred in the Alberta facility, then the BCSO would conduct the criminal investigation. If the alleged incident occurred in the Mecklenburg facility, then the MCSO would take lead on all criminal investigations. The PREA Coordinator confirmed this practice. The PREA Coordinator explained the BCSO would conduct all criminal sexual assault investigations at the Alberta facility. On 08/19/2026, the Auditor interviewed a BCSO Deputy to establish if they did in fact conduct alleged sexual assault criminal investigations at the Alberta facility. The Sheriff's Deputy explained that he is employed with the MRRJ to conduct all criminal and administrative investigations at the facility. He further explained that they do in fact investigate all criminal sexual assault allegations and acknowledged that the only

requirement needed to send an investigator is an official request from the facility or call for service. The BCSO is responsible for investigating allegations of sexual crimes that occur within the MRRJ and is familiar with PREA standard 115.21 pertaining to the investigation of sexual assaults, the collection of evidence, and forensic examinations. The Deputy informed the Auditor that his agency is responsible for collecting both physical and circumstantial evidence and that the MRRJ is responsible for securing the scene and preserving the evidence. Furthermore, the MRRJ provided PREA policy 9A-03 that states; "The MRRJ follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. As part of MRRJ's evidence collection protocol, all victims of inmate-on-inmate sexually abusive penetration or staff- on-inmate sexually abusive penetration are provided access to forensic medical exams performed by a Sexual Assault Nurse Examiner (SANE) at Virginia Commonwealth University (VCU). Forensic medical exams are provided free of charge to the victim. The James House makes available a victim advocate to accompany the victim through the forensic medical exam process, investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. 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 Investigator will accompany the SANE during the collection of forensic evidence and receive a statement from the inmate. The Brunswick County Sheriff's Office will contact the Commonwealth's Attorney's Office for prosecution."

Interviews with 12 randomly selected staff members confirmed that they all understood their responsibilities for preserving evidence following an allegation of sexual abuse. Staff described securing the scene, immediately notifying a supervisor, contacting medical personnel, preparing a detailed report; and instructing the alleged victim and alleged abuser not to shower, bathe, use the bathroom, or brush their teeth. All 12 staff members also identified the BCSO/MRRJ Facility Investigator as responsible for both criminal and administrative investigations. Accordingly, all staff interviewed demonstrated an understanding of the facility's evidence collection protocol.

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

115.21 Provision (b)

The facility reported that they had not housed any youthful inmates in their facility over the last twelve months. The MRRJ has entered into an MOU with both the BCSO and MCSO to conduct criminal investigations within the facilities of each jurisdiction. The MRRJ provided evidence that the Brunswick County Sheriff's Office has been accredited by the Virginia Law Enforcement Professional Standards Commission. This Commission certifies accreditation for Law Enforcement Agencies within Virginia and is considered the professional standard in Public Safety in the state. By being

accredited by VLEPSC, this would suggest that all necessary protocols would be adapted and followed on the most recent edition of the Department of Justice (DOJ's) Office on Violence Against Women publication in accordance with this standard.

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

115.21 Provision (c)

MRRJ PREA policy 9A-03 states that, "As part of MRRJ's evidence collection protocol, all victims of inmate-on-inmate sexually abusive penetration or staff- on-inmate sexually abusive penetration are provided access to forensic medical exams performed by a Sexual Assault Nurse Examiner (SANE) at Virginia Commonwealth University (VCU). Forensic medical exams are provided free of charge to the victim. The James House makes available a victim advocate to accompany the victim through the forensic medical exam process, investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals."

The facility has reported in the Pre-Audit Questionnaire that the facility did not experience any sexual abuse allegation requiring a forensic examination by a SAFE/ SANE nurse or physician during this rating period. In addition, during the interview with the PREA Coordinator, he stated that the agency did not have a situation where an inmate was referred to the hospital for a forensic examination.

Following the on-site audit at the MRRJ, an interview was conducted by the Auditor with a supervisor of the Sexual Assault Nurse Examiners (SANE). The interview was conducted by phone with the supervisor who is employed with the Virginia Commonwealth University Hospital IVPP located in Richmond, Virginia. A SANE nurse is a highly skilled certified nurse trained in the art of evidence collection and chain of custody. The nurse is considered the subject matter expert in collecting evidence after an alleged sexual assault has occurred. The nurse is also required to provide testimony in court cases related to sexual abuse. The Nurse Supervisor explained that she was aware of the MOU between the MRRJ and the VCU IVPP when it comes to conducting SANE exams. She explained that IVPP conducts SANE exams for the surrounding jurisdictions. When asked if the VCU Hospital IVPP is responsible for conducting all forensic medical exams for the MRRJ, the SANE Supervising Nurse stated, "Yes, they are. The hospital offers forensic services." When asked if SANE staff is unavailable to conduct forensic medical examinations, then who assumes the responsibility? The SANE Nurse replied, "That would never happen, there are nurses always on call 24 hours a day, 7 days a week, 365 days a year." If for some reason that would occur, then VCU would send the alleged victim to another hospital with SANE capabilities or have the alleged victim wait until a SANE could arrive or finish the task at hand.

As of the date of the on-site audit, the facility reported in the last 12 months there has been no forensic medical examinations performed by a SANE or SAFE.

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

115.21 Provision (d)

MRRJ PREA policy 9A-03 states that, "The James House makes available a victim advocate to accompany the victim through the forensic medical exam process, investigatory interviews and shall provide emotional support, crisis intervention, information and referrals."

The MOU between the MRRJ and The James House agrees to provide twenty-four-hour telephone crisis intervention counseling via their 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 in 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.

The Auditor has reviewed The Center's website to determine that this advocacy group does meet all the criteria listed above to be considered a "rape crisis center" and is the only accredited non-profit rape crisis center in the Greater Tri-Cities Region in Virginia.

The PCM was interviewed and stated that staff would allow access to a victim advocate if the inmate requested. The PCM also stated that the facility would provide access to the James House through the phone or mail advertised on each poster in every block or in the Inmate Handbook. Finally, one inmate that reported sexual abuse was interviewed during the on-site interview process. He was asked if the facility allowed them to talk to anyone or asked if they wanted to speak with an advocate. The inmate reported no advocate was referred to him but was asked if he wanted to speak with a mental health professional. It should be noted that this sexual abuse allegation was unfounded.

During the on-site review, the Auditor spoke to several inmates who confirmed the availability to contact The James House via phone. The Auditor also tested the phone system to ensure a call could be accomplished inside a housing block. This demonstrates the agency's attempt to make available to victims of sexual abuse a victim advocate from a rape crisis center.

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

115.21 Provision (e)

MRRJ PREA policy 9A-03 states that, "The James House makes available a victim advocate to accompany the victim through the forensic medical exam process, investigatory interviews and shall provide emotional support, crisis intervention, information and referrals."

The MOU between MRRJ and The James House indicates that; "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 in 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."

The PREA Coordinator reported that no sexual abuse allegations during the rating period required a forensic examination by a SAFE/SANE nurse or physician. When asked how the agency verifies that advocates meet the qualifications described above, the coordinator explained that advocacy services are provided by an accredited rape crisis center.

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

115.21 Provision (f)

MRRJ PREA policy 9A-03 states that, "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. In addition, the MOU between the MRRJ and BCSO stipulates that the BCSO agrees to:

- Provide, upon request by the Meherrin River Regional Jail, an investigation into criminal allegations of sexual abuse.
- To meet with the victim and the Sexual Assault Nurse Examiner (SANE) at Virginia Commonwealth University (VCU) 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.
- To follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for MRRJ administrative proceedings and criminal prosecutions.
- To adapt its 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. · To inform MRRJ administration in regard to the progress of the criminal investigation." The evidence collected for this provision shows that the facility has demonstrated that the Brunswick County Sheriff's Office follow the provisions outlined in this provision. Therefore, through written policy, and memorandums of understanding, the agency has demonstrated that it meets this provision. Conclusion Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring the agency to provide evidence protocols and forensic medical evaluations. This practice and procedure would also be used with the Mecklenburg facility, if it were to reopen. The MOU agreement with The James House advocate is between the MRRJ Authority which includes the Mecklenburg facility, as does the MOU with the VCU IVPP forensic examinations. Finally, there is an MOU in place with the Mecklenburg Sheriff's Office to allow that agency to conduct all criminal investigations that may occur at the Mecklenburg facility.
--	---

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Memorandum of Understanding (MOU) between Meherrin River Regional Jail and the Brunswick County Sheriff's Office (BCSO) (Effective date 09/03/2025) c) Memorandum of Understanding (MOU) between Meherrin River Regional Jail and the Mecklenburg County Sheriff's Office (MCSO)(Effective date 09/03/2025) d) Meherrin River Regional Jail website Interviews:

- a) Interview with Agency Head
- b) Interview with Investigative Staff

Observations made during the On-site Phase of the Audit

115.22 Provision (a)

MRRJ PREA policy 9A-03 states that, “The Superintendent will ensure all allegations of sexual abuse and sexual harassment, including third party and anonymous reports, are reported to the designated investigators. The Superintendent or designee will coordinate such investigations to ensure the investigations are conducted promptly. 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.”

In the past twelve months, the MRRJ reported that they had received 12 allegations of sexual abuse and/or sexual harassment. The facility has reported that 12 resulted in administrative investigations and 0 cases have been turned over to the BCSO for criminal investigation. While on-site, the Auditor reviewed 10 administrative investigations.

During the interview, the Agency Head confirmed that the agency completes an administrative or criminal investigation for every allegation of sexual abuse or sexual harassment. He explained that upon receiving an allegation, a shift supervisor conducts an initial inquiry. Matters that appear administrative are referred to the Facility Investigator, while matters that appear criminal are referred to the Brunswick County Sheriff's Office.

The agency has two MOUs in place for both the Brunswick County Sheriff's Office (BCSO) and Mecklenburg County Sheriff's Office (MCSO) to conduct criminal investigations regarding sexual abuse allegations when probable cause exists. The particular agency will depend on which facility the alleged incident occurred. The BCSO investigates sexual abuse crimes in the Alberta facility, and the MCSO investigates sexual abuse crimes in the Mecklenburg facility. However, the Mecklenburg facility has been closed since 2021.

During the document review, the Auditor reviewed 10 case files that consisted of: 8 allegations of sexual harassment and 2 allegations of sexual abuse cases that were investigated by the Facility Investigator. All these allegations occurred in the Alberta facility because the Mecklenburg facility has been closed since January 2021.

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

115.22 Provision (b)

MRRJ PREA policy 9A-03 states that, "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. All Administrative Investigations are conducted by the MRRJ." In addition, the MOU between the MRRJ and BCSO states that; "The Brunswick County Sheriff's Office agrees to:

- Provide, upon request by the Meherrin River Regional Jail, an investigation into criminal allegations of sexual abuse.
- To meet with the victim and the Sexual Assault Nurse Examiner (SANE) at Virginia Commonwealth University (VCU) for criminal investigatory purposes.
- Allow a victim advocate, chosen by the victim, to accompany and support the victim during the criminal investigation and forensic evidence gathering.
- Follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for MRRJ administrative proceedings and criminal prosecutions.
- Adapt its 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.
- Inform MRRJ administration in regard to the progress of the criminal investigation."

The facility's public website contains a published statement regarding the investigative responsibilities and referrals for criminal investigations. The statement reads, "Administrative investigations are conducted by the Meherrin River Regional Jail Investigator. Criminal investigations are conducted by the Brunswick County Sheriff's Office for the Alberta site and criminal investigations are conducted by the Mecklenburg County Sheriff's Office for the Mecklenburg site."

During the on-site audit phase, the Auditor interviewed the Facility Investigator for the MRRJ. The investigator was asked if agency policy requires that allegations of sexual abuse be referred for investigation to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potential criminal activity. The investigator stated, "Yes, the agency has policy that directs all criminal investigations to be conducted by the BCSO or MCSO." In addition, the Auditor conducted an interview with a deputy from the BCSO. When asked if the BCSO is responsible for conducting criminal investigations involving sexual abuse at the MRRJ; The deputy indicated that, "Yes, they were." The deputy confirmed that the BCSO has the legal authority to conduct criminal investigations in the County of Brunswick.

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

	place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision. Provision (c) The MRRJ provided the published statement regarding the investigative responsibilities and referrals for criminal investigations. The statement reads, "Administrative investigations are conducted by the Meherrin River Regional Jail Investigator. Criminal investigations are conducted by the Brunswick County Sheriff's Office for the Alberta site and criminal investigations are conducted by the Mecklenburg County Sheriff's Office for the Mecklenburg site." The evidence collected for this provision shows that the facility and the outside law enforcement agency have procedures and responsibilities in place to ensure that the agency with criminal jurisdiction performs criminal investigations on all allegations of sexual abuse. Therefore, through written MOU, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring the agency to ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.
--	--

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Staff Training Acknowledgement Forms c) Semi-Annual PREA sign-off reports d) Zero-Tolerance Policy Lesson Plan e) MRRJ PREA Training PowerPoint Presentation f) MRRJ PREA Signatures Summary Report generated on 07/08/2026

Interviews:

a) Interview with Random Staff

Observations made during the On-Site Audit and Document Review

115.31 Provision (a)

The MRRJ PREA policy 9A-04 states that, "The MRRJ trains all employees who may have contact with inmates to comply with the PREA standards. Current employees are educated within one year following the adoption of the PREA standards. MRRJ will provide 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 shall provide refresher information on current sexual abuse and sexual harassment policies. Training shall be tailored to male and female inmates. MRRJ maintains written documentation showing employee signatures verifying employees understand the training they received. All Meherrin River Regional Jail employees, who have contact with inmates, will be trained on the following:

1. The Jail's zero-tolerance policy for sexual abuse and sexual harassment
2. The employee's responsibilities under the Jails' sexual abuse, sexual harassment, prevention, detection, reporting and response policy.
3. Inmates' rights to be free from sexual abuse and sexual harassment.
4. The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment.
5. 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 GLBTI inmate being at risk for violent assault.
6. The common reactions of sexual abuse and sexual harassment victims such as: hostility, withdrawn, denial, afraid of sexual transmitted diseases, and fear of staff.
7. 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.
8. How to avoid inappropriate relationships with inmates.
9. How to communicate effectively and professionally with inmates including lesbian, gay, bisexual, transgender, intersex, or other nonconforming inmates.
10. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities."

The MRRJ has provided their PREA Zero-Tolerance Training Lesson plan along with the MRRJ PREA PowerPoint Presentation. They have provided PREA In-Service Training

rosters along with semi-annual PREA sign-off reports and staff acknowledgement signature forms. Finally, the facility has generated an electronic report from their training system portal dated July 08, 2026, that lists all the staff that have contact with inmates' signatures acknowledging that they have received the necessary PREA training. The Auditor reviewed the PREA Zero-Tolerance Training Plan curriculum along with the PREA PowerPoint Presentation. This training included current MRRJ sexual abuse and sexual harassment policies and procedures, it also covered the above listed topics throughout the lesson plan and PowerPoint slides.

During the interview process, 12 random staff were asked if they had received PREA training and if so, when? All 12 officers indicated that they have received training. Nine officers stated that they received training both annually and when they attend in-service. Three officers indicated receiving training when they first got hired. When the Auditor reviewed staff files, it contained the dates of the initial training and proceeding PREA refresher training.

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

115.31 Provision (b)

The training provided to the MRRJ staff covers both male and female inmates. Therefore, there is no need to require additional training for gender specific facilities due to a transfer. Both the Alberta and Mecklenburg facilities house male and female inmates. Mecklenburg is currently closed.

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

115.31 Provision (c)

MRRJ PREA policy 9A-04 states that, "The MRRJ trains all employees who may have contact with inmates to comply with the PREA standards. Current employees are educated within one year following the adoption of the PREA standards. MRRJ will provide refresher information to all employees every two years to ensure that they know the department's most current sexual abuse policies and procedures. In years in which an employee does not receive refresher training, MRRJ shall provide refresher information on current sexual abuse and sexual harassment policies."

MRRJ provides annual PREA training. New employees receive initial training during new-hire orientation, while new contractors and volunteers receive training during orientation and annually thereafter. A review of 12 employee training records confirmed that all 12 employees completed initial PREA training. During interviews, all 12 staff members confirmed receiving the training, and nine reported completing

	refresher training. MRRJ also provided PREA attendance rosters and Training Section records documenting completion of the agency's annual refresher training. The evidence collected for this provision shows that the agency has provided initial and refresher PREA training to all their employees at least once a year. Therefore, through written policy and file review observations, the facility has demonstrated that it meets this provision. 115.31 Provision (d) MRRJ provided examples of employee training records generated from their training platform that makes the student/officer electronically acknowledge the training that was received and it requires the employee to sign, acknowledging that he/she understands the training that was provided. The facility provided this information in the MRRJ PREA Signatures Summary report generated on 07/08/2026. The facility also provided copies of staff training acknowledgement forms with signatures and dates. The evidence collected for this provision shows that the agency has provided documentation through employee signature, acknowledging that the employee understands the training received. Therefore, through written policy and file review observations, the agency has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency train all employees who have contact with inmates on its zero-tolerance policy for sexual abuse and/or harassment. Also, how to fulfill their responsibilities for preventing, detecting, reporting, and responding to sexual abuse. The inmates and employees' rights to be free from retaliation, inmates right to be free from sexual abuse, the dynamics of sexual abuse in confinement, common reactions of sexual abuse victims, how to communicate effectively with inmates, including LGBTQ inmates; and how to comply with relevant laws related to mandatory reporting of sexual abuse.
--	--

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) Volunteer/Contractor PREA Training Presentation

- b) MRRJ PREA Training Acknowledgement forms
- c) Volunteer Handbook
- d) Volunteer Training Rosters
- e) Contractor Training Rosters
- f) Medical PREA Training Acknowledgement forms and NIC Certificates of Completion
- g) MRRJ PREA Policy 9A-00

Interview:

- a) Interview with Volunteer
- b) Interview with Contractor

115.32 Provision (a)

MRRJ PREA policy 9A-00 states that, "MRRJ ensures all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the department's sexual abuse and sexual harassment prevention, detection, and response policies and procedures."

The MRRJ PREA Compliance Manager maintains documentation showing volunteers, contractors, and MRRJ employees' signatures verifying that they understand the training and materials they have received. The training was provided to the Auditor in a PowerPoint presentation that is provided to all contractors and volunteers along with a lecture from the Training Section.

The facility reported that all contractors and volunteers that have contact with inmates have participated in PREA training. Volunteers and Contractors are trained during their initial orientation and are required to acknowledge that they have received the necessary PREA training by signing a MRRJ PREA Training Acknowledgement form. The facility maintains all copies of signed volunteer and contractor acknowledgement forms and provided several as evidence of compliance.

During interviews with the contractor and volunteer the Auditor asked if they had been trained in their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response. Both individuals answered in the affirmative.

While performing the document review, the Auditor observed several signed PREA Training Acknowledgement forms from contractors, volunteers, and medical personnel.

The evidence collected for this provision shows that the agency has procedures in place to ensure all volunteers or contractors that have contact with inmates are trained in the prevention, detection, and response policies regarding sexual abuse

and sexual harassment. Therefore, through written policy, personal observations, and interviews conducted, the agency has demonstrated that it meets this provision.

115.32 Provision (b)

MRRJ PREA policy 9A-04 states that, "The level and type of training provided the volunteers and contractors is based on the services they provide and the level of contact they have with inmates, but all volunteers and contractors who have contact with inmates must be notified of the department's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents."

The facility reported that all contractors and volunteers that have contact with inmates have participated in training. Volunteers and Contractors are trained during their initial orientation and are required to acknowledge that they have received the necessary PREA training by signing the MRRJ PREA Acknowledgement form. The facility maintains all copies of signed volunteer and contractor acknowledgement forms.

During interviews, the Auditor asked a contractor and a volunteer whether they had been trained on their responsibilities for preventing, detecting, and responding to sexual abuse and sexual harassment. Both confirmed that they had. The facility reported that all 28 contractors and 12 volunteers completed the training. Contractors and volunteers receive PREA training during initial orientation and acknowledge completion by signing a form. The facility retains all signed acknowledgement forms.

During the interview, the contractor stated that the training covered how to identify sexual abuse, whom to notify about an allegation, and how to respond when someone reports sexual abuse. She also confirmed that she was informed of the agency's zero-tolerance policy and received facility-provided PREA training this year.

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

115.32 Provision (c)

MRRJ PREA policy 9A-04 states that, "MRRJ maintains written documentation showing the volunteers and contractor's signature verifying they understand the training and materials they have received."

The MRRJ PREA Compliance Manager maintains documentation showing volunteers, contractors, and MRRJ employees' signatures verifying they understand the training and materials they have received. The volunteer and contractor acknowledgement forms are maintained by the PREA Compliance Manager and observed during the document review phase of this audit and examples were also provided in the PREA Pre-audit Questionnaire.

	The evidence collected for this provision shows that the agency has procedures in place to ensure all volunteers or contractors documentation confirming that they received PREA training and understood that training. Therefore, through written policy and personal observations, the agency has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring PREA training for both volunteers and contractors.
--	--

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) MRRJ Intake Inmate Acknowledgement (viewed the PREA Intake video) c) MRRJ PREA Intake Sheet and Acknowledgement d) PREA Inmate Educational Training Roster (documenting viewing the PREA video) e) PREA Comprehensive Training Acknowledgment rosters f) PREA Brochure English/Spanish g) PREA Posters in English & Spanish h) PREA Inmate Educational Video in English and Spanish i) PREA Educational Video "What You Need to Know" Interview: a) Interview with Intake Staff b) Interview with Random Inmates 115.33 Provision (a) MRRJ PREA policy 9A-04 states that, "All inmates during intake will receive a copy of

the 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."

The Auditor reviewed the PREA information sheet, which outlines the agency's zero-tolerance policy, available methods for reporting sexual abuse within the facility, and advocacy contact information. Each inmate acknowledges by signature that they received the sheet and viewed the PREA video. In the Pre-Audit Questionnaire, the facility provided 20 examples from the previous two years. The agency reported admitting 1,760 inmates during the past 12 months and stated that all 1,760 identified inmates received the initial PREA information during intake.

During the facility site review, the Auditor asked the PREA Compliance Manager to provide the agency's PREA information sheet explaining its zero-tolerance policy and the methods for reporting sexual abuse allegations during intake. The document included all required information, including reporting procedures, inmates' rights to be free from sexual abuse and retaliation, and the agency's zero-tolerance policy. This confirmed that the required intake information is readily available for distribution.

During the interview, the Intake Officer explained that as part of the booking process, he provides each newly committed inmate with a PREA information sheet describing the agency's zero-tolerance policy and methods for reporting sexual abuse allegations. He also stated that posters displaying the same information are posted throughout the facility, the PREA video is played monthly, and the information is available on inmate tablets and found in the Inmate Handbook. Of the 21 inmates interviewed, 18 reported receiving information about the facility's rules prohibiting sexual abuse and harassment, while two reported that they had not. Among the 18 who received PREA information, 10 identified the video as a source, four cited paperwork, five cited the tablet, three cited the handbook, two cited posters, and one reported receiving the information verbally.

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

115.33 Provision (b)

MRRJ PREA policy 9A-04 states that, "Within thirty (30) days of the intake process, MRRJ provides comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents and regarding agency policies and procedures for responding to such incidents, the dynamics of sexual abuse in confinement, the common reactions of sexual abuse as soon as possible following the department's adoption of the PREA standards and MRRJ provides periodic refresher information to all inmates to ensure they know MRRJ's most current sexual abuse policies and procedures."

The MRRJ requires all inmates to watch the educational video upon being housed in general population. The facility documents their participation, and the inmate acknowledges viewing the video on the Inmate Educational Training Roster. The facility plays the PREA video every thirty days at mealtimes, and the inmates are unable to change the station. The date and location are captured on the training roster. In addition, the PREA information is made available on the inmate tablet system through the Inmate Handbook. Finally, information is continuously and readily available or visible to inmates through posters, inmate handbooks, video presentation, or other written formats. At the designated time, an officer will turn the inmate televisions to the PREA educational video, "What You Need to Know." Upon completion, the television can be changed to normal viewing. The officer will document the activity and inmate participation by capturing signatures of the inmates that had recently been moved into the unit.

The MRRJ identified 415 inmates whose length of stay in the facility was over 30 days or more in the last twelve months. Of those 415 inmates, the facility reports that all have received comprehensive PREA education regarding sexual abuse or harassment.

The Intake Officer told the Auditor that officers provide inmates with a PREA information sheet during intake to educate them about their rights to be free from sexual abuse and retaliation. The officer stated that inmates are informed of these rights within the first hour of arrival. The Auditor also asked 21 inmates whether they had been informed of their right to be free from sexual abuse, how to report abuse, their right to be free from retaliation for reporting abuse, and when they received this information. Eighteen inmates said they had been informed, one said they had not, and one said he did not review the information. The inmates identified several sources of information, with 10 specifically citing the video.

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

115.33 Provision (c)

The MRRJ Intake Supervisor ensures that each inmate receives a PREA information sheet during intake. Once assigned to a housing unit, each inmate is given an opportunity to view the PREA video every 30 days. The agency provides comprehensive education, either in person or by video, concerning inmates' rights to be free from sexual abuse, sexual harassment, and retaliation for reporting such incidents, as well as the agency's policies and procedures for responding to them. Inmates receive comprehensive PREA education each time they are released from MRRJ custody and later recommitted. All inmates at the MRRJ have been educated on sexual abuse and harassment. All inmates regardless of being transferred from another facility are required to go through the intake process and watch the PREA video each time they are assigned to general population.

When the Intake Officer was asked how they ensure that current inmates, along with those transferred from another facility, have been educated on agency's zero-tolerance policy on sexual abuse. He stated that when the inmate is booked-in, they provide information regarding PREA. He also stated that all inmates must be booked-in, and it is during that process that the inmate is given the PREA informational sheet. If the inmate remains in custody, then they will be placed in general population and made to watch the PREA educational video. Finally, the Intake Officer stated that there are posters throughout the facility that also explain how an inmate can protect and report sexual abuse.

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

115.33 Provision (d):

MRRJ PREA policy 9A-04 states that, "MRRJ provides inmate education in formats accessible to all inmates, including those who are limited English proficient (LEP), hearing or visually impaired, or otherwise disabled as well as inmates who have limited reading skills. MRRJ maintains written documentation of inmate participation in these education sessions."

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

The MRRJ can use a video conferencing system called Voiance Language Network that is available and contracted by the agency that allows many different languages to be translated over the tablet via video. Also, there are subtitles that are shown during the PREA educational video to ensure all inmates receive the information. The video is also audio for those who are visually impaired or for those who may be limited reading skills. The MRRJ also provided documentation of versions of their PREA Brochure, acknowledgement form, and PREA informational posters in Spanish. The PCM also indicated that, if necessary, they can translate the Inmate Handbook or PREA Brochure in many other languages utilizing Google Translate then print a copy out.

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

115.33 Provision (e)

The facility utilizes an acknowledgement form that is signed by the inmate and

	maintained by the PREA Compliance Manager. This information was verified by the Auditor while reviewing the documentation provided in the PAQ and the inmate files during the document review phase of this audit. The facility also uses a housing unit roster to capture those inmates that have not yet viewed the comprehensive video prior to the thirty-day period. The inmates acknowledge watching the video by signature. The evidence collected for this provision shows that the agency has procedures in place to ensure that the agency maintains documentation of inmate participation in PREA education sessions. Therefore, through written policy and personal observations, the agency has demonstrated that it meets this provision. 115.33 Provision (f) MRRJ PREA policy 9A-04 states that, "Key information will continually be made readily available and/or visible to inmates through posters or other written formats." The MRRJ ensures that information will be continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats. The agency has posters strategically posted throughout the facility, in every housing unit, and departments (i.e., kitchen, visiting) to ensure compliance with PREA standards. Each inmate also has access to a MRRJ handbook with relevant information, including PREA educational material. The Auditor personally observed these items during the facility site review. The evidence collected for this provision shows that the agency has procedures in place to ensure that information will be continuously and readily available or visible to inmates. Therefore, through written policy and personal observations, the agency has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring PREA inmate education.
--	--

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00

b) National Institute of Training (NIC) online PREA Investigation Course

c) Training Force USA Certificate of Achievement

Interview:

a) Interview with Investigative Staff

115.34 Provision (a)

MRRJ PREA policy 9A-04 states that, "In addition to the general training provided to all employees, MRRJ ensures its investigators conducting sexual assault investigations have received training in conducting such investigations in confinement settings."

The facility provided certificates of completion from the NIC course titled, "Investigating Sexual Abuse in a Confinement Setting" The facility identified three Facility Investigators having obtained the appropriate specialized training to conduct sexual abuse investigations. The facility also provided a Certificate of Achievement for the Facility Investigator for the completion of the "Prison Rape and Sexual Assault Investigations Inside a Correctional Facility" from a class given in 2015 located in Lynchburg, VA. Finally, the Facility Investigator, who is a certified law enforcement officer in the state of Virginia, has also received specific training through the NIC and Virginia Department of Criminal Justice Services on interview and interrogation techniques.

When interviewing the Investigative staff, the Facility Investigator stated that he had received his most recent training in 2025 when he was employed with the Office of Law Enforcement Services (OLES) through the Virginia Department of Corrections and had also attended additional Investigator classes when becoming an OLES Detective. The Facility Investigator stated that the classes dealt with the proper use of Garrity and Miranda in criminal cases. The class covered evidence collection and interviewing techniques among other investigative techniques.

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

115.34 Provision (b)

The MRRJ utilizes the NIC online training curriculum, among other instruction, to train officers in the art of conducting sexual abuse investigations in a confinement setting. This online training is also recognized by the PREA Resource Center as appropriate training regarding this standard. The Auditor is also familiar with, and has completed, this training. The NIC training does cover specialized training in the following techniques:

a) Interviewing sexual abuse victims

- b) Proper use of the Miranda Warnings
- c) Proper use of Garrity Warnings
- d) Sexual abuse evidence collection in a confinement setting
- e) The criteria and evidence required to substantiate a case for administrative action or prosecution referral

All sexual abuse and sexual harassment investigators who conduct non-criminal investigations at the MRRJ have received specialized training. This specialized training was through the NIC online training curriculum. The agency provided certificates of completion for the online course titled, "Investigating Sexual Abuse in a Confinement Setting." The facility identified the three Facility Investigators having obtained the appropriate specialized training to conduct sexual abuse investigations.

When interviewing the Investigative staff, the Facility Investigator stated that he had received training in June of 2025 and has also attended additional Investigator classes. The Facility Investigator stated that the classes dealt with the proper use of Garrity and Miranda in criminal cases. The class covered evidence collection and interviewing techniques among other investigative techniques.

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

115.34 Provision (c)

MRRJ PREA policy 9A-04 states that, "MRRJ maintains written documentation that investigators have completed the required specialized training in conducting sexual abuse investigating."

The MRRJ has provided examples of certificates of completion from the NIC online training course and Training Force USA. The PCM maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. The facility has reported that three Facility Investigator have completed this course and are qualified to conduct sexual abuse or sexual harassment investigations in a confinement setting.

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

Conclusion:

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

	specialized training for investigators who perform sexual abuse and sexual harassment investigations.
--	---

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) PREA Training Acknowledgement Form c) National Institute of Corrections (NIC) Certificates of Completion for both Medical and Mental Health Professionals Interview: a) Interview Medical & Mental Health Staff Observations made during the on-site audit and document review 115.35 Provision (a) MRRJ PREA policy 9A-04 states that, “MRRJ ensures all full and part-time medical and mental health care practitioners who work regularly in the facility have been trained in: a. How to detect and access signs of sexual abuse and sexual harassment b. How to preserve physical evidence of sexual abuse c. How to respond effectively and professionally to victims of sexual abuse and sexual harassment. d. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.” The facility reported that 26 medical and mental health personnel are contracted through CBH Medical. During the pre-audit phase, the Auditor received several NIC eLearning certificates and acknowledgement forms documenting completion of the required specialized training. However, an interview with the Health Services Administrator (HSA) revealed that not all medical staff have completed the position-specific training. The Auditor advised the facility of this deficiency, the need to train

all medical and mental health professionals, and its resulting noncompliance with the standard. Between September 6 and September 11, 2026, the Auditor received NIC certificates confirming that eight medical staff members had successfully completed the required specialized training. Designed specifically for medical and behavioral health professionals, the training addresses the requirements of this standard, including:

- Detecting and assessing signs of sexual abuse and sexual harassment
- Preserving physical evidence of sexual abuse
- Responding effectively and professionally to victims of sexual abuse and sexual harassment
- Reporting allegations or suspicions of sexual abuse and sexual harassment to the appropriate authority.

When interviewing the (HSA), she informed the Auditor that she had previously received PREA training by the MRRJ and she had received specialized training through NIC eLearning Center. During the interview with the mental health professional, he stated that PREA annual training is required and consists of recognizing situations and how to address the situations.

During PREA exit-briefing, the Auditor informed facility leadership that the specialized training required by this standard and their PREA policy had not been met. The Auditor advised the leadership staff to move forward and have medical and mental health staff attain the necessary training. Since the on-site visit, the facility has provided the Auditor with all the appropriate training certificates of completion for both medical staff and mental health professionals. This training was obtained by utilizing the NIC online training portal specifically for medical and mental health professionals in a correctional environment regarding PREA.

The Auditor is satisfied with the corrective action taken by the facility and finds that the facility is in compliance with this provision.

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

115.35 Provision (b)

MRRJ PREA policy 9A-04 states that, "Medical staff employed by Meherrin River Regional Jail will not conduct forensic examinations." Any physical examination of an alleged victim of sexual abuse will be conducted in accordance with a SANE representative at the Virginia Commonwealth University Hospital and an officer from either the Brunswick County Sheriff's Office or the Mecklenburg County Sheriff's Office, depending on where the alleged incident occurred.

The VCU Hospital IVPP performs forensic medical exams for both facilities and there is

a memorandum of Agreement to document this fact. This practice was confirmed during the interview conducted with HSA who stated that they do not perform forensic medical examinations.

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

115.35 Provision (c)

MRRJ PREA policy 9A-04 states that, "MRRJ maintains documentation that medical and mental health practitioners have received this specialized training. Medical staff shall receive the same training as all other institutional staff."

The MRRJ relies on the agency's PCM and HSA to maintain the documentation on their personnel. This documentation that has been provided confirms that Medical and Mental Health Practitioners have received the training referenced in this standard.

The MRRJ has provided copies of specialized training records for medical and mental health staff in the form of certificates of completion, indicating their personnel received the training through the NIC online training curriculum.

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

115.35 Provision (d)

MRRJ PREA policy 9A-04 states that, "MRRJ maintains documentation that medical and mental health practitioners have received this specialized training. Medical staff shall receive the same training as all other institutional staff."

During the pre-audit phase, the facility provided copies of training logs indicating that medical staff and the mental health professionals received the same in-service annual PREA training that security staff receive. In addition, while interviewing both medical and mental health staff, the Auditor was told that they receive PREA training on an annual basis.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all medical staff receive the same PREA training that security staff receive. In addition, they receive this training on an annual basis. Therefore, through written policy and documents provided, the agency has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring specialized training for Medical and Mental Health Care.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Classification PREA Questionnaire c) Initial 14-day Assessments d) 2026 PREA 30-day reassessments e) Continuing 2026 PREA 30-day reassessments Interviews: a) Interview with Staff performing Risk Screening b) Interview with Random Inmates c) Interview with PREA Coordinator d) Interview with PREA Compliance Manager Observations made during the on-site audit and document review 115.41 Provision (a) MRRJ PREA policy 9A-05 states that, “All inmates will be screened during intake using an objective screening instrument for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. If an inmate reports being victimized prior to incarceration, the inmate will be referred to mental health.” During the interview process, the Auditor sat down with the classification officer and went through the risk screening process. The Auditor asked if the officer screened inmates for risk of sexual victimization upon arrival or transfer from another facility. The officer stated that, “Yes, they do.” Also, during the interviews with 21 inmates; 16 inmates recalled having been asked those specific questions listed below, 4 stated they had not, and 1 inmate did not recall. The Auditor reviewed the risk assessment questionnaire called the “Classification PREA Questionnaire” and identified that the screening form contained initial questions such as: · Is this your first incarceration? · Have you ever been a victim of sexual abuse?

- Do you have a sexual orientation preference?
- Do you perceive yourself to be vulnerable to a sexual offense or abuse?

When interviewing the staff responsible for performing the risk screening, the classification officer stated that they do conduct risk screening on all inmates during the Intake process in a private setting and determines the appropriate housing assignment based on the questions and answers obtained during the classification interview and answers to the Questionnaire.

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

115.41 Provision (b)

MRRJ PREA policy 9A-05 states that, "The intake screening will take place within 72 hours of arrival at the facility and with a reassessment of the inmate no later than 14 days from the inmate's arrival."

The facility reported that they received 1058 inmates into their facilities in the last twelve months who had a length of stay of more than 72 hours. The facility reports that 100% of those inmates received a risk screening assessment for possible risk of being sexually abused during incarceration.

The facility provided samples of completed Classification PREA Questionnaires during the pre-audit phase and downloaded those documents into the Pre-audit Questionnaire. In addition, during the document review, the Auditor observed completed Classification PREA Questionnaire instrument forms in their inmate classification files.

When conducting the interview with staff responsible for performing risk-screening assessments the officer stated that they usually conduct the risk screening process the day the inmate is booked into the facility. However, no risk screening is conducted during the weekends until they return on Monday morning. As stated in the previous provision, when interviewing 21 inmates; 16 inmates reported receiving risk screening within 24 hours of being processed into the jail.

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

115.41 Provision (c)

The MRRJ Classification PREA Questionnaire consists of 37 'yes or no questions' that includes all types of considerations when determining housing assignments. These

considerations consist of questions regarding prior mental health, drug abuse, and education level among other things. The questionnaire includes the required sexual abuse considerations regarding the PREA standard.

During the interview, the classification officer explained that the questionnaire provides space for comments when an inmate answers “yes,” allowing the officer to add details as needed. He further stated that an inmate who answers “yes” to four or more questions is identified as a potential victim, and an email notification is automatically sent to the captain.

Under the facility’s protocol, an inmate who answers “yes” to four screening questions is classified as at risk, and the Classification Officer makes an appropriate housing assignment. Agency policy further specifies that four or more affirmative responses to sexual victimization questions identify a potential victim, while two or more affirmative responses to sexual abusiveness questions identify a potential aggressor. This mandatory guidance provides classification officers with an objective, consistent process for making housing decisions.

The evidence collected for this provision through policy, interviews, observations and corrective action made since the on-site phase shows that the facility does conduct risk assessments utilizing an objective screening instrument. Therefore, the facility has demonstrated that it meets this provision.

115.41 Provision (d)

MRRJ PREA policy 9A-05 states that, “The intake screening will consider at the minimum the following:

- a. Whether the inmate has a mental, physical, or developmental disability.
- b. Age of the inmate.
- c. Physical build of the inmate.
- d. If the inmate has previously been incarcerated.
- e. If the inmate's criminal history is exclusively nonviolent.
- f. If the inmate has prior convictions for sex offenses against an adult or child.
- g. If the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming.
- h. If the inmate has previously experienced sexual victimization.
- i. The inmate's own perception of vulnerability.
- j. If the inmate is detained solely for civil immigration purposes.

If 4 questions on the screening form are answered yes, the Classification Officer will deem the inmate as a risk and house accordingly.”

The officer responsible for risk-screening assessments was asked what factors the screening considers and how assessments are conducted. The officer explained that the assessment addresses factors such as prior sexual victimization, previous convictions for sexual assault, the inmate's age and physical build, and whether the inmate fears for personal safety. Staff use a yes-or-no checklist to collect this information and complete the questionnaire in the Jail Tracker management system. The officer further stated that an inmate who answers "yes" to four or more questions is identified as a potential victim.

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

115.41 Provision (e)

The risk screening form utilized by the MRRJ classification officer does consider prior acts of sexual abuse, prior convictions for violent offenses, and a history of prior institutional sexual abuse. The staff member responsible for performing risk-screening assessments was asked what the risk screening considered and what is the process for conducting these assessments. The officer stated the assessment asks questions such as; does the inmate have a history of prior acts of sexual abuse, prior convictions of violent crimes, or prior history of institutional violence or sexual abuse.

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

115.41 Provision (f)

MRRJ PREA policy 9A-05 states that, "The intake screening will take place within 72 hours of arrival at the facility and with a reassess of the inmate no later than 14 days from the inmate's arrival." The policy further states that, "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."

The staff member responsible for performing risk-screening assessments was asked how long after arrival inmates risk levels are reassessed. The officer stated within 30 days. When interviewing 21 inmates they were asked if staff had ever asked PREA related questions again during their incarceration; 9 inmates stated that they had not, 12 inmates reported being asked similar PREA related questions by medical or mental health staff. The Auditor also reviewed 21 inmate files that indicated no evidence of a reassessment being conducted. The facility provided examples of 14-day CBH Medical assessments. However, there is no evidence of the required PREA related questions being asked or answered in the assessment form.

During the audit exit briefing, the Auditor informed the PCM, PREA Coordinator, and

administrators of this issue and recommended reassessing all inmates housed at the facility to correct the deficiency and establish a new baseline. Over the following 45 days, the facility created a new form titled "PREA 30-day Re-Assessment (MRRJ)" and proceeded to reassess all inmates at the facility that had been incarcerated for over 30 days. The reassessments were documented and forwarded to the Auditor as proof of compliance. The facility also provided continued examples of the 30-day reassessments being conducted by classification staff. The facility also established an ongoing protocol by requiring classification staff to conduct the 30-day reassessments moving forward. If there is a need to change the status of an inmate's risk screening, then the classification officer would immediately correct the scoring.

The Auditor is satisfied with the corrective action taken by the facility to comply with this provision.

The evidence collected for this provision shows that the facility has procedures in place to conduct a 30-day review reassessment. In addition, a reassessment within 30 days will occur based upon additional or relevant information received by the facility. Therefore, through policy, document review and interviews conducted, the facility has demonstrated that it meets this provision.

Recommendation: The Auditor is recommending that the agency add specific language to their PREA policy to explain that the reassessment for risk of victimization is completed by the Classification Officer.

115.41 Provision (g)

MRRJ PREA policy 9A-05 states that, "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."

During the interview, the officer responsible for risk screening stated that inmates are reassessed when additional information affecting their sexual safety warrants review. The inmate who reported sexual abuse was not reassessed because the allegation involved a staff member was classified as sexual harassment and was determined to be unfounded.

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

115.41 Provision (h)

MRRJ PREA policy 9A-05 states that, "Inmates will not be disciplined for refusing to answer, or for not disclosing complete information in response to the risk screening."

When interviewing the staff responsible for conducting risk screening the officer stated that the facility does not punish inmates if they chose not to answer the questions associated with the risk screening assessment.

	The evidence collected for this provision shows that the facility has procedures in place to prevent inmates from being disciplined for refusing to answer, or for not disclosing complete information, in response to risk screening. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision. 115.41 (i) MRRJ PREA policy 9A-05 states that, "Management shall 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 will only be disseminated on a need-to-know basis and only through the Superintendent/designee or Health Services Administrator to ensure sensitive information is not exploited to the inmate's detriment by staff or other inmates." When interviewing the classification officer, the officer was asked who has access to the inmates' risk screening information. The officer stated that the information is found in Jail Tracker and he is not sure who has access. The PREA Compliance Manager was also asked this question, and he indicated that the risk screening form is password protected in Jail Tracker and only those granted permission would have access. Finally, when the PREA Coordinator was asked this question, he stated that the classification officer conducts all the assessments and only those with a need to know would have access to the screening form. The evidence collected for this provision shows that the facility has procedures in place to control access to the risk screening information collected by the facility and that the information is not exploited. Therefore, through document review and interviews conducted, the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring screening for risk of victimization and abusiveness.
--	---

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents:

- a) MRRJ PREA Policy 9A-00
- b) Classification PREA Questionnaire

Interviews:

- a) Interview with Staff performing Risk Screening
- b) Interview with PREA Compliance Manager

Observations made during the on-site audit and document review

115.42 Provision (a)

MRRJ PREA policy 9A-05 states that, "Information from the risk screening will be used to determine 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."

The PREA Compliance Manager stated during the interview, that risk screening is part of the classification process and that they use the information obtained to decide how and where to house the inmate. The staff member responsible for conducting risk screening stated during their interview that the assessment is used to take all the information and assess the best housing assignment for that inmate.

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

115.42 Provision (b)

MRRJ PREA policy 9A-05 states that, "Individualized determinations will be used to ensure the safety of each inmate."

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

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

115.42 Provision (c)

MRRJ PREA policy 9A-05 states that; "Transgender and intersex inmates will be

assigned to male or female blocks on a case-by-case basis and based on the health and safety of the inmate and the security needs of the Jail.”

This provision is no longer applicable to a compliance finding by the Auditor.

At the time of this audit, the MRRJ informed the Auditor that there were no transgender inmates housed in their facility.

The evidence collected for this provision shows that the facility does consider housing assignments involving transgender and intersex individual on a case-by-case basis. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

115.42 Provision (d)

MRRJ PREA policy 9A-05 states that, “Transgender and intersex inmate placements will be reassessed at least twice each year to review any threats to the safety of the inmate.”

This provision is no longer applicable to a compliance finding by the Auditor.

The evidence collected for this provision shows that the facility has procedures in place to address reassessing a transgender or intersex inmate’s programming assignment at least twice a year to review any threats or safety concerns. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.

115.42 Provision (e)

MRRJ PREA policy 9A-05 states that, “A transgender and intersex inmate's own views with respect to their own safety will be given serious consideration.”

When the PREA Compliance Manager was asked that question, he stated that “Yes, they do consider the inmates’ own views when deciding appropriate housing.” When the staff member responsible for conducting the risk assessment was asked the same question she also responded in the affirmative. At the time of this audit, the MRRJ informed the Auditor that there were no transgender inmates housed in their facility. Therefore, a transgender or intersex inmates’ perspective could not be obtained during the on-site interview phase of this audit.

The evidence collected for this provision shows that the facility has procedures in place to consider a transgender or intersex inmate’s own view with respect to his or her own safety shall be given serious consideration. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

115.42 Provision (f)

MRRJ PREA policy 9A-00 states that, “Transgender and intersex inmates will be given the opportunity to shower separately from other inmates.”

This provision is no longer applicable to a compliance finding by the Auditor.

	The evidence collected for this provision shows that the facility has procedures in place to allow transgender and intersex inmates to shower separately from other inmates. Therefore, through interviews conducted, and observations made, the facility has demonstrated that it meets this provision. 115.42 Provision (g) MRRJ PREA policy 9A-00 states that, “Lesbian, gay, bisexual, transgender, or intersex inmates will not be placed 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.” During the time of this PREA audit, the MRRJ was not under a consent decree, legal settlement, legal judgement for the purpose of protecting inmates that identify as gay, lesbian, bisexual, transgender or intersex. This provision is no longer applicable to a compliance finding by the Auditor. The evidence collected for this provision shows that the facility has procedures in place to address not placing LGBTQ inmates in designated housing blocks based solely on their sexual orientation. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring the use of screening information.
--	--

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Statement of Fact dated 06/30/2026 regarding no instances where an inmate at high risk for sexual victimization was placed in involuntary segregated housing because of no available alternatives. (PREA Standard 115.43) Interviews: a) Interview with Facility Head

b) Interview with Staff who supervise Inmates in Segregation

Observations made during the on-site audit and document review

115.43 Provision (a)

MRRJ PREA policy 9A-05 states that, "Inmates at high risk for sexual victimization will not be placed involuntarily in 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. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntarily segregated housing for less than 24 hours while completing the assessment."

The Facility Head stated during his interview that the facility does have a policy prohibiting placing inmates at high risk of sexual victimization in involuntary segregated housing in lieu of other housing areas.

The facility provided a statement of fact indicating that no inmates at risk of sexual victimization were held in involuntarily segregated housing in the past twelve months. This fact was documented in a memorandum authored by the Deputy Superintendent dated 06/30/2026.

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

115.43 Provision (b)

MRRJ PREA policy 9A-05 states that, "Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:

- a) The opportunities that have been limited
- b) The duration of the limitation
- c) The reasons for such limitations."

The facility reported no instances where an inmate was placed in segregation based on the high probability of sexual victimization. During the facility tour, the Auditor visited the special housing unit and reviewed the housing assignments to verify that no inmate was being housed involuntarily due to the risk of being sexually victimized.

The staff member working in segregated housing stated during his interview that if an inmate was placed in segregation based on possible sexual victimization then that inmate would still have access to all the privileges and opportunities that all other

inmates would have, except for programs. He stated that the housing assignment is not seen as a punishment. He also indicated that if anything is restricted the reasons why they are restricted must be documented.

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

115.43 Provision (c)

MRRJ PREA policy 9A-05 states that, "The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days."

The Facility Head was interviewed and stated that only if there were no alternatives would an inmate be involuntarily segregated because of the possibility of being sexually victimized. He further indicated, if necessary, that inmate would be moved to another facility. The Facility Head explained that, at the most, an inmate would stay in segregation for no more one to three days until a courtesy hold could be arranged. When the staff member assigned to the special segregated housing unit was asked the same questions, he stated that he had never experienced a situation of that nature. He also stated that he has no specific example where an inmate was placed in involuntary segregation based on the high risk of victimization. The staff member did state that if it was to occur, then the inmate would be placed in segregation only until they could find a better suited housing assignment and an alternative option should only take a couple of hours, but no more than 24-hours.

The evidence collected for this provision shows that the facility has policies in place to ensure that if an inmate is placed in involuntary segregation, such assignment would not ordinarily exceed 30 days. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

115.43 Provision (d)

MRRJ PREA policy 9A-05 states that, "If and involuntary segregated housing assignment is made pursuant to paragraph 3 of this section, the facility shall clearly document:

- a) The basis for the facility's concern for the inmate's safety
- b) The reason why no alternative means of separation can be arranged."

The MRRJ reported not assigning any inmate to involuntary segregated housing for the purpose of separating that inmate due to the high risk for sexual victimization.

The evidence collected for this provision shows that the facility does have a written

	policy in place to address documenting the basis for the segregation and why no alternative means of separation could be arranged. Therefore, the facility has demonstrated that it meets this provision. 115.43 Provision (e) MRRJ PREA policy 9A-05 states that, “Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.” The Auditor interviewed the staff member who supervises inmates in segregation and asked if the facility reviews the inmate’s situation every 30 days to determine if the housing assignment is still needed. The staff member indicated that, “Yes, all inmates in segregation are seen every Thursday.” The evidence collected for this provision shows that the facility has procedures in place to reassess and review an inmate’s housing assignment every 30 days to see if there is a continued need for separation. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence the PREA Auditor has determined that the agency is fully compliant with this standard requiring limitation on protective custody.
--	---

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Memorandum of Understanding (MOU) between the MRRJ and Pamunkey Regional Jail (PRJ) dated 09/03/2025 c) PREA New Hire Training d) PREA Training Jail Tracker Signature Summary e) MRRJ Inmate Handbook both in English and Spanish f) PREA Intake Brochure both in English and Spanish

g) PREA Poster in both English and Spanish.

Interviews:

- a) Interviews with Random Staff
- b) Interviews with Random Inmates
- c) Interview with PREA Compliance Manager

Observations made during the on-site audit and document review

115.51 Provision (a)

MRRJ PREA policy 9A-06 states that, "The facility provides multiple internal ways for inmates 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 an incident of sexual abuse or sexual harassment." The policy further states that, "Meherrin River Regional Jail inmates can privately report sexual abuse, sexual harassment, retaliation by other inmates or staff, and staff neglect by using the following:

- a. Request Forms
- b. Grievance Forms
- c. Verbal Reporting
- d. Sexual Abuse Hotline
- e. Third-party reporting."

The facility has provided multiple ways to report sexual abuse or sexual harassment allegations in a private setting. These reporting options are listed in written policy, confirmed through interviews, and observed through posters and handouts. The PREA Intake Brochure specifically addresses five ways to report an allegation of sexual abuse or harassment. Those involve making a verbal or written report to any staff member, submitting an emergency grievance, having a 3rd party make a report for the alleged victim, or calling the outside reporting authority prompted by the phone system and dialing (8). The contact information and phone number are provided in both the handbook and brochure. In addition, PREA posters are displayed throughout the facility in both English and Spanish, listing the ways an individual can report an allegation of sexual abuse.

The staff training curricula consists of classroom instruction and an online training portal that allows security staff to review and acknowledge agency policy to include PREA Policy 9A-00. This training review is captured in Jail Tracker.

During the on-site audit, the Auditor performed 12 random staff interviews and 21 inmate interviews. Of the 12 random staff that were interviewed; 7 officers could identify four ways to report, 4 officers could identify three ways, and 1 officer

identified two ways to report. All 12 officers could at least identify two ways to report a sexual abuse allegation. Of the 21 inmates that were interviewed; 7 inmates could offer three ways to report sexual abuse, 10 inmates could offer two ways, and 3 inmates provided at least one way to report. One inmate reported he did not know how to report.

During the on-site review, the Auditor toured both facilities observing and documenting PREA posters posted in all housing units and in public areas throughout the facility. The Auditor also conducted several informal discussions with inmates in the Alberta Facility. When touring the housing unit, an inmate was asked if he knew the ways to report sexual abuse. The inmate indicated that he could call the hotline. This same question was once again asked in a different housing unit. That inmate stated that you could report the incident verbally to a staff member. The Auditor requested investigation files which provided documentation of alleged sexual abuse reported in written requests, verbal to staff, and third-party reporting. The Auditor contacted Just Detention International and confirmed that they had not received any sexual abuse allegations during this rating period.

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

115.51 Provision (b)

MRRJ PREA policy 9A-06 states that, "The facility also provides at least one way for inmates to report the abuse to an outside public entity or office not affiliated with the agency that has agreed to receive reports and forward them to the facility head, except when an inmate requests confidentiality."

The MRRJ has entered into an MOU with the Pamunkey Regional Jail to provide a PREA Hotline phone number that an inmate or staff can call anonymously if they choose, to report allegations of sexual abuse. The MRRJ and PRJ entered into a MOU dated 9/03/2025. The PRJ has agreed to:

- Ø To check for messages on the Meherrin River Regional Jail PREA hotline at phone number (434-949-6990).
- Ø 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.
- Ø To notify Meherrin River Regional Jail immediately after receiving the allegation.
- Ø Pamunkey Regional Jail shall document that it has provided Meherrin River Regional Jail notification of the allegation; and
- Ø Pamunkey Regional Jail will allow the inmate to remain anonymous upon their

request.

The Inmate Handbook and PREA Intake Brochure instruct inmates to dial 8 to report allegations of sexual abuse. Pamunkey Regional Jail (PRJ) operates the hotline 24 hours a day, seven days a week, receives reports, promptly notifies MRRJ, and allows callers to remain anonymous. During the facility site review, the Auditor tested the hotline from the intake area at 0917 hours by following the prompts and leaving a PREA-related message requesting confirmation of receipt. At 1029 hours, PRJ confirmed receipt by emailing the MRRJ Administrative Investigator, who contacted the PREA Coordinator at 1051 hours. The facility then forwarded the confirmation emails from PRJ and the Facility Investigator to the Auditor.

The MRRJ reports that neither facility detains inmates solely for civil immigration purposes. However, consular notification is the responsibility of the arresting officer.

During the interview, the PREA Compliance Manager stated that inmate calls to the PREA Hotline go directly to Pamunkey Regional Jail, which promptly forwards reports to the on-duty supervisor or facility investigator. The manager also stated that dialing #8 connects directly to the hotline and that calls are neither recorded nor tracked. Of the 21 inmates interviewed, 16 knew that hotline calls could be made anonymously, three did not know or were unsure whether callers could withhold their names, and one believed callers could not remain anonymous.

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

115.51 Provision (c)

MRRJ PREA policy 9A-06 states that, "Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports." The policy further states that, "Staff accepts reports made verbally, in writing, anonymously, and from third parties and immediately puts into writing any verbal reports. Any verbal reports will be immediately documented by the staff member receiving the information and forwarded to a supervisor."

When reviewing the investigative files, written reports from officers documenting verbal allegations were present. During staff interviews, the officers explained that their duties were to immediately write a report recording the verbal sexual allegation. However, there was no clear answer to what the term "immediate" meant. Therefore, it was when the PREA Compliance Manager was interviewed and asked to define what "immediately" meant according to the protocol. The PREA Compliance Manager explained that immediately is defined as soon as possible, but definitely before the end of the officer's tour of duty for that day. When interviewing inmates, several explained that they would notify a supervisor or post officer. In addition, all the PREA posters displayed throughout the facility state that an allegation of sexual abuse can

	be reported verbally. The evidence collected for this provision shows that the facility has demonstrated that they accept, and document sexual abuse reports verbally, in writing, and from third parties. It has also been determined that these reports have been handled in a timely fashion. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision. 115.51 Provision (d) MRRJ PREA policy 9A-06 states that, “Meherrin River Regional Jail Staff can privately report sexual abuse and sexual harassment of inmates to their supervisor or any other facility supervisor or by using the Sexual Abuse Hotline.” Staff interviews indicated some uncertainty about how to privately report sexual abuse in accordance with policy. However, staff did identify the correct way along with other confidential methods for reporting allegations of sexual abuse or harassment. Among the 12 randomly selected staff members interviewed, the PREA Hotline was identified five times, contacting any supervisor four times, notifying the Facility Investigator four times, contacting the Brunswick County Sheriff’s Office once, and contacting Human Resources once. The evidence collected for this provision shows that the facility has demonstrated that they do provide staff with a private method of reporting sexual abuse or sexual harassment of inmates. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision. Conclusion Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard requiring the agency provide multiple internal ways for inmates to privately report sexual abuse or sexual harassment. These policies and procedures encompass both the Alberta and Mecklenburg facilities in regard to ways to report sexual abuse. The Auditor conducted a tour of the Mecklenburg facility where PREA posters were visible with the ways to report sexual abuse. The phones were not operable due to the fact no inmates are being housed in that facility and have not been housed there since January 2021.
--	--

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) MRRJ PREA Policy 9A-00
- b) MRRJ Inmate Facility Handbook

Interviews:

- a) Interview with PREA Compliance Manager
- b) Interview with inmates who reported sexual abuse

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

The facility has a policy that places limitations on what allegations can be handled through the grievance process. The facility's procedure is that grievances received about sexual assault and sexual harassment will be accepted and reviewed regardless of when the incident took place. The facility protocol is if a PREA allegation through an emergency grievance is received, it must immediately be directed to the Shift Commander or designee. These individuals will further the investigation into the allegation. The grievance process is immediately stopped, and an administrative investigation is immediately initiated. The MRRJ reported no instances of an inmate utilizing the grievance procedure to report an alleged sexual abuse or harassment report during this audit period.

115.52 Provision (a)

The MRRJ has demonstrated that as a matter of facility policy, "emergency" grievances related to sexual abuse or allegations of sexual abuse are immediately converted to investigations that are outside of the facility's administrative remedies process and are not considered by the facility to be grievances. Inmates are provided notice of this in the inmate handbook which states, "All emergency grievances alleging an inmate is subject to a risk of imminent sexual abuse will be forwarded immediately to the Shift Commander or their designee. When using the grievance form and marking it "emergency," the form can be immediately submitted to the Housing Unit Officer. If the emergency grievance is given to the Officer, then it is immediately forwarded to the Shift Commander or designee to determine whether the matter is an emergency to be handled immediately as an allegation of sexual abuse, or if it should be processed as a standard grievance."

MRRJ PREA policy 9A-06 states that, "The Jail will not impose a time limit on when an inmate can submit a grievance regarding an allegation of sexual abuse. The Jail will not require the inmate to use any informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse. The Jail will not require the inmate to submit a grievance to a staff member who is the subject of the complaint. The Jail will not refer a grievance to a staff member who is the subject of the complaint. If an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the jail will document the inmate's decision to decline. No inmate will be disciplined for filing a grievance alleging sexual abuse

Unless the facility demonstrates the inmate filed the grievance in bad faith. The Jail will issue a final decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. The Jail may claim an extension of time to respond up to 70 days if the normal time period for response is insufficient to make an appropriate decision. The Jail will notify the inmate in writing of any extension and provide a date by which a decision will be made. Fellow inmates, staff members, family members, attorneys, and outside advocates will be permitted to assist inmates in filing requests for administrative remedies relating to sexual abuse allegations and to file such requests on behalf of the inmate. All emergency grievances alleging an inmate is subject to a risk of imminent sexual abuse will be forwarded immediately to the Shift Commander or their designee. For all emergency grievances, initial responses will be within 48 hours and a final Jail decision within 5 calendar days. After an agency decision is made, a copy of the emergency grievance and all responses shall be forwarded to the PREA Coordinator.”

115.52 Provision (b)

MRRJ PREA policy 9A-06 states that, “The Jail will not impose a time limit on when an inmate can submit a grievance regarding an allegation of sexual abuse. The Jail will not require the inmate to use any informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse.”

115.52 Provision (c)

MRRJ PREA policy 9A-06 states that, “The Jail will not require the inmate to submit a grievance to a staff member who is the subject of the complaint. The Jail will not refer a grievance to a staff member who is the subject of the complaint.”

115.52 Provision (d)

MRRJ PREA policy 9A-06 states that “The Jail will issue a final decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. The Jail may claim an extension of time to respond up to 70 days if the normal time period for response is insufficient to make an appropriate decision. The Jail will notify the inmate in writing of any extension and provide a date by which a decision will be made.”

The MRRJ has reported no instances of receiving any grievances alleging sexual abuse. The Auditor interviewed one inmate who reported sexual abuse that was present during the time of the on-site audit phase. The inmate interviewed confirmed that he reported the allegation on an Inmate Request form. When the Auditor reviewed ten investigative files, there was no evidence to show that any inmate utilized the emergency grievance system to report alleged sexual abuse.

115.52 Provision (e)

MRRJ PREA policy 9A-00 states that, “Fellow inmates, staff members, family members, attorneys, and outside advocates will be permitted to assist inmates in filing requests for administrative remedies relating to sexual abuse allegations and to file such

requests on behalf of the inmate. If an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the jail will document the inmate's decision to decline."

The facility has reported that the MRRJ has not received any grievance during this audit period alleging sexual abuse or sexual harassment involving the request for third-party assistance.

115.52 Provision (f)

MRRJ PREA policy 9A-06 states that, "All emergency grievances alleging an inmate is subject to a risk of imminent sexual abuse will be forwarded immediately to the Shift Commander or their designee. For all emergency grievances, initial responses will be within 48 hours and a final Jail decision within 5 calendar days. After an agency decision is made, a copy of the emergency grievance and all responses shall be forwarded to the PREA Coordinator."

The MRRJ has reported no instances of inmates alleging substantial risk of imminent sexual abuse requiring response during this audit period alleging sexual abuse.

115.52 Provision (g)

MRRJ PREA policy 9A-06 states that, "No inmate will be disciplined for filing a grievance alleging sexual abuse unless the facility demonstrates the inmate filed the grievance in bad faith."

The facility reported no instances where an inmate falsely filed an emergency grievance during this rating period.

Conclusion

The agency has a policy that places limitations on what allegations can be handled through the grievance process. The agency's procedure is that grievances received about sexual assault and sexual harassment will be accepted and reviewed regardless of when the incident took place. The agency protocol is if the Shift Commander or designee receives a grievance alleging sexual abuse or sexual harassment by staff or sexual abuse by an inmate, the grievance is immediately handled as a PREA complaint and investigated as such, to include assigning it to the Facility Investigator for further investigation. The grievance process is immediately stopped, and an administrative investigation is immediately initiated. Therefore, this standard is not applicable in the meaning and purpose for which it is intended. The grievance process for the MRRJ is to serve as a vehicle to provide due process in certain situational incidents in a confinement setting and not the purpose of reporting or investigating a sexual abuse allegation in this facility. However, an inmate can use the "emergency grievance" process as a means of reporting sexual abuse allegations. The inmates can also use the grievance process to oppose the finding of a sexual abuse investigation as part of their due process and administrative remedies.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Reporting Guidelines posters in English and Spanish b) MOU between the MRRJ and the James House Rape Crisis Center dated 09/03/2025 c) MRRJ Inmate Handbook both in English and Spanish d) MRRJ PREA Policy 9A-00 e) James House Handout Brochure Interviews: a) Inmates who have reported a Sexual Abuse b) Interviews with Inmates Observations made during the on-site audit and document review 115.53 Provision (a) The agency has entered into a Memorandum of Understanding (MOU) with “James House” of the Greater Tri-Cities Region in Virginia to provide outside victim advocacy related to sexual abuse. Stated in the MOU, the MRRJ has agreed to provide telephone numbers and mailing addresses to incarcerated victims who request sexual violence crisis intervention services, emotional support, and/or supportive counseling. James House services are provided by mail, a phone hotline, and in person, upon request. The James House also provides sexual assault educational materials in areas accessible to inmates. The contact information for the James House is located in the inmate handbook, PREA Intake Brochure, and posters displayed in the housing units. The Auditor observed these posters during the facility tour. In addition, the contact information for the James House can be found in every inmate handbook located on the tablet which is accessible to every inmate upon commitment to the facility. In addition, every inmate that is booked into the facility receives a “PREA Intake Brochure.” During this orientation, the inmate is once again provided contact information for the rape crisis center. This procedure is documented and acknowledged by signature from the inmate. The hotline phone call is free of charge to the inmate. Outgoing facility mail is not scanned, opened, nor read. The crisis intervention services are confidential, and the James House has no duty to report unless involving a juvenile or a vulnerable adult. The Intake PREA Brochure indicates

that; “For emotional support services for sexual abuse contact the victim advocacy group, which is independent of the MRRJ, using the inmate phone system to contact the 24-hour hotline and provides the number. These calls are not recorded.” In addition, the inmate may also write and mail reports of sexual abuse to:

The James House

229 N. Sycamore Street

Petersburg, VA 23805

MRRJ reports that the Regional Jail does not detain inmates solely for civil immigration purposes. However, consular notification is the responsibility of the arresting officer.

During the on-site audit, the Auditor performed 20 inmate interviews concerning this provision. The one inmate that reported sexual abuse was not asked these questions. Eleven inmates were aware that services are available outside the facility for dealing with sexual abuse and while in the facility. Two inmates stated they didn’t know, or were not sure, and seven inmates indicated no. Those inmates that were aware of the services also knew how to contact the crisis center. They were also cognizant that the communication with the crisis advocate is confidential. When asked if they could tell me about the kind of services there are; one inmate identified the Rape Crisis Center, one inmate stated the James House, and one inmate said the Community Services Board. All of the other inmates were unsure. The Auditor interviewed one inmate that reported sexual abuse while housed in the facility. That inmate was asked if the facility provided them with mailing addresses and phone numbers for outside services. The inmates indicated no. However, the evidence is clear that this information is readily available through the posters and inmate handbooks.

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

115.53 Provision (b)

MRRJ PREA policy 9A-06 states that, “The facility ensures that communications with such advocates are private, confidential, and privileged, to the extent allowable by Federal, State, and local law. The facility informs inmates, prior to giving them access, of the extent to which such communications will be private, confidential, and/or privileged.”

The MRRJ PREA Intake Brochure states in part that; “The 24-hour hotline is not to be used for reporting sexual abuse incidents. Calls are not monitored or recorded. Sexual abuse allegations may be forwarded to authorities in accordance with mandatory reporting laws.”

The PREA Advocate brochures states, “All of our services are trauma-informed, cost-free, confidential, accredited, and available in Spanish.” The MRRJ informs inmates through a pre-recorded phone message that their calls may be monitored before

	making any call. However, because no inmate pin number is required to contact the James House advocate, these calls are not recorded. The Auditor performed 21 inmate interviews. Eleven inmates were aware of these services and nineteen inmates assumed that the information would be kept confidential. The evidence collected for this provision shows that the facility does inform inmates of the extent to which their communications are being monitored. Therefore, through facility procedures, personal observations, and interviews conducted the facility has demonstrated that it meets this provision. 115.53 Provision (c) The facility has provided a copy of a Memorandum of Understanding between the MRRJ, and the James House dated 09/03/2025 as proof that confidential emotional support services are being provided to the inmates at the MRRJ. There is no expiration date for this MOU and is indefinite until such a time when one or both parties wish to terminate the agreement. The evidence collected for this provision shows that the facility has entered into a Memorandum of Agreement with an outside advocacy group to provide the inmates emotional support as it relates to sexual abuse. Therefore, through the signed MOU and personal observation the facility has demonstrated that it meets this provision. Conclusion Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard requiring the agency to provide inmate access to outside confidential support services. These services would be provided to both the Alberta and Mecklenburg facility, if and when the Mecklenburg facility, were to reopen.
--	--

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Reporting Guidelines Posters b) MRRJ Agency Website c) MRRJ PREA Policy 9A-00

	Observations made during the on-site audit and document review 115.54 Provision (a) MRRJ PREA policy 9A-06 states that, “Third party reports regarding sexual abuse or sexual harassment may be made to the Brunswick County Sheriff’s Office at 434-848-3133. Meherrin River Regional Jail’s PREA policy will be posted on the Jail’s website.” MRRJ publishes its PREA policy on the facility’s website. The policy explains how a person may report sexual abuse on behalf of an inmate housed at MRRJ. In addition, MRRJ’s third-party reporting posters displayed in visitor and public areas state: “If you have knowledge of an inmate being a victim of sexual harassment or sexual assault, please contact the PREA Coordinator at 434-949-6700 or if the assault occurred at MRRJ contact the Brunswick County Sheriff’s Office at 434-848-3133.” The Auditor called the listed PREA Coordinator number and confirmed that it connects to the Alberta Facility’s main line. Callers may enter the extension of the person they wish to reach or dial 0 for assistance from an operator, who can connect them to the PREA Coordinator. The Brunswick County Sheriff’s Office number is its continuously monitored non-emergency line. During the on-site facility tour, the Auditor observed the PREA posters in all the housing areas and there was a PREA third-party reporting poster located on the visitor side of the inmate visiting area and in the public entrance to the facility. The evidence collected for this provision shows that the facility has procedures in place to address third-party reports of sexual abuse or harassment both formally and publicly. Therefore, through document review and personal observations, the facility has demonstrated that it meets this provision. Recommendation: The Auditor is recommending that the agency place the Third-Party Reporting procedures and contact information in a more noticeable area on their agency website. This public service would provide a more conspicuous user-friendly location than having to read through the PREA policy to find the information. Conclusion Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring a method to receive third-party reports alleging sexual abuse and distribute that information publicly.
--	--

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

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

Documents:

- a) MRRJ PREA Policy 9A-00

Interviews:

- a) Interviews with Random Staff
- b) Interview with Facility Head
- c) Interview with Medical or Mental Health Staff
- d) Interview with PREA Coordinator

Observations made during the on-site audit and document review

115.61 Provision (a)

MRRJ PREA policy 9A-07 states that, "Meherrin River Regional Jail shall 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 the facility, whether or not it is part of MRRJ; 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."

During the interview process, the Auditor interviewed 12 random staff. All 12 staff members stated that they must immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to their supervisor.

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

115.61 Provision (b)

MRRJ PREA policy 9A-07 states that, "Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in MRRJ policy, to make treatment, investigation, and other security and management decisions."

During the interview process, the Auditor interviewed 12 random staff. All 12 staff members stated that they must immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to their supervisor and must only relay information on a 'need to know' basis.

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

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

115.61 Provision (c)

MRRJ PREA policy 9A-07 states that, "Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to Section 1 of this section and to inform of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services."

During the interview with the HSA, she stated that they do notify the inmate of the duty to report sexual abuse allegations and the limitations surrounding confidentiality. She also stated that they have a duty to report all suspicions, knowledge, or information regarding sexual abuse. In addition, the HSA stated that she had not experienced a situation where an alleged sexual abuse had been made. However, if she had encountered that situation, she would immediately notify a sworn supervisor. When interviewing the mental health professional, he was asked the same questions. He explained that they do notify the inmate about the duty to report and limitations of confidentiality and that he too had never experienced a situation where a sexual abuse had been directly reported to him at the MRRJ.

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

115.61 Provision (d)

MRRJ PREA policy 9A-07 states that, "If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable person's statute, Meherrin River Regional Jail shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws."

Both the PREA Coordinator and Facility Head were interviewed and stated that the MRRJ does not house any juveniles. The Facility Head stated that he would initiate an investigation and immediately notify Child Protective Services. The PREA Coordinator indicated the facility usually doesn't house juveniles and that he also would make sure an investigation is initiated and notify social services.

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

115.61 Provision (e)

MRRJ PREA policy 9A-07 states that, "Meherrin River Regional Jail shall report all

	criminal allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the Brunswick County Sheriff's Department." The policy further states that, "Agency administrative investigations into allegations of sexual abuse and sexual harassment are prompt, thorough, objective, including third party and anonymous reports, and conducted by investigators who have received special training in sexual abuse investigations." During the document review, the Auditor evaluated 10 investigative files. The files showed that the facility utilized the Facility Investigator trained in conducting PREA investigations for all 10 investigations. The Facility Head was also interviewed and explained that all allegations of sexual abuse and sexual harassment determined to be administrative in nature, and not criminal, are assigned to the Facility Investigator. The evidence collected for this provision shows that the facility has procedures in place to ensure that all allegations of sexual abuse are turned over to a PREA designated investigator to initiate an inquiry. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision. Conclusion Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring staff and agency reporting duties. This policy and procedure would mirror that of the procedure followed at the Mecklenburg facility if it was operational. The facility has been closed since January 2021.
--	---

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 Interviews: a) Interviews with Random Staff b) Interview with Facility Head c) Interview with Agency Head

	Observations made during the on-site audit and document review 115.62 Provision (a) MRRJ PREA policy 9A-07 states that, “When Meherrin River Regional Jail learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.” Interviews were conducted with 12 random staff. Of those staff interviewed, all 12 staff members stated that they would immediately remove the inmate from the situation, block, or housing unit. In addition, they stated that they would conduct an initial inquiry and notify a supervisor. Also interviewed, was the Agency Head and Facility Head. In both interviews, it was stated that they would have the inmate immediately removed from the situation and initiate an investigation to collect the facts. Also, that a housing change would immediately take place. The inmate would be re-evaluated and then the information obtained would be considered to determine the best and safest housing assignment moving forward. The Facility Head also mentioned, if necessary, that the inmate could be transferred to a different jail for safety reasons. The MRRJ reported no instances where the facility determined that an inmate was subject to a substantial risk of imminent sexual abuse. The evidence collected for this provision shows that the facility has procedures in place to address when an inmate is subject to a substantial risk of sexual abuse and immediate action is taken to protect that inmate. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision. Conclusion Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring agency protection duties.
--	--

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00

Interviews:

- a) Interview with Facility Head
- b) Interview with Agency Head

Observations made during the on-site audit and document review

115.63 Provision (a), (b), and (c)

MRRJ PREA Policy 9A-07 states that, "Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Superintendent that received the allegation shall notify the Superintendent or appropriate office of the agency where the alleged abuse occurred. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. Meherrin River Regional Jail shall document that it has provided such notification."

MRRJ reported no instances in the past twelve months in which it received a sexual abuse allegation from another facility concerning an incident that required notification within 72 hours.

The evidence collected for these provisions shows that the facility has procedures in place to address when an allegation of sexual abuse is received from an inmate, but the incident occurred at a different confinement facility. That the notification is made within 72 hours and the notification is documented. Therefore, through written policy and document review the facility has demonstrated that it meets these provisions.

115.63 Provision (d)

MRRJ PREA policy 9A-07 states that, "The Superintendent or designee that receives such notification shall ensure that the allegation is investigated in accordance with MRRJ policy and procedures."

The MRRJ reported that they have not received any allegation of sexual abuse or sexual harassment from another confinement facility within the last twelve months. However, did provide a notification from May of 2025 from an outside confinement facility notifying MRRJ about an alleged sexual abuse that occurred at the MRRJ.

During the interview, the Facility Head stated that all notifications are referred to the Facility Investigator. If an allegation appears criminal, the Brunswick County Sheriff's Office is contacted to investigate. He confirmed that the facility received and investigated one notification in 2025 but was unaware of any allegations reported by another facility within the past 12 months. The Agency Head stated that all sexual abuse allegations are directed to the Facility Head, who assigns the Facility Investigator to conduct a thorough investigation. He was unaware of any recent notification from an outside confinement facility concerning alleged sexual abuse at MRRJ.

The facility provided a copy of the 2025 investigative file and notification from the outside confinement facility for the Auditor to review.

	The evidence collected for this provision shows that the facility does have a policy in place to address when an allegation of sexual abuse is received from another facility. Also, they have policy in place to govern when and how to handle allegations received by their facility regarding sexual abuse allegations made that occurred at another outside confinement facility. Therefore, through written policy and interviews conducted the agency has demonstrated that it does meet this provision. Conclusion Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring the reporting to other confinement facilities and investigating reports from other confinement facilities.
--	---

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) MRRJ Security Orientations Interviews: a) Interview with Security Staff First Responders b) Interview with Inmate that reported Sexual Abuse c) Interviews Non-Security Staff d) Interviews with Random Staff Observations made during the on-site audit and document review 115.64 Provision (a) MRRJ PREA policy 9A-07 states that, “Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: a. Separate the alleged victim and abuser. b. Preserve and protect any crime scene until appropriate steps can be taken

to collect any evidence.

c. 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.

d. If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating”

As of the date of this report, the facility reported four allegations of inmate sexual abuse during the previous 12 months. Three involving staff-on-inmate conduct and two involving inmate-on-inmate conduct. In both inmate-on-inmate cases, a security staff member responded first, immediately separated the alleged victim and alleged abuser when appropriate, and preserved any potential physical evidence at the scene. Of the 10 cases reviewed by the Auditor, two involved alleged sexual abuse and eight involved alleged sexual harassment. Two allegations were reported verbally to staff, seven were submitted in writing through the inmate tablet system, and one was reported by a third party.

An interview with a security staff first responder was conducted. The first responder was asked to describe the actions taken when first on the scene of an alleged inmate sexual abuse allegation. The first responder stated that he would make sure the scene was safe, separate the victim and alleged abuser, report to a supervisor, preserve the evidence, get medical to see them, write a report, and protect the possible crime scene. The Auditor interviewed one inmate that reported sexual abuse, who was still incarcerated, during the on-site phase of the audit. When asking the inmate, “How he reported sexual abuse and how soon did someone responded he provided the following account?” The inmate stated that he initiated his allegation on an inmate request through the inmate tablet and the investigator came that day to speak with him about the allegation. This case was concluded as unfounded.

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

115.64 Provision (b)

MRRJ PREA policy 9A-00 states that, “If the first staff member is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.”

When conducting interviews, 12 random staff were questioned about their responsibilities when confronted with an allegation of inmate sexual abuse. The responses were broken down into the following ways. As a side note, the Auditor has

	incorporated the staff's multiple responses into the listed general topics. • 9 staff members stated that they would separate the victim and abuser • 2 staff members would also contact a supervisor • 4 staff members cited preserving evidence • 7 staff members said they would secure the scene • 1 staff members stated they would write a report In addition, the Auditor interviewed a contractor who was asked what he would do if an inmate was to inform them that the inmate had been sexually abused or sexually harassed. The contractor indicated that she would immediately notify a sworn supervisor or officer. The evidence collected for this provision shows that the facility has procedures in place to address the responsibilities of non-security staff first responders when confronted with an allegation of an inmate sexual abuse. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision. Conclusion Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring Staff First Responder duties.
--	---

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 Sub-section 9A-07- (Official Response Following an Inmate Report) and Sub-section 9A-12- (Response to an Incident of Sexual Abuse/ Assault) Interviews: a) Interview with Facility Head Observations made during the on-site audit and document review

	115.65 Provision (a) MRRJ PREA policy 9A-07 states that, “Meherrin River Regional Jail shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and command staff. Refer to 9A-12.” The MRRJ’s written coordinated response plan is embedded into their PREA Policy 9A-12. As part of the policy, it outlines the procedures/steps to follow. It also includes the actions of a contractor/volunteer, support staff, Shift Commander, PREA Coordinator, first responders, medical or mental health professionals, investigators, and facility leadership. In an interview with the Facility Head, it was confirmed that the facility uses a coordinated response plan to follow when dealing with incidents of alleged inmate sexual abuse. The evidence collected for this provision shows that the facility has a coordinated response plan to follow during incidents of alleged inmate sexual abuse. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision. Conclusion Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring a coordinated response.
--	---

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Code of Virginia 40.1-57.2 (Prohibition against Collective Bargaining) Interviews: a) Interview with Agency Head Observations made during the on-site audit and document review 115.66 Provision (a) & (b)

	MRRJ PREA policy 9A-07 states that, “Neither Meherrin River Regional Jail nor any other governmental entity responsible for collective bargaining on the MRRJ’s behalf shall enter into or renew any collective bargaining agreement or other agreement that limits Meherrin River Regional Jail’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. Nothing in this standard shall restrict the entering into or renewal of agreements that govern: a. The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of 9A-08 and 9A-09; or b. 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.” Employees of the Commonwealth of Virginia do not have collective bargaining rights per the Code of Virginia 40.1-57.2. There has been no collective bargaining agreement entered into since August 2012. The Auditor confirmed this during the interview with the Agency Head. In addition, the facility directed the Auditor to the Virginia State code that states; “No state, county, city, town, or like governmental officer, agent, or governing body is vested with or possesses any authority to recognize any labor union or other employee association as a bargaining agent of any public officers or employees, or to collectively bargain or enter into any collective bargaining contract with any such union or association or its agents with respect to any matter relating to them or their employment or service unless, in the case of a county, city, or town, such authority is provided for or permitted by a local ordinance or by a resolution.” The evidence collected for this provision shows that this standard is not applicable to this facility or any confinement facility in the Commonwealth of Virginia if it chooses not to engage in collective bargaining. Therefore, through state law and interviews conducted, the facility has demonstrated that it meets this provision. Conclusion Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that this standard is not applicable to this agency.
--	---

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) MRRJ PREA Policy 9A-00

Interviews:

- a) Interview with Agency Head
- b) Interview with Facility Head
- c) Interview with Staff Member charged with Monitoring Retaliation
- d) Inmate who reported Sexual Abuse

Observations made during the on-site audit and document review

115.67 Provision (a)

MRRJ PREA policy 9A-07 states that, "Meherrin River Regional Jail has 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 and shall designate which staff members or departments are charged with monitoring retaliation."

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

115.67 Provision (b)

MRRJ PREA policy 9A-07 states that, "Meherrin River Regional Jail shall 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."

The facility provided investigative files concerning alleged sexual abuse or sexual harassment. The files documented several protective measures including immediately moving an alleged abuser to different housing, referring several alleged inmate victims to mental health professionals, reassessing an alleged abuser's housing placement, and reclassifying an alleged abuser. During interviews, the Agency Head and Facility Head described additional measures available to protect inmates and staff from retaliation, including changing housing assignments, arranging transfers, providing mental health services, relocating staff, placing staff on leave, and requesting a courtesy hold for an alleged inmate abuser. The Facility Head stated that the Captain of Security/PREA Coordinator monitors retaliation involving both inmates and staff. The staff member responsible for retaliation monitoring stated that he monitors each situation by reviewing daily activity reports, checking on monitored individuals, and examining unscheduled moves, and institutional disciplinary hearings. He also monitors changes in staff assignments and leave. He indicated that

he would speak with the alleged victim initially and approximately twice more during the 90-day monitoring period. The Auditor also interviewed an inmate who had reported sexual abuse. The inmate stated that he had not experienced retaliation and felt safe at the facility.

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

115.67 Provision (c)

MRRJ PREA policy 9A-07 states that, "For at least 90 days following a report of sexual abuse, Meherrin River Regional Jail shall monitor the conduct and treatment of inmates or staff who reported the 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, and shall act promptly to remedy any such retaliation. Items that Meherrin River Regional Jail should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. MRRJ shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need."

The Facility Head stated that when he suspects retaliation, he will immediately initiate an investigation. Based on the findings of that investigation staff may be reassigned or receive discipline up to termination. Inmates can be charged both with in-house charges and criminal prosecution or transferred to a different confinement facility. The staff member charged with retaliation monitoring stated that he monitors inmate behavior or unscheduled moves. He also stated that he would monitor an individual for at least 90 days but will continue to monitor them if he feels it necessary even if no threat exists.

The facility has created and utilizes a retaliation monitoring form called the "Meherrin River Regional Jail Protection Against Retaliation." The facility has provided an example of this form to the Auditor.

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

115.67 Provision (d)

MRRJ PREA policy 9A-07 states that, "In the case of inmates, such monitoring shall also include periodic status checks."

When conducting the interview with the staff member responsible for monitoring retaliation he stated that he monitors the situation by reviewing the daily activity reports, unscheduled moves, and discipline. The staff member responsible for monitoring retaliation further indicated that he would meet with the alleged inmate

	victim initially and again, at least twice, in a 90-day period. The evidence collected for this provision shows that the facility monitors inmates for retaliation periodically. Therefore, through policy and interviews conducted the facility has demonstrated that it meets this provision. 115.67 Provision (e) MRRJ PREA policy 9A-07 states that, “If any other individual who cooperates with an investigation expresses a fear of retaliation, Meherrin River Regional Jail shall take appropriate measures to protect that individual against retaliation.” When conducting the interview with the Agency Head, he stated that an inmate that assisted in an investigation, and is fearful of retaliation, could be moved to another housing unit or possibly transferred to another facility. The Facility Head stated that he would separate the individuals involved, reassign staff, or place the staff member on leave until an investigation is completed. The Facility Head indicated that if he suspected retaliation both the staff member and inmate suspected of retaliation could be disciplined. The evidence collected for this provision shows that the facility has procedures in place to address protection for other individuals who cooperate with PREA investigations from retaliation. Therefore, through written policy the facility has demonstrated that it meets this provision. 115.67 Provision (f) MRRJ PREA policy 9A-07 states that, “Meherrin River Regional Jail’s obligation to monitor shall terminate if the agency determines that the allegation is unfounded.” This practice was confirmed during the interview with the staff member that monitors retaliation (Captain of Security). Conclusion Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring agency protection from retaliation.
--	--

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents:

- a) MRRJ PREA Policy 9A-00 subsection 9A-05 Screening for Risk of Sexual Abuse
- b) Involuntary Segregation Housing

Interviews:

- a) Interview with Facility Head
- b) Interview with Staff who supervise inmates in Segregation

Observations made during the on-site audit and document review

115.68 Provision (a)

MRRJ PREA policy 9A-07 states that, "Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of policy 9A-05." MMRJ PREA policy 9A-05 states that, "Inmates at high risk for sexual victimization will not be placed involuntarily in 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. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document the opportunities that have been limited, the duration of the limitation, and the reasons for such limitations. The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. If an involuntary segregated housing assignment is made pursuant to paragraph 3 of this section, the facility shall clearly document the basis for the facility's concern for the inmate's safety, and the reason why no alternative means of separation can be arranged. Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population."

The facility reported no instances where an inmate was placed in segregation who alleged to have suffered sexual abuse while they were being held involuntarily in the last twelve months. During the facility tour, the Auditor visited the special housing unit and reviewed the housing assignments to verify that no inmate was being housed involuntarily due to being a victim of an alleged sexual abuse.

The staff member working in segregated housing stated during his interview that if an inmate was placed in segregation based on possible sexual victimization, then that inmate would still have access to all the privileges and opportunities that all of the other inmates would have. He stated that the housing assignment is not seen as a punishment. The staff member also stated that he has no specific example of where an inmate was placed in involuntary segregation based on alleging a sexual abuse.

	The Facility Head stated during his interview, that the facility does have a policy prohibiting placing inmates who alleged to have suffered sexual abuse in involuntary segregated housing, in lieu of other housing areas. He also stated that only if there were no alternatives would an inmate be involuntarily segregated because of sexual abuse. If that were the case, the agency would find another facility that the inmate could be housed. The Facility Head explained that, at most, an inmate would stay in segregation for no more two or three days. The evidence collected for this provision shows that the facility has procedures in place to ensure that if an inmate is placed in segregation due to alleging sexual abuse, then that inmate would retain all the privileges and opportunities that all other inmates are afforded. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring limitation on protective custody.
--	--

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Memorandum of Understanding between the MRRJ and Brunswick County Sheriff's Office Interviews: a) Interview with Facility Head b) Interview with Investigative Staff c) Interview with PREA Coordinator d) Interview with PREA Compliance Manager Observations made during the on-site audit and document review 115.71 Provision (a)

MRRJ PREA policy 9A-08 states that, "All investigations into allegations of sexual abuse and sexual harassment will be done promptly, thoroughly, and objectively."

Under MRRJ's evidence collection protocol, victims of inmate-on-inmate or staff-on-inmate sexually abusive penetration are provided access to forensic medical examinations conducted by a Sexual Assault Nurse Examiner (SANE) at no cost. Throughout the forensic examination and investigative interview process, victims also receive emotional support, crisis intervention, information, and referrals.

The Auditor reviewed 10 investigative files during the document review. The average length of investigation for those 10 files was approximately 7 days. During the interview with the investigative staff, the Facility Investigator stated that an administrative investigation is initiated within minutes once notification is made via phone call. If he were at home, then the response would be within 30 minutes. That is because the Facility Investigator is on-call and available. The Facility Investigator stated that anonymous and third-party reports are handled exactly in the same manner as all other sexual abuse allegations.

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

115.71 Provision (b)

MRRJ PREA policy 9A-08 states that, "Investigators with special training in sexual abuse investigations will be used when sexual abuse is alleged."

The facility has provided certificates of completion from the classes "Investigating Sexual Abuse in a Confinement Setting" from the National Institute of Corrections and "Prison Rape and Sex Assault Investigations inside Correctional Facilities" from Training Force USA. These certificates confirm training received by the Facility Investigator. These online courses cover the specialized training needed to conduct PREA administrative investigations. These techniques include interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in a confinement setting, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. During the interview process, the investigator confirmed that he had taken the online course in 2025 but had previously been an OLES detective for the VADOC where he was responsible for investigating criminal sexual abuse allegations.

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

115.71 Provision (c)

MRRJ PREA policy 9A-08 states that, “Investigators will be responsible to gather and preserve direct and circumstantial evidence, available physical and DNA evidence, and available electronic monitoring data.”

The MRRJ and Brunswick County Sheriff’s Office follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The protocol is adapted from or otherwise based on the 2011 U.S. Department of Justice’s Office of Violence against women publication, “A National Protocol for Sexual Assault Against Women”, “A National Protocol for Sexual Assault Medical Forensic Examinations.”

When conducting the interview with the Facility Investigator, he stated that if the allegation looked as if it was criminal in nature then a call to Brunswick County Sheriff’s Office (BCSO) would be made. He further stated that the allegation would go up through the chain of Command to the Superintendent. The Facility Head would request an administrative investigation and if the Facility Investigator established probable cause to believe a crime had been committed, it would be turned over to the BCSO. The Facility Investigator explained that his facility is responsible for collecting digital video footage, bedding, clothing, witness statements, and protecting the crime scene.

The Auditor conducted an interview with a BCSO deputy. The deputy indicated that his department would be responsible for gathering and preserving direct and circumstantial evidence including any available physical and DNA evidence and any available electronic monitoring data. The deputy further stated that the BCSO would be the responsible party for the request of a SANE examination and that the PERK test would be handed over to the BCSO to maintain chain of custody.

The Facility Investigator was interviewed and stated that during an administrative investigation he would interview the alleged victim, possible witnesses, and alleged perpetrator. Also, he would preserve and obtain video footage, review prior complaints and reports of sexual abuse involving the suspected perpetrator, conduct creditability assessments, and submit a complete report.

The Auditor reviewed several administrative investigations and there was several investigations where camera video footage was part of the evidence to assist in the investigation. The investigation files revealed that alleged victims, suspected perpetrators, and witnesses were interviewed, and that prior criminal and institutional records of the individual involved were examined.

The evidence collected for this provision shows that the facility has procedures in place to ensure that MRRJ investigators collect circumstantial evidence and that the Brunswick County Sheriff’s Office collect direct evidence. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

115.71 Provision (d)

MRRJ PREA policy 9A-08 states that, “No compelled interviews will be conducted by

the Jail until consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.”

There are no examples of investigative reports supporting compelled statements. When asked about compelling staff to answer questions, the Facility Investigator explained that he would always read the Miranda Warnings prior to any questioning and if the Brunswick County Sheriff’s Office was handling the case, he would accompany the detective to discuss the issue with the Commonwealth Attorney to see if charges would be filed before any compelled interviews would be conducted.

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

115.71 Provision (e)

MRRJ PREA policy 9A-08 states that, “The credibility of an alleged victim, suspect, or witness will be assessed on an individual basis and will not be determined by the person’s status as an inmate or staff. The Jail will not require an inmate, who alleges sexual abuse, to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of alleged allegation.”

The Facility Investigator was interviewed and stated that he takes every allegation the same and handles them in a serious manner. The Investigator also stated that polygraphs are not used to determine truthfulness in allegations of sexual abuse. When conducting an interview with the inmate that reported sexual abuse, he was asked if the facility required him to take a polygraph as a condition of proceeding with the investigation. The inmate stated no.

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

115.71 Provision (f)

MRRJ PREA policy 9A-08 states that, “Administrative investigations will include an effort to determine whether staff actions or failures to act contributed to the abuse. All administrative investigations will be documented in written reports that include a description of the physical and testimonial evidence. The reasoning behind credibility assessments. Investigative facts and findings.”

A sample of 10 investigative files were examined during the document review phase and revealed that all 10 investigations included a detailed investigative report. The investigative files did contain alleged victim witness and perpetrator interviews, creditability assessments, circumstantial evidence, notes, notification letter,

supplemental reports, and a final determination finding.

When interviewing the Facility Investigator, he stated that to determine if staff actions contributed to sexual abuse, then he would make sure that staff followed policy and facility protocol. He also stated that witness statements, incident reports, circumstantial evidence, and findings would be found in an administrative investigation file.

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

115.71 Provision (g)

MRRJ PREA policy 9A-08 states that, "All criminal investigations will be documented in written reports to include a thorough description of physical, testimonial, and documentary evidence and attach copies of all documentary evidence if applicable."

The MOU between the MRRJ and BCSO states that; "Brunswick County Sheriff's Office agrees to the following:

- To provide, upon request by the Meherrin River Regional Jail, an investigation into criminal allegations of sexual abuse.
- To meet with the victim and the Sexual Assault Nurse Examiner (SANE) at Virginia Commonwealth University (VCU) 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.
- To follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for MRRJ administrative proceedings and criminal prosecutions.
- To adapt its 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 BCSO agree to the following measures, for the sole purpose of ensuring that all investigations of criminal acts of a sexual nature committed by staff or inmates in the charge of the MRRJ will comply with the standards set forth by the Prison Rape Elimination Act."

When interviewing the Facility Investigator, he confirmed that criminal investigations would be documented in a written report and contain a thorough description of physical, testimonial, and documentary evidence and attachments of copies of all documentary evidence where feasible.

The evidence collected for this provision shows that the facility does not conduct criminal investigations, the Brunswick County Sheriff's Office has that responsibility for the Alberta facility. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

115.71 Provision (h)

MRRJ PREA policy 9A-08 states that, "Any substantiated allegations of conduct that appears criminal will be referred for prosecution." In addition, the MOU between the MRRJ and BCSO indicates that substantiated allegations of conduct that appear to be criminal shall be referred for prosecution.

This provision is the responsibility of the Brunswick County Sheriff's Office, who through the MOU, agrees to follow this provision. Therefore, this provision is not applicable to the MRRJ. The facility reported that there were no cases in the last twelve months that were referred to the Commonwealth Attorney's Office. The Facility Investigator confirmed this practice when asked if his facility conducts criminal sexual abuse investigations. He stated no, any criminal sexual abuse investigation is conducted by the Brunswick County Sheriff's Office.

The evidence collected for this provision shows that the facility does not conduct sexual abuse criminal investigations, the Brunswick Count Sheriff's Office has that responsibility. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

115.71 Provision (i)

MRRJ PREA policy 9A-08 states that, "All written reports of administrative and criminal investigations will be retained by the Jail for as long as the alleged abuser is incarcerated or is employed by the agency, plus five years." The Auditor reviewed investigative cases along with additional files provided during the pre-audit phase of this audit.

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

115.71 Provision (j)

MRRJ PREA policy 9A-08 states that, "An investigation will not be terminated just because the alleged abuser or victim departs from employment or control of the Jail."

The Facility Investigator was asked how he would proceed when a staff member alleged to have committed sexual abuse terminates employment prior to a completed investigation, or if the alleged victim left the custody of the facility. The investigator explained that he would continue forward as best as possible in the same fashion. By trying to locate the individual and make contact in an attempt to provide an outcome to the investigation. If the inmate was released into the community, he would try and

locate that individual. If the inmate was transferred to another facility, then the investigator stated he would go to the correctional facility and see them.

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

115.71 Provision (I)

MRRJ PREA policy 9A-08 states that, "Meherrin River Regional Jail will cooperate with outside investigators and will remain informed about the progress of the investigation."

The Memorandum of Understanding with the Brunswick County Sheriff's Office to conduct all criminal investigations that occur in that facility states that, "The Brunswick County Sheriff's agrees to inform MRRJ administration in regard to the progress of the criminal investigation. The MRRJ agrees 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. To work with BCSO investigators to maximize all prosecutorial efforts."

Interviews were conducted with the Facility Head, PREA Compliance Manager, PREA Coordinator, and Facility Investigator about this provision. The PREA Compliance Manager and Facility Head were asked how the facility remains informed of the progress of a criminal sexual abuse case. The PREA Compliance Manager responded by saying that the Facility Investigator is the point of contact for the facility and communicates with the Brunswick Sheriff's assigned to the sexual abuse case. The Facility Head stated that the Internal Investigator is responsible for staying informed. The PREA Coordinator stated that the Lieutenant on duty would start an initial investigation. Then send it to the captain and have the Facility Investigator investigate the matter. And finally, the Facility Investigator was asked what role he plays in a criminal investigation. The investigator explained that he is certified and capable of investigating criminal cases and is a sworn officer of the BCSO. However, he can also be the point of contact for coordinating all staff and inmate interviews and to facilitate any requests that the Brunswick Sheriff's Office would need.

The evidence collected for this provision shows that the facility has procedures in place to try and stay informed about ongoing criminal sexual abuse investigations being conducted by the Brunswick Sheriff's Office. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.

Conclusion:

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

	criminal and administrative agency investigations. As this standard relates to the Mecklenburg facility, all the policies and procedures that govern the Alberta facility would mirror that of the Mecklenburg facility. The Facility Investigator is an agency employee responsible for conducting administrative investigations for both facilities. In addition, the MRRJ has also entered into an MOU with the Mecklenburg Sheriff's Office to conduct all criminal sexual abuse allegations that may occur at the Mecklenburg facility. The Mecklenburg facility has not been operational since January 2021.
--	--

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 Interviews: a) Interview with Investigative Staff Observations made during the on-site audit and document review 115.72 Provision (a) MRRJ PREA policy 9A-08 states that, "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." The Facility Investigator was asked what standard of evidence he requires to substantiate allegations of sexual abuse or sexual harassment. The Investigator replied, "The preponderance of the evidence or 51% of the evidence suggests one way or the other." In addition, the Auditor reviewed investigative files and observed case findings that, in the Auditor's judgement, used the standard of the preponderance of the evidence. The evidence collected for this provision shows that the facility has procedures in place to not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual assault is substantiated. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision. Conclusion:

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

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ Pre-Audit Questionnaire Responses b) MRRJ PREA Policy 9A-00 c) MRRJ Allegation of Sexual Abuse Report to Inmate Interviews: a) Interview with Facility Head b) Interview with Investigative Staff c) Interview with Inmate that reported Sexual Abuse Observations made during the on-site audit and document review 115.73 Provision (a) MRRJ PREA policy 9A-08 states that, "Following an investigation into allegations of sexual abuse or sexual harassment, the inmate will be informed whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded." The facility reported four investigations of alleged sexual abuse during the last twelve months that were completed by the facility. Of those four investigations, the Auditor reviewed two alleged sexual abuse investigative files and seven sexual harassment files. The Auditor documented that there was a notification letter to the inmate in eight case files, the two that were missing were both alleged sexual harassment, and one inmate bonded out prior to the completion of the investigation. The facility policy is that the Facility Investigator makes a written notification to the alleged inmate victim. The Facility Investigator confirmed this practice with the Auditor and provided several written notification letters to alleged inmate victims informing them of the disposition of the administrative investigation. During the interview with the Facility Investigator, he stated that his facility

procedures require him to notify the alleged inmate victim in writing and obtain a signature acknowledging receipt of the findings. If the inmate refuses, then he has a witness acknowledge that the inmate received a copy. When interviewing the Facility Head, he indicated that at the conclusion of the investigation the Facility Investigator provides a copy of the findings to the inmate for which they both sign. Lastly, when interviewing the inmate that reported sexual abuse, he was asked if notification was made to him regarding the outcome of the allegations. The inmate stated, "Yes, he did receive notification."

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

115.73 Provision (b)

A criminal investigation is completed for all allegations of sexual abuse by BCSO. The Facility Investigator will request the relevant information from the investigative agency to inform the inmate. MRRJ PREA policy 9A-12 states that, "Following an investigation into an inmate's allegation that they suffered sexual abuse in the MRRJ, the Facility Investigator shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded." In addition, the MOU between the MRRJ and BCSO states that, "The BCSO will inform the MRRJ administration in regard to the progress of the criminal investigation."

In the past twelve months, the facility has reported no incidents where an inmate alleged sexual abuse was investigated and an investigation was completed by the Brunswick County Sheriff's Office.

The evidence collected for this provision shows that the facility has procedures in place to ensure that when an investigation is completed by an outside facility, the inmate is informed of the findings. Therefore, through document review the facility has demonstrated that it meets this provision.

115.73 Provision (c)

MRRJ PREA policy 9A-08 states that, "Following an inmate's allegation that a staff member committed sexual abuse against the inmate, the Jail will inform the inmate (unless the Jail has determined the allegation is unfounded) whenever:

- a. The staff member is no longer posted within the inmate's housing unit.
- b. The staff member is no longer employed at the Jail.
- c. The Jail learns that the staff member has been indicted on a charge related to sexual abuse within the Jail.
- d. The Jail learns that the staff member has been convicted on a charge related to sexual abuse within the facility."

The facility has reported that there have been no instances of sexual abuse allegations involving staff or inmates that have been referred to for criminal prosecution. The inmate who reported sexual abuse was interviewed regarding his allegations. However, the investigation was determined to be unfounded.

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

115.73 Provision (d)

MRRJ PREA policy 9A-08 states that, "Following an inmate's allegation that another inmate has sexually abused them; the Jail will inform the alleged victim whenever:

- a. The Jail learns that the alleged abuser has been indicted on a charge related to sexual abuse within the Jail.
- b. The Jail learns that the alleged abuser has been convicted on a charge related to sexual abuse within the Jail."

The inmate that was interviewed regarding reporting sexual abuse while in the facility involved allegations related to staff and not inmates. However, the facility provided the Auditor with a case from 2025 where an alleged sexual assault occurred that was substantiated. This case involved unwanted touching and when the inmate was asked if they wanted to move forward with criminal charges the inmate declined.

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

115.73 Provision (e)

MRRJ PREA policy 9A-08 states that, "All notifications and attempted notifications will be documented."

The facility reported no sexual abuse allegations involving staff or inmates that were referred for criminal prosecution. However, it provided a 2025 case in which the administrative investigation substantiated the allegation of sexual abuse. The inmate victim was asked whether they wished to pursue criminal charges but declined. This decision is documented in the administrative report.

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

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

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) MRRJ Operating Procedure 2-800 Employee Performance & Disciplinary Action c) Statement of Fact dated 06/29/2026 regarding no instances of staff discipline for violation of agency PREA policy. Observations made during the on-site audit and document review 115.76 Provision (a) MRRJ PREA policy 9A-09 states that, “Meherrin River Regional Jail staff will be subject to disciplinary sanctions up to, and including, termination for violating the sexual abuse and sexual harassment policies. Staff that has engaged in sexual abuse will be terminated from the Meherrin River Regional Jail.” The facility has provided a Statement of Fact memorandum dated 06/29/2026 stating that, “In the past twelve months Meherrin River Regional Jail has not had any staff that was terminated. Resigned, or disciplined for violating the sexual abuse or sexual harassment policies.” The evidence collected for this provision shows that the facility has procedures in place to ensure staff will be subject to disciplinary actions for violating the facility’s sexual abuse and sexual harassment policies. Therefore, through written policy the facility has demonstrated that it meets this provision. 115.76 Provision (b) The MRRJ PREA policy 9A-09 states that, “Meherrin River Regional Jail staff will be subject to disciplinary sanctions up to, and including, termination for violating the sexual abuse and sexual harassment policies. Staff that has engaged in sexual abuse will be terminated from the Meherrin River Regional Jail.”

The MRRJ has reported no instances of any staff being terminated due to violating the facility's PREA policy over the last twelve months. There have been no substantiated cases involving staff violating the facility's sexual abuse or sexual harassment policies and no staff have been terminated based on PREA violations in the past twelve months. If an incident were to occur, then termination would be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

The evidence collected for this provision shows that the facility has procedures in place to ensure that termination should be the presumptive disciplinary action for staff who have engaged in sexual abuse. Therefore, through written policy the facility has demonstrated that it meets this provision.

115.76 Provision (c)

MRRJ PREA policy 9A-09 states that, "Other disciplinary sanctions for violating the sexual abuse or sexual harassment policy that does not include actually engaging in sexual abuse will be based on the following:

- a. The nature and circumstances of the acts committed,
- b. The staff member's disciplinary history,
- c. The sanctions imposed for similar offenses by other staff with similar histories."

The facility reported that there have been no staff disciplined for any PREA related allegations associated with sexual abuse or sexual harassment in the last twelve months.

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

115.76 Provision (d)

MRRJ PREA policy 9A-09 states that, "All terminations or resignations for violations of the Jail's sexual abuse or sexual harassment policy will be reported to the Brunswick County Sheriff's Department and relevant licensing bodies unless the activity was not criminal."

The MRRJ reported that no staff member has been terminated for PREA policy violations and therefore, no law enforcement agency or licensing bodies contacted.

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

Conclusion:

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

	has determined that the agency is fully compliant with this standard requiring disciplinary sanctions for staff.
--	--

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Statement of Fact memorandum dated 06/29/2026 regarding no instances of contractors or volunteers violating the agency PREA policy Interviews: a) Interview with the Facility Head Observations made during the on-site audit and document review 115.77 Provision (a) MRRJ PREA policy 9A-09 states that, “Any contractor or volunteer who engages in sexual abuse will be prohibited from contact with inmates and will be reported to Brunswick County Sheriff’s Department and licensing bodies unless the activity was not criminal.” The facility has reported that there have been no substantiated cases involving contractors or volunteers violating the facility’s sexual abuse or sexual harassment policies. Also, no volunteer or contractor has been restricted from contact with inmates based on PREA violations in the past twelve months. The evidence collected for this provision shows that the facility has procedures in place to ensure volunteers or contractors who engage in sexual abuse do not have contact with inmates. In addition, when allegations of sexual abuse are alleged then local law enforcement is notified. Therefore, through written policy and document review the facility has demonstrated that it meets this provision. 115.77 Provision (b) MRRJ PREA policy 9A-09 states that, “In case of any other violation of agency sexual abuse or sexual harassment policy by a contractor or volunteer, the Jail will consider whether to prohibit further contact with inmates.”

	The facility has reported that there have been no substantiated cases involving contractors or volunteers violating the facility's sexual abuse or sexual harassment policies. Also, no volunteer or contractor has been restricted from contact with inmates based on PREA violations in the past twelve months. The Auditor interviewed the Facility Head, and he stated that if a contractor or volunteer were accused of violating the facility's sexual abuse or sexual harassment policy then that individual's security clearance would be pulled, and they would no longer be allowed in the facility. If it were determined that the allegation was substantiated, the contractor or volunteer would no longer have access to the facility, and the Brunswick County Sheriff's Office would be contacted. The evidence collected for this provision shows that the facility has procedures in place to address actions to be taken when a contractor or volunteer violates facility's PREA policies but does not engage in sexual abuse of an inmate. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring corrective action for contractors and volunteers.
--	---

115.78 Disciplinary sanctions for inmates	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Disciplinary Hearing documentation Interviews: a) Interview with the Facility Head b) Medical & Mental Health Staff Observations made during the on-site audit and document review 115.78 Provision (a)

MRRJ PREA policy 9A-09 indicates that, "Inmates will be subject to disciplinary sanctions through a formal disciplinary process following an administrative finding that the inmate engaged in Inmate-on-Inmate sexual abuse and/or following a criminal finding of guilt for Inmate-on-Inmate sexual abuse."

In the past twelve months, the facility has reported no instances involving inmate-on-inmate sexual abuse at the facility that were substantiated or unsubstantiated. Therefore, there is no disciplinary hearing documentation. The facility reported no sexual abuse reports where there were criminal findings of guilt that occurred at the facility. However, the facility did provide an example of a 2025 sexual abuse case involving sexual misconduct and provided all the disciplinary hearing documentation as evidence of compliance with this provision.

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

115.78 Provision (b) & (c)

MRRJ PREA policy 9A-09 states that, "Inmate disciplinary sanctions will take in consideration the following: the nature and circumstances of the abuse committed, the inmate's disciplinary history, the sanctions imposed for similar offenses by other inmates with similar histories, and the inmates' mental disabilities or mental illness."

When conducting the interview with the Facility Head, he was asked what disciplinary sanctions inmates are subject to following an investigation that found the inmate had engaged in inmate-on-inmate sexual abuse. In addition, is mental illness considered when determining sanctions? The Facility Head stated that the institutional in-house charge could result in disciplinary segregation, loss of privileges, along with possible criminal charges. However, the punishment would be determined by the severity of the violation. He also stated that mental illness is considered when deciding if the inmate should be charged in the first place due to his/her disability.

The evidence collected for these provisions shows that the facility has procedures in place to discipline those inmates who have been found responsible for engaging in inmate-on-inmate sexual abuse. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets these provisions.

115.78 Provision (d)

The MRRJ reported in the Pre-Audit Questionnaire that the facility would provide therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for sexual abuse. The Auditor questioned this practice once again while on-site. Once the Auditor completed interviews with the medical and mental health staff, it was determined that the facility does not offer these services unless ordered by the courts and then a special therapist/counselor

would be assigned by the courts.

When conducting the interview with the HSA, she was asked if the facility offers therapy, counseling, or other intervention services designed to address and correct the underlying reasons for sexual abuse. The HSA indicated that they do, but it would be through the Community Services Board (CSB). When interviewing the mental health professional, he indicated that the MRRJ does not offer therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for sexual abuse because the inmates in a regional jail are pre-trial detainees and would not be confined to the facility for any length of time so that ongoing counseling would not be beneficial. He also indicated that this issue requires special training and his responsibility and training deals with behavioral issues. However, they would consider providing those services if directed by the courts or recommended by the jail physician.

The evidence collected for this provision shows that the facility does not offer therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for sexual abuse. Therefore, through interviews conducted, the facility has demonstrated that it meets these provisions.

115.78 Provision (e)

MRRJ PREA policy 9A-09 states that, "The Jail will discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact."

The facility has reported no instances during this rating period where an inmate was disciplined for sexual contact with a staff member.

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

115.78 Provision (f)

MRRJ PREA policy 9A-09 states that, "An inmates' report of sexual abuse made in good faith and based on reasonable belief will not be disciplined for falsely reporting an incident or lying, even if the investigation does not establish evidence sufficient to substantiate the allegation."

The evidence collected for this provision shows that the facility has procedures in place that does not discipline those inmates that report sexual abuse or sexual harassment in good faith regardless of the investigative findings. Therefore, through written documentation and document review, the facility has demonstrated that it meets this provision.

115.78 Provision (g)

MRRJ PREA policy 9A-09 states that, "Meherrin River Regional Jail prohibits all sexual

	activity between inmates and will discipline inmates for any such activities. The Meherrin River Regional Jail will not deem the activity as sexual abuse if it was not coerced.” When interviewing the PREA Compliance Manager, he confirmed that the MRRJ prohibits any sexual acts between inmates and will discipline inmates for any such acts. In addition, the MRRJ will not deem the activity as sexual abuse if it was not coerced. The evidence collected for this provision shows that the facility has procedures in place to prohibit any type of sexual activity between inmates and will discipline inmates for those activities. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring disciplinary sanction for inmates.
--	---

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) MRRJ CBH Intake Screening forms c) Mental Health Screening d) MRRJ Mental Health Screening Forms e) Referrals for follow-up meeting mental health Interviews: a) Interview with Staff Responsible for Risk Screening b) Interviews with Medical & Mental Health Staff Observations made during the on-site audit and document review. 115.81 Provision (a) & (c)

MRRJ PREA policy 9A-10 states that, "If the intake screening indicates that a jail inmate has experienced prior sexual victimization in an institutional setting or in the community, the inmate will be offered a follow-up meeting with medical or mental health within 14 days." The policy further states that, "All inmates will be screened during intake using an objective screening instrument for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. If an inmate reports being victimized prior to incarceration, the inmate will be referred to mental health."

The Auditor interviewed one inmate who disclosed prior sexual victimization. The inmate confirmed that mental health services were offered. The facility provided an Intake Screening form documenting the disclosure and a Mental Health Screening form confirming that the follow-up meeting occurred. The Classification Officer notifies the Mental Health Professional through the jail management system.

During the interview, the Classification Officer responsible for risk screening stated that when an inmate discloses prior sexual victimization, he documents the referral on the brief jail mental health screening form for a follow-up meeting, which usually occurs the same day. The officer also explained that mental health staff evaluate all inmates and again ask about prior sexual victimization.

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

115.81 Provision (b)

This facility is a local Regional Jail holding both pre-trial detainees and sentenced inmates. Their facilities are not prison. Therefore, this provision is not applicable to the Meherrin River Regional Jail.

115.81 Provision (d)

MRRJ PREA policy 9A-10 states that, "All information related to sexual victimization and abusiveness that occurred in an institutional setting shall be strictly limited to medical, mental health, and any other staff on a need-to-know basis."

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

115.81 Provision (e)

MRRJ PREA policy 9A-10 states that, "Medical and mental health personnel will 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."

	The HSA was asked if they obtain informed consent from inmates before reporting about prior sexual victimization. In addition, she was asked how she would handle inmates under the age of 18 years old. The HSA stated that she would ask for consent and the documentation is covered in the facility's CBH Permission to Treat form. The HSA also indicated that due to mandatory reporting laws in the state of Virginia, she is obligated to notify social services involving juveniles. However, the MRRJ does not house juvenile inmates. The mental health professional also confirmed that he would obtain consent before discussing prior sexual victimization. He also stated that he has not encountered any juveniles at the jail and therefore has never experienced that situation. However, the mental health professional is aware of the state of Virginia's mandatory reporting laws involving juveniles. The evidence collected for this provision shows that the facility has procedures in place to ensure informed consent is obtained from inmates before medical and mental health staff can report those incidents if the sexual victimization did not occur in a confinement setting. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring a medical and mental health screening, history of sexual abuse.
--	--

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Medical Staff Schedules c) Intake Screening Form d) Mental Health Screening Form Interviews: a) Interview with Staff Responsible for Risk Screening b) Interviews with Medical & Mental Health Staff

c) Interview with Staff First Responder

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

115.82 Provision (a)

MRRJ PREA policy 9A-10 states that, "All inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services."

Both the medical and mental health professionals were interviewed and asked if inmate victims of sexual abuse receive immediate and unimpeded emergency medical care and both answered that they do. In addition, both professionals indicated that the nature and scope of the treatment is at their professional discretion. However, any medical decisions made regarding sexual abuse is determined by the VCU-MCV or MRRJ facility physician.

The facility provided documentation of secondary materials i.e., mental health screening forms, medical notes documenting follow-up visits, and discharge documentation. The facility has provided examples of these documents as proof of compliance.

When interviewing the inmate that reported sexual abuse, the inmate stated he was offered an opportunity to see mental health regarding his allegation of sexual abuse.

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

115.82 Provision (b)

MRRJ provided copies of the 24-hour 7-days a week medical scheduling roster as proof that the facility provided around the clock medical personnel at the facility. The health care delivery system is predicated on the practice of decentralized triage to maximize resources, complement security, and provide timely health care services. The 24-hour professional health care service provides inmates with a level of health care quality consistent with national, state, and local standards. The healthcare provider conforms to practices of confidentiality and maintains appropriate staffing levels as well as required certification of its personnel. The medical contractor provides 24-hour, 7 days a week, on-site medical services including the provision of emergency medical care, daily triage, and sick call services for inmates. All medical/ health care personnel must meet appropriate and current licensing or certification requirements outlined by the state of Virginia.

The PREA Compliance Manager confirmed that a licensed practical or registered nurse is on duty, 24 hours a day 7 days a week, with a licensed physician on call.

Interviews were conducted with 12 random staff and of those staff interviewed, all 12 staff members stated that they would immediately remove the inmate from the situation or housing unit. When interviewing a first responder he explained that he would make the scene safe, report to a supervisor, preserve evidence, contact medical personnel, write a report, and protect the crime scene. If medical personnel for some reason were not available, then the facility would contact the local rescue emergency services for assistance.

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

115.82 Provision (c)

MRRJ PREA policy 9A-10 states that, "All inmate victims of sexual abuse while in the Jail will be offered information and access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate."

The MRRJ utilizes the services provided by the VCU Hospital Medical Forensics Unit to provide these services. The interview with the SANE Nurse specifically outlined that the VCU Unit will offer information, timely access to emergency contraception, and sexually transmitted infections prophylaxis.

When conducting interviews with the HSA it was disclosed that "Yes, the SANE Nurse at the VCU Hospital Medical Forensics Unit offers those services."

The evidence collected for this provision shows that the facility has procedures in place to ensure that inmates are offered information and access to emergency contraception and sexually transmitted infections prophylaxis after allegations of sexual abuse. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

115.82 Provision (d)

MRRJ PREA policy 9A-10 states that, "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."

During the rating period, the facility reported no allegations of sexual abuse that required, or were determined to require, a medical forensic examination.

The evidence collected for this provision shows that the facility has procedures in place to ensure that inmates that report sexual abuse do not incur any financial responsibility due to a sexual abuse allegation. Therefore, through written policy the facility has demonstrated that it meets this provision.

Conclusion:

	Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring access to emergency medical and mental health services.
--	---

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) MRRJ Operating Procedure 7-100 Inmate Classification Interviews: a) Interviews with Medical & Mental Health Staff b) Interview with Inmate who reported a Sexual Abuse Observations made during the on-site audit and document review. 115.83 Provision (a) & (b) MRRJ PREA policy 9A-10 states that, "The Jail will offer medical and mental health evaluation and treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The evaluation and treatment of such victims will include follow-up services, treatment plans, and referrals for continued care following their transfer or release." The interviews conducted revealed that medical staff would not take the lead on treatment and would consult with the SANE Nurse. The HSA stated that the treatment should be individualized based on the type of injury. She also stated that the treatment plan would entail mental health evaluation, crisis intervention, and follow-up appointments. The mental health professional stated that his treatment plan would include crisis intervention, a referral to a psychiatrist, follow-up counseling, and a referral to the Community Services Board if the inmate was to be released. The evidence collected for this provision shows that the facility has procedures in place to ensure the facility offers medical and mental health evaluation and treatment to all inmates who have been sexually victimized. Therefore, through written policy, document review, and interviews conducted, the facility has

demonstrated that it meets this provision.

115.83 Provision (c)

MRRJ contracts with CBH Medical of Virginia LLC to provide medical services. CBH provides correctional healthcare to confinement facilities throughout Virginia. All medical and healthcare personnel must hold and maintain the current licenses or certifications required to practice in Virginia as a condition of employment. The mental health professional is also employed under MRRJ's contract with CBH and provides services at MRRJ's Alberta facility. The medical and mental health services provided at MRRJ are consistent with the community level of care.

An interview was conducted with the Medical & Mental Professionals. These interviews revealed that both professionals believe that the medical and mental health services provided at the MRRJ are consistent with the community level of care.

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

115.83 Provision (d) & (e)

MRRJ PREA policy 9A-10 states that, "Inmate victims of sexual abusive vaginal penetration while in the Jail will be offered pregnancy tests. Inmate victims who become pregnant while in the Jail will receive comprehensive information about all lawful pregnancy-related medical services. There have been no incidents of this nature at this facility during this rating period.

The MRRJ has entered into procedural MOU with the Brunswick County Sheriff's Office to conduct all criminal investigations to include sexual assault. The BCSO utilizes the VCU Hospital Medical Forensic Nursing Unit to provide these services. The interview with the SANE Nurse confirmed that her Unit will offer information, timely access to emergency contraception, and prophylaxis treatment for sexually transmitted infections.

When conducting interviews with the Medical and Mental Health Staff it was revealed that the SANE Nurse at the VCU Hospital Medical Forensics Unit offers this service. In addition, the facility agrees to make the inmate available for further future appointments with the Medical Forensic Unit.

The evidence collected for this provision shows that the facility has procedures in place to ensure that inmates that are victims of vaginal penetration are offered pregnancy tests along with timely information about access to all lawful pregnancy-related medical services. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets these provisions.

115.83 Provision (f)

	MRRJ PREA policy 9A-10 states that, “Inmate victims of sexual abuse while in the Jail will be offered tests for sexually transmitted infections as medically appropriate.” The MRRJ has entered into procedural MOU with the Brunswick County Sheriff’s Office to conduct all criminal investigations to include sexual assault. The BCSO utilizes the VCU Hospital Medical Forensic Nursing Unit to provide these services. The interview with the SANE Nurse confirmed that the VCU Hospital Medical Forensic Unit would offer tests for sexually transmitted infections as medically appropriate. When conducting interviews with the Medical and Mental Health staff it was revealed that the SANE Nurse at the VCU Hospital Medical Forensics Unit offers this service. In addition, the facility agrees to make the inmate available for further future appointments with the Medical Forensic Unit. The evidence collected for this provision shows that the facility has procedures in place to ensure that inmates that are victims of sexual abuse are offered tests for sexually transmitted infections as appropriate. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision. 115.83 Provision (g) MRRJ PREA policy 9A-10 states that, “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.” During the rating period, the facility reported no allegations of sexual abuse that required, or were determined to require, a medical forensic examination. The evidence collected for this provision shows that the facility has procedures in place to ensure that inmates that report sexual abuse do not incur any financial responsibility due to a sexual abuse allegation. Therefore, through written policy the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring ongoing medical and mental health care for sexual abuse victims and abusers.
--	---

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) MRRJ PREA Policy 9A-00
- b) PREA Investigation Notification Letter
- c) Sexual Abuse Incident Reviews

Interviews:

- a) Interview with the Facility Head
- b) Interview with the PREA Coordinator
- c) Interview with the Incident Review Team Member

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

115.86 Provision (a) & (b)

MRRJ PREA policy 9A-11 states that, "A sexual abuse incident review will be conducted within 30 days after the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded."

The Auditor reviewed 10 investigative case files: two involved sexual abuse allegations, and the remaining eight involved sexual harassment allegations. One sexual abuse allegation was substantiated, but the case file did not contain an incident review. The other sexual abuse allegation was determined to be unfounded. During the pre-audit phase, the Auditor documented a request in the Issue Log for evidence of the incident review related to the substantiated case. The facility subsequently conducted the review and provided documentation; however, it occurred after the required 30-day period. The Auditor requested that the Incident Review Team be reminded that future incident reviews must ordinarily be completed within 30 days after the investigation concludes.

Based on the Incident Review Team's composition of upper-management officials and the Auditor's discussion with the Superintendent, the Auditor is satisfied that future incident reviews will be completed within the required 30-day period. This was the only case during the rating period that required an incident review.

The evidence collected for these provisions shows that the facility has procedures in place to ensure that an incident review is conducted after every sexual abuse investigation excluding those that are unfounded. In addition, the incident review shall occur within 30 days of the conclusion of the investigation. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

115.86 Provision (c)

MRRJ PREA policy 9A-10 states that, "The review team will consist of upper-level management officials, supervisors, investigators, and medical/mental health

personnel.”

In the interview with the Facility Head, he stated that the facility does utilize an incident review team and the individuals who participate in the meeting are the Major, PREA Coordinator, Medical Personnel, Shift Supervisor, and Facility Investigator.

Documentation of the one Incident Review conducted listed the members of that meeting. In attendance were the Major, PREA Coordinator, Facility Investigator, and Medical Personnel.

The evidence collected for this provision shows that the facility has procedures in place to ensure that the review team is made up of upper-level management, supervisors, investigators, and medical/mental health staff. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

115.86 Provision (d) & (e)

MRRJ PREA policy 9A-00 states that, “The review team will consider the following:

- a. A need to change policy or practice to better prevent, detect, or respond to sexual abuse.
- b. 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.
- c. The area in the Jail where the alleged incident occurred to assess whether physical barriers in the area may permit abuse.
- d. The adequacy of staffing levels in that area during different shifts.
- e. Whether monitoring technology should be deployed or augmented to supplement supervision by staff.
- f. 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.
- g. The Jail will implement the review team’s recommendations for improvements or will document the reasons for not doing so.”

The facility provided Incident Review meeting notes where all the listed considerations were discussed in the meeting notes. In addition, a review of the investigative files by the Auditor confirmed this practice.

Interviews with the Facility Head, Incident Review Team Member, and PREA Compliance Manager all revealed that these topics are considered and discussed during the review. The facility forwards all incident review documentation to the Deputy Superintendent for review. The PREA Compliance Manager stated that the

	reports are forwarded to him for review and any recommendations are forwarded up the chain of command. The evidence collected for this provision shows that the facility has procedures in place to ensure that the incident review team considers all the above-listed criteria when convening their meetings. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring sexual abuse incident reviews.
--	--

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) Copy of the MRRJ 2023 and 2024 Survey of Sexual Victimization c) 2025 PREA Annual Report Interviews: Observations made during the on-site audit and document review. 115.87 Provision (a) & (c) MRRJ PREA policy 9A-11 states that, “The Jail will collect annually 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 facility reported that their collection instrument is based directly off the Survey of Sexual Victimization (SSV). The facility also provided the “PREA Investigation Spreadsheet” documenting those characteristics necessary to complete and document the information relied upon to complete the SSV for the DOJ and Bureau of Justice Statistics. Finally, the facility provided a copy of their 2023 and 2024 SSV report to the DOJ.

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

115.87 Provision (b)

The facility has provided the last three years' worth of PREA aggregated data in their PREA annual report containing comparisons of the current year's data and corrective actions from the previous years' assessment of the facility's progress. All annual reports from 2013 forward can be found on the agency's website. In addition, the facility provided the Auditor with the 2025 edition of the PREA Annual Report for review.

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

115.87 Provision (d)

MRRJ PREA policy 9A-11 states that, "The Jail will collect annually 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 facility has provided the "PREA Investigation Spreadsheet" containing the collected data used to complete and submit the SSV for the Department of Justice Bureau of Justice Statistics.

The evidence collected for this provision shows that the facility has procedures in place to maintain, review, and collect data to ensure that the incident review team consider all the above listed available incident-based documents. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

115.87 Provision (e)

This provision is not applicable to this facility because the facility does not contract for the confinement of its inmates to any private facility.

115.87 Provision (f)

MRRJ PREA policy 9A-11 states that, "Upon request, the Jail will provide all such data from the previous calendar year to the Department of Justice no later than June 30."

The facility has provided the 2023 and 2024 SSV completed report for MRRJ containing the collected data used to complete and submit the SSV for the Department of Justice, Bureau of Justice Statistics.

	The evidence collected for this provision shows that the facility has procedures in place to submit their annual SSV report to the Department of Justice. The facility has submitted evidence that these reports have been provided to the DOJ for the last four years. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring Data Collection.
--	--

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) MRRJ 2025 PREA Annual Report c) Meherrin River Regional Jail Website Interviews: a) Interview with Agency Head b) Interview with PREA Coordinator Observations made during the on-site audit and document review. 115.88 Provision (a) MRRJ PREA policy 9A-11 states that, “MRRJ shall review data collected and aggregated 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, taking corrective action on an ongoing basis, and preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.” The facility has provided the 2025 PREA Annual Report as evidence to support compliance with this provision. The report includes all the above elements outlined in this provision, specifically, under the annual accomplishments and recommendation

portions of the annual reports. The report compares the last three years of data collected.

Interviews conducted with the Agency Head and PREA Coordinator confirmed that an annual report is generated to assess and improve the effectiveness of the facility's prevention, detection, and response to sexual abuse. The PREA Compliance Manager stated that the report can be used to identify safety concerns, blind spots, and for training purposes.

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

115.88 Provision (b)

MRRJ PREA policy 9A-11 states that, "Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse."

The 2025 MRRJ PREA Annual Report makes comparisons for Inmate-on-Inmate and Staff-on-Inmate Allegations of Sexual Abuse from 2023 to 2025.

The facility has made available the last eleven years' worth of PREA annual reports containing comparisons of the current year's data and corrective actions from the previous year's assessment of the facility's progress on the agency's website.

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

115.88 Provision (c)

MRRJ PREA policy 9A-11 states that, "MRRJ 's report shall be 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."

The facility has posted the last eleven years of sexual safety statistics in their PREA Annual Reports on their website. All these annual reports can be viewed on the facility website. This is a public website that provides access to those reports. When interviewing the Agency Head, he stated that the PREA Coordinator and Compliance Manager collects all the stats from Facility Investigator and presents the report to the Superintendent for his approval before being published on the facility website. The 2025 Annual Report has been approved via signature by the Superintendent.

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

	meets this provision. 115.88 Provision (d) MRRJ PREA policy 9A-11 states that, “MRRJ may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.” The facility reported that the only information redacted from the annual reports are the names of the individuals involved and that there has been no material redacted. The PREA Coordinator stated during his interview that only personal identifiers and threats to safety and security would be the only reasons to redact information from the PREA Annual Report. The evidence collected for this provision shows that the facility has procedures in place to redact only specific information from the PREA Annual Report. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring Data Review for corrective action.
--	--

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard: Documents: a) MRRJ PREA Policy 9A-00 b) 2025 PREA Annual Report c) The Meherrin River Regional Jail Website Interviews: a) Interview with PREA Coordinator Observations made during the on-site audit and document review. 115.89 Provision (a)

	MRRJ PREA policy 9A-11 states that, “The Jail will ensure all data collected is securely retained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.” The PREA Coordinator was interviewed and asked how the facility ensures that the data collected is securely retained. The PREA Coordinator stated that all hard copies of files, investigations, and reports are kept in the PREA Coordinator’s office in a locked filing cabinet. In addition, all electronic files are kept by the Facility Investigator. Only the PREA Coordinator, Facility Investigator, Administrative Major, and Superintendent have access to these files. The evidence collected for this provision shows that the facility has a procedure in place to secure collected data regarding sexual abuse allegations. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision. 115.89 Provision (b) &(c) MRRJ Operating Procedure 9A-11 states that, “The report will be made readily available to the public through the Jail’s website excluding all personal identifiers after final approval by the Superintendent.” The facility has posted the 2025 PREA Annual Report on their website. This is a public website that provides access to this report. This report can be viewed by going to the facility’s website. The evidence collected for this provision shows that the facility has procedures in place to make the PREA Annual Report public by posting it to their website and that all personal identifiers are redacted prior to publication. Therefore, through written policy and document review the facility has demonstrated that it meets this provision. 115.89 Provision (d) MRRJ PREA policy 9A-11 states that, “The Jail will ensure all data collected is securely retained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.” The evidence collected for this provision shows that the facility has procedures in place to ensure sexual abuse data is retained for at least 10 years after the date of the initial collection. Therefore, through written policy and document review the facility has demonstrated that it meets this provision. Conclusion: Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring data storage, publication, and destruction.
--	--

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	PREA Standard 115.401 Frequency and Scope of Audits This is Meherrin River Regional Jail's third PREA Audit. The 2023 PREA audit was conducted in August of 2023. In 2023, the facility met 45 PREA standards, exceeded 0 standards, and 0 standards were not applicable. There was no corrective action necessary during the 2023 audit. The Auditor was provided with full access to and observed all areas of the facility without obstruction. The Auditor received all requested documents or copies of relevant materials. The Auditor was also permitted to conduct all interviews in a private setting with both inmates and staff. Finally, the inmates were permitted to send the Auditor confidential correspondence in the same manner that legal mail would be handled. This topic was discussed and documented prior to the audit. The Auditor did not receive any inmate correspondence.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	PREA Standard 115.403 Audit Contents and Findings The Meherrin River Regional Jail posted the facility's 2023 PREA Auditor's Summary report on their agency website. The agency publishes all facility PREA annual reports on their website. Therefore, evidence would suggest that this would happen once again after receiving the 2026 PREA audit final report for the MRRJ.

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

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

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

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

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.15 (f)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes

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

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

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

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

	agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
	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.)	na
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na

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

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

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

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

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

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

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

	criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

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

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

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

	can be arranged?	
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	

	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision,	yes

	does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days?	yes

	(N/A if agency is exempt from this standard.)	
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of	yes

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

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

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

	with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial	yes

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

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

	committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who	yes

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

	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	no
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	na
115.81 (b)	Medical and mental health screenings; history of sexual abuse	

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

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

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

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

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

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

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