

# PREA Facility Audit Report: Final

**Name of Facility:** Chesapeake Correctional Center

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 06/04/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Joy Catrett-Bell	<b>Date of Signature:</b> 06/04/ 2023

AUDITOR INFORMATION	
<b>Auditor name:</b>	Catrett-Bell, Joy
<b>Email:</b>	jcbell1111@gmail.com
<b>Start Date of On-Site Audit:</b>	05/08/2023
<b>End Date of On-Site Audit:</b>	05/09/2023

FACILITY INFORMATION	
<b>Facility name:</b>	Chesapeake Correctional Center
<b>Facility physical address:</b>	400 Albemarle Drive, Chesapeake, Virginia - 23322
<b>Facility mailing address:</b>	PO Box 15125, Chesapeake, Virginia - 23328

**Primary Contact**

<b>Name:</b>	Re'Carla Denson
<b>Email Address:</b>	rdenson@cityofchesapeake.net
<b>Telephone Number:</b>	757-382-2849

**Warden/Jail Administrator/Sheriff/Director**

<b>Name:</b>	John Hyman
<b>Email Address:</b>	jhyman@cityofchesapeake.net
<b>Telephone Number:</b>	757-382-6232

**Facility PREA Compliance Manager**

<b>Name:</b>	Re'Carla Denson
<b>Email Address:</b>	rdenson@cityofchesapeake.net
<b>Telephone Number:</b>	O: 757-382-2849

**Facility Health Service Administrator On-site**

<b>Name:</b>	Brittany Jones
<b>Email Address:</b>	bljones@wellpath.us
<b>Telephone Number:</b>	757-382-2858

**Facility Characteristics**

<b>Designed facility capacity:</b>	747
<b>Current population of facility:</b>	690
<b>Average daily population for the past 12 months:</b>	769
<b>Has the facility been over capacity at any point in the past 12 months?</b>	Yes

<b>Which population(s) does the facility hold?</b>	Both females and males
<b>Age range of population:</b>	18-91
<b>Facility security levels/inmate custody levels:</b>	Minimum, Medium, Maximum
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	386
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	91
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	67

AGENCY INFORMATION	
<b>Name of agency:</b>	Chesapeake Sheriff's Office
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	401 Albemarle Drive, Chesapeake, Virginia - 23322
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

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

Agency-Wide PREA Coordinator Information
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<b>Name:</b>	Michael Flint	<b>Email Address:</b>	mflint@cityofchesapeake.net
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## Facility AUDIT FINDINGS

### Summary of Audit Findings

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

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

#### Number of standards exceeded:

2

- 115.31 - Employee training
- 115.77 - Corrective action for contractors and volunteers

#### Number of standards met:

43

#### Number of standards not met:

0

## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-05-08
2. End date of the onsite portion of the audit:	2023-05-09

#### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Chesapeake Virginia YWCA.

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	747
15. Average daily population for the past 12 months:	769
16. Number of inmate/resident/detainee housing units:	50
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> 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**

<b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	680
<b>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	2
<b>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>	7

<b>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b>	2
<b>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b>	5
<b>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b>	No additional comments to be added.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b>	386
<b>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	67

51. Enter the total number of <b>CONTRACTORS</b> assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	91
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No additional comments to add.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
53. Enter the total number of <b>RANDOM INMATES/RESIDENTS/DETAINEES</b> who were interviewed:	32
54. Select which characteristics you considered when you selected <b>RANDOM INMATE/RESIDENT/DETAINEE</b> interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of <b>RANDOM INMATE/RESIDENT/DETAINEE</b> interviewees was geographically diverse?	Inmates were randomly selected from each housing area, ethnicity, race, and age group to insure a geographically sample to interview.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No



<b>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	There were no barriers to prevent interviews with inmates.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	13
<p>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".</p>	
<b>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>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).</b>	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. I observed housing units and interviewed staff and inmates.

<b>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b>	3
<b>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b>	1

<b>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<div> <input checked="" type="checkbox"/> 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. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
<b>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).</b>	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. I interviewed staff, inmates and reviewed documentation.
<b>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b>	4
<b>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b>	0

<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<input checked="" type="checkbox"/> 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.  <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
<b>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).</b>	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. I interviewed staff and inmates and reviewed documentation.
<b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>	There were no barriers present to prevent interviews with inmates.
<b>Staff, Volunteer, and Contractor Interviews</b>	
<b>Random Staff Interviews</b>	
<b>71. Enter the total number of RANDOM STAFF who were interviewed:</b>	15
<b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b>	<input checked="" type="checkbox"/> Length of tenure in the facility  <input checked="" type="checkbox"/> Shift assignment  <input checked="" type="checkbox"/> Work assignment  <input checked="" type="checkbox"/> Rank (or equivalent)  <input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)  <input type="checkbox"/> None
<b>If "Other," describe:</b>	Interviewed female officers who represented a smaller percentage of the work force and interviewed staff that were bilingual.

<b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	I was afforded the opportunity to interview staff that represented all Shifts and Post assignments.
<b>Specialized Staff, Volunteers, and Contractor Interviews</b>	
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.	
<b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	19
<b>76. Were you able to interview the Agency Head?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>78. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>79. Were you able to interview the PREA Compliance Manager?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input type="checkbox"/> Other
<b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>	1
<b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	3
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
<b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	Specialized staff interviewed were knowledgeable of PREA requirements and were readily available for interviewing.

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

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

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

☒ Yes

☐ No

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

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No



<b>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b>	All areas of the facility were accessible to the Auditor and informal conversations were conducted with staff and inmates while touring.
<b>Documentation Sampling</b>	
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.	
<b>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b>	<input checked="checked" type="radio"/> Yes  <input type="radio"/> No
<b>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b>	No text provided.
<b>SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY</b>	
<b>Sexual Abuse and Sexual Harassment Allegations and Investigations Overview</b>	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual abuse</b>	7	0	7	0
<b>Staff-on-inmate sexual abuse</b>	1	1	1	1
<b>Total</b>	8	1	8	1

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	0	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	1	1	1	0	0
Total	1	1	1	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	7	5	2	0
Staff-on-inmate sexual abuse	1	0	0	1
Total	8	5	2	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.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	0	0

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

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

8

<b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
<b>Inmate-on-inmate sexual abuse investigation files</b>	
<b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	7
<b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
<b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	1
<b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

<b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
<b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>a. Explain why you were unable to review any sexual harassment investigation files:</b>	No Staff-on-Inmate sexual harassment cases reported.
<b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes  <input type="radio"/> No  <input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
<b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b>	<input type="radio"/> Yes  <input type="radio"/> No  <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

<b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
<b>Staff-on-inmate sexual harassment investigation files</b>	
<b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	No Staff-on-Inmate sexual harassment cases reported.

## SUPPORT STAFF INFORMATION

### DOJ-certified PREA Auditors Support Staff

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

☐ Yes

☒ No

### Non-certified Support Staff

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

☒ Yes

☐ No

**a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:**

1

## AUDITING ARRANGEMENTS AND COMPENSATION

**121. Who paid you to conduct this audit?**

☐ The audited facility or its parent agency

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

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

☐ Other

**Identify the name of the third-party auditing entity**

AB Management LLC



<b>Standards</b>	
<b>Auditor Overall Determination Definitions</b>	
<ul style="list-style-type: none"> <li>Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>Does Not Meet Standard (requires corrective actions)</li> </ul>	
<b>Auditor Discussion Instructions</b>	
<p>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.</p>	

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>Policy 1.2.35 Prison Rape Elimination Act of 2003 (PREA)</li> <li>Policy 2.2.31 PREA (Prison Rape Elimination Act) Compliance Manager</li> <li>Policy 2.2.32 PREA (Prison Rape Elimination Act) Coordinator</li> <li>Policy 1.2.13 Discrimination, Sexual Abuse and Sexual Harassment</li> <li>Policy 2.5.02 Preventing Inmate Sexual Abuse, Harassment, Assault, &amp; Misconduct</li> <li>Policy 2.1.18 Inmate Rules of Conduct</li> <li>Organizational Chart</li> <li>Interviews with Staff and Inmates</li> </ol> <p>115.11: Policy states that the CCC is committed to the safety and security of inmates, staff and others. The facility will establish guidelines and procedures to address the Prison Rape Elimination Act (PREA) of 2003 and the Department of Justice</p>

	<p>(DOJ) standards related to the same. It is the duty of CCC to strictly abide by as well as strictly enforce a zero tolerance policy on all forms of sexual abuse and sexual harassment of inmates as defined under the PREA Act, while maintaining a high level of moral, ethical conduct, and professional pride. The Auditor reviewed the policy and found that definitions of prohibited behaviors are included throughout the body of the policy. CCC staff members, contractors or volunteers who have contact with inmates are found to have been involved in any substantiated incident of inmate sexual abuse or harassment is subject to disciplinary action. They could face up to and including immediate termination of employment, services, or contract, consistent with the CCC personnel policies and procedures, as well as criminal prosecution when warranted.</p> <p>115.11(b): Policy states that CCC will designate a PREA Coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with PREA standards. A review of the organizational chart shows there is a designated PREA Coordinator that reports directly to the Chief of Detention Services. Interviews with the PREA Coordinator confirmed that they have sufficient time and authority to develop, implement, and oversee agency efforts to comply with PREA standards.</p> <p>115.11 (c): A review of the CCC Organizational Chart shows that the PREA Compliance Manager's Chain of Command consists of Classification Officer, Classification Sergeant, Records Lieutenant and Administration Captain. The organizational chart shows that the PREA Compliance Manager has a direct line to the Chief of Detention Services and a interview with the PREA Compliance Manager verified they have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.</p> <p>Conclusion:</p> <p>Based on analysis and evaluation of the evidence reviewed, the agency and facility have demonstrated compliance with all provisions of this standard. The Auditor has determined the facility meets the standard requirements.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. CCC Completed PAQ</li> <li>3. Interviews with Staff</li> <li>4. PCM Interview</li> <li>5. Facility Administrator Interview</li> <li>6. Marshal Contract</li> </ol>

	<p>The Auditor verified there is a Federal Contract between the United States Marshals Service and Chesapeake Correctional Center. Their contract with the United States Marshals Service states that CCC will provide housing, safekeeping, subsistence, and care of Federal prisoners. However, the facility does not have a contract with any external entity that houses their inmates. Based on interviews with CCC PREA Coordinator, Compliance Manager, and Facility Administrator, there are no External contracts for the confinement of CCC inmates.</p> <p>Conclusion:</p> <p>The Auditor determined the facility meets the provisions of standard, through non-applicability.</p>
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<b>115.13</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Policy 2.2.08 Correctional Lieutenant</li> <li>3. Policy 2.2.09 Correctional Sergeant</li> <li>4. Staffing Plan and Review</li> <li>5. Shift Rosters</li> <li>6. Housing Unit Logs</li> <li>7. Interviews with Staff</li> <li>8. Interviews with Inmates</li> <li>9. Observations</li> </ol> <p>The CCC has a comprehensive staffing plan that addresses all required elements of the standard. It addresses staffing in each department, staffing ratios, programming, facility layout, composition of the inmate population, video monitoring and other relevant factors. The facility staffing is based upon the formula dictated by the Virginia Compensation Board to determine the number of staff needed for essential positions and the number of beds the facility is rated. It provides for administrative, civilian, and sworn staff in all areas of the jail, and mandatory shift staff coverage.</p> <p>The most recent review of the staffing analysis was completed on January 31, 2023. Additionally, the facility provided duty rosters dating back to the first quarter of 2021 through the third quarter of 2022. These documents were used to facilitate actions taken by the facility to cover any deviations from the staffing plan. Notations and daily deviations from the regular staffing plan are notated on the shift roster by the</p>

	<p>shift supervisor who ensures that staffing does not fall below the minimum required. During the on-site review, the Auditor found no discrepancies and the staffing plan has not required revision since the last PREA Audit cycle.</p> <p>Interviews with higher level staff members such as the Jail Administrator, Lieutenants, and Sergeants confirmed they conduct unannounced rounds daily and those are documented in the PREA Logbook located in each building. Additionally, the PREA Logbooks were reviewed during the tour of the facility on the first day of the onsite audit visit and a marginal number of copies of PREA Logbooks were provided during the pre-audit phase.</p> <p>Conclusion:</p> <p>The Auditor reviewed policies, procedures, Staffing Plan, logbooks, shift rosters, made observations, and conducted interviews with staff &amp; inmates. The facility conducts an annual staffing plan review as required by this standard and the Auditor determined the facility meets the requirements of the standard.</p>
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<b>115.14 Youthful inmates</b>	
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. MOU</li> <li>3. Population Reports</li> <li>4. Interviews with Staff</li> <li>5. Interviews with Inmates</li> <li>6. Observations</li> <li>7. Memo</li> </ol> <p>The CCC does not house youthful inmates, but the facility has a policy for short-term emergency situations that meet PREA standards. The PAQ, documentation submitted and interviews with staff confirm that there have been no youthful inmates housed at the CCC during the audit period.</p> <p>Conclusion:</p>

	The Auditor reviewed the CCC policies, procedures, population reports, conducted interviews, and made observations to determine the facility meets the requirements of this standard.
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<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy -2.5.03 Housing, Viewing, and Searching of Transgender/Intersex Inmates</li> <li>2. Policy -2.1.27 Searches</li> <li>3. Shift Rosters</li> <li>4. PowerPoint Training</li> <li>5. Training Curriculum</li> <li>6. Training Records</li> <li>7. Staff interviews</li> <li>8. Inmate interviews</li> <li>9. PREA Coordinator interview</li> <li>10. Medical Staff interviews</li> </ol> <p>Interviews with the staff and inmates indicated that there are female staff that work in the housing units and enter housing units daily. These interviews also confirmed that staff are making the required cross gender announcements so that inmates can shower, change clothes and perform bodily functions without staff of the opposite gender viewing their genitals. This was also confirmed by reviewing the PREA Logbooks both onsite and as part of the pre-audit information provided to this Auditor. Auditor interviews with inmates indicated that all female staff entering the housing units made the required cross gender announcements.</p> <p>CCC policy prohibits the pat down search of female inmates by male staff members absent exigent circumstances and any such search shall be documented. The CCC does not conduct cross-gender pat down searches and the facility does not routinely allow female staff to pat-search male inmates. In the event a body cavity search was needed it would be performed by a medical professional and a Body Scanner is in the Intake area. CCC does not conduct cross-gender strip searches or cross-gender visual body cavity searches except when performed by medical practitioners. Interviews with staff, including medical personnel, indicate the operational practice is consistent with this policy.</p>

	<p>The facility houses both male and female inmates, but predominantly male inmates. Female inmates are typically held for shorter periods of time for pre-trial detention, while awaiting transfer for long term pre- and post-trial detention, or they are held for short non-consecutive terms of confinement. Female inmates detained in the jail are searched and supervised by female correctional deputies and male deputies supervise the male inmates.</p> <p>The facility administrator maintains roster assignments to provide adequate male and female staff on duty for each shift. During normal business hours, female deputies and supervisory staff are available if needed. Female patrol officers could be utilized if needed for female inmate searches during all other shifts. Female inmates' access to programming and out of cell opportunities are not limited due to a lack of female staff availability. Interviews with staff and inmates confirm that cross-gender pat down searches do not occur.</p> <p>The Auditor observed opposite gender announcements being made during the tour which alerts the inmates and provides time to allow them to cover themselves prior to being observed by opposite gender staff members. Random sample viewing of CCTV placements in the housing units verified the viewing area of the cameras did not expose direct view of the prisoners while changing clothes. Cameras located in common areas and individual cells were positioned directionally away from direct view of the urinal/toilet or the area was digitally pixeled to provide a security screen to allow privacy.</p> <p>CCC policies require all deputies to be trained on how to conduct searches to include transgender and intersex inmates. Staff stated that they are trained on Cross-Gender searches at the academy and were able to convey to the Auditor how they would conduct a search of a transgender or Intersex inmate. During staff interviews, all employees stated they were provided training on how to conduct cross-gender, transgendered and intersex inmates pat down searches.</p> <p>The auditor reviewed the training documentation regarding how to conduct cross-gender pat down searches as well as how to properly search transgendered and intersex inmates. The Auditor observed a section of the training curriculum that discusses professionalism and respect for the subject being searched. The techniques covered in the training appear to minimize intrusion of the inmate being searched. Document review indicates all employees hired in the past 12 months received the required training for searches.</p> <p>Conclusion:</p> <p>The Auditor reviewed the CCC policies, procedures, population reports, interviewed staff and inmates, and made observations to determine the facility meets the requirements of this standard.</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
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**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Materials, Interviews, Policies and Other Evidence Reviewed:

1. Policy 1.2.35 Prison Rape Elimination Act of 2003
2. Policy 2.6.03 Deaf or Hearing Impaired
3. Competed CCC PAQ
4. PREA Preventing Sexual Abuse and Sexual Harassment
5. Inmate Training
6. Staff Interviews
7. Interviews with Inmates
8. Observations

The agency has a policy which requires staff take appropriate steps to ensure inmates with disabilities or limited English proficiency have an equal opportunity to participate in or benefit from all aspects of the CCC's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The policy requires the inclusion of those who are deaf or hard of hearing, blind or low vision, and those who have intellectual, psychiatric, or speech disabilities.

CCC policy is written in accordance with this standard and states that during the booking process, inmates determined to have disabilities will have accommodations made to ensure that materials are distributed through a method that is clear and provides concise communication. The PREA Coordinator and Accreditation Manager stated that if they receive an inmate with a disability, that Intake staff would make all necessary accommodations and notifications to appropriate staff.

The Auditor interviewed line staff, supervisory staff and Intake deputies who confirmed that they have a course of action in place to ensure that all inmates, regardless of disability would have equal access to PREA information. Staff interviewed including the Facility Administrator, PREA Coordinator, and Accreditation Manager, confirmed that they did not currently have any inmates with disabilities or special needs that would require special revisions to have access to the PREA information.

Auditors observed PREA informational posters throughout the facility in both English and Spanish. Interviews with staff responsible for Intake and Classification confirmed that inmates with disabilities were provided access to the PREA program and that they provide these choices on a case-by-case basis. Some staff stated they have utilized the Google based interpretive service for LEP inmates. When asked how they would respond to the needs of an individual with a cognitive disorder or severe mental illness, staff stated that it would depend on the level of impairment and the exact communication requirements of the inmate.

CCC policy maintains that inmates who are LEP have access to all the facility's efforts to prevent, detect and respond to sexual abuse and harassment, including providing

	<p>interpreters. Through staff interviews, it was determined that CCC has interpreters available for LEP inmates by means of a Google based interpreter service. Facility staff complement consist of staff members who can speak various languages to include Spanish and Mandarin.</p> <p>According to the submitted PAQ, the agency had not used an interpretive service during the last 12 months. Staff indicated they were aware of the interpreter service, and stated there were bilingual staff available to provide translation for an inmates.</p> <p>CONCLUSION:</p> <p>The Auditor conducted a thorough review of the agency's policies, procedures, training, made observations, interviewed staff and inmates. The Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Policy 1.2.20 Employment</li> <li>3. Policy 1.2.36 Promotion Procedure</li> <li>4. Policy 1.2.09 Career Development Program</li> <li>5. Approved Volunteer and Contractor List</li> <li>6. Affirmation of Duty to Disclose Misconduct Updated form</li> <li>7. Pre-Employment Background Information</li> <li>8. Employee Records</li> <li>9. Contractor Records</li> <li>10. Interview with Staff</li> <li>11. Interview with Contractors</li> </ol> <p>The Auditor reviewed documentation used by the facility for staff pre-employment and promotional purposes. The facility requires each applicant complete a Pre-Employment Background Information questionnaire prior to access to the facility. The CCC policy prohibits hiring anyone or enlisting the services of any contractor or volunteer who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in U.S.C. 1997), been convicted of engaging or attempting to engage in sexual activity in the community which was facilitated by force, overt or implied threats of force or coercion, if the victim did not consent or was unable to consent or refuse, or been civilly or administratively adjudicated to have engaged in the activities described</p>



above. Each candidate is required to complete the Affirmation of Duty to Disclose Misconduct form prior to working in the facility.

The Auditor randomly chose the records of (8) staff members for review. Each staff member was required to complete the agency's Pre-Employment Background Information questionnaire prior to employment and the (Affirmation of Duty to Disclose Misconduct) form. The Auditor observed that employees completed the form on an annual basis and prior to any date of promotion. The Auditor reviewed the records of contractors and confirmed the agency conducted a criminal record background check through the Virginia Criminal Information Network and National Crime Information Center on each prior to enlisting their services. The Auditor verified all current employees had a criminal record background check conducted within the previous 5 years. CCC conducts the background checks annually.

The policy indicates that the CCC will consider any instances of sexual harassment in determining whether to hire or promote anyone or enlist the services of contractors who may have contact with inmates. The Auditor interviewed Human Resources staff who confirmed that instances of sexual harassment would be a factor when making decisions about hiring and/or promotion. All potential employees and contractors undergo a background check and are not offered employment if disqualifying information is discovered.

In addition, the CCC utilizes a checklist for the background process which verifies all steps have been completed, including the criminal history check. HR staff stated that if a prospective applicant previously worked at another correctional institutional, they make every effort to contact the facility for information on the employee's work history and any potential issues, including allegations of sexual assault or harassment, or resignation during a pending investigation. In accordance with the standard, CCC policy stipulates that omissions regarding such conduct or the provision of materially false information shall be grounds for termination. CCC policy requires that the facility provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer and a signed release of information. HR Staff indicated they share information upon request from another facility regarding a former employee.

The Human Resource manager confirmed that all promotional candidates are screened in accordance with the applicable standard. The CCC maintains written proof of all inquiries and the results are in the candidate's personnel file. All personnel that are responsible for conducting such inquiries are trained in accordance with the standards. The Auditor concluded that CCC is performing appropriate practices to identify previous acts of sexual misconduct prior to hiring staff, enlisting the services of contractors, or promoting staff members.

Conclusion: The Auditor conducted a thorough review of the agency's policies, procedures, employment records, forms, interviewed staff & contractors and determined the facility meets the requirements of this standard.

<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Facility Drawings</li> <li>3. Camera diagram</li> <li>4. Interviews with Staff</li> <li>5. Observations</li> <li>6. Interviews with PREA Coordinator and Facility Administrator</li> <li>7. Completed CCC Pre-Audit Questionnaire</li> </ol> <p>115.18 (a): The facility indicated that they have not acquired any new facility or planned any substantial expansion or modification of the existing facility, nor have they updated their video monitoring system, electronic surveillance system, or other monitoring technology since the previous audit cycle. Observations during the site visit and interviews with staff, verified information provided by the facility.</p> <p>Conclusion:</p> <p>The Auditor conducted a thorough review of the agency's policies, procedures, tour observations, interviewed staff and contractors. The Auditor determined the facility meets the requirements of this standard.</p>

<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Policy 1.2.37 Property and Evidence Control</li> <li>3. Policy 2.1.31 Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, and Sexual Misconduct</li> <li>4. Chesapeake Police Department MOU</li> <li>5. Cooperative agreement with YWCA</li> <li>6. Investigative Records</li> <li>7. SANE Report</li> <li>8. Interviews with Staff</li> <li>9. Interview with SANE</li> </ol>

10. Interview with Victim Advocate

11. Observation

According to CCC policy, investigators conduct administrative investigations of sexual abuse and sexual harassment. CCC has an agreement with the Chesapeake Police Department to conduct criminal investigations of sexual abuse at the facility. CCC staff are responsible for preserving any crime scene until a Chesapeake Police Investigator arrives to process the scene. The MOU signed by the Sheriff and Chief of Police in January 2015, remains in force until either party terminates in writing and the agreement may be amended as mutually agreed upon by both parties. The facility follows a uniform protocol for investigating allegations of sexual abuse that maximizes the possibility of collecting usable evidence and trains facility staff who may be first responders in this protocol.

CCC policy states that the agency will follow a uniform evidence protocol which maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The protocol is required to be developmentally appropriate for youth where applicable. When appropriate, will be adopted 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. It is noted that CCC does not house youthful inmates. The Auditor reviewed the agency's policy regarding evidence control which addresses appropriate measures during the initial seizure, through the disposition of evidence. Facility personnel are trained on how to protect evidence in any crime scene related to sexual abuse.

The Auditor interviewed the Health Services Administrator and Director of Nursing to verify if any Wellpath medical personnel conduct forensic examinations and was informed Wellpath medical personnel do not conduct forensic examinations. Medical personnel stated that a SANE nurse with the Chesapeake Forensic Specialist Group would be contacted to conduct forensic examinations at Chesapeake Medical Center.

CCC policy stipulates that all victims of sexual abuse shall be offered a forensic medical exam without financial cost including prophylactic testing/treatment for suspected STIs, and pregnancy testing as applicable. Examinations will be conducted by qualified SANE/SAFE experts in accordance with the DOJ guidelines of The National Protocol for Sexual Assault Medical Forensic Examinations. Pursuant to the MOU, persons performing these exams will be either Registered Nurses licensed by their respective State Board of Nursing and possess training and/or certification in the Sexual Assault Nurse Examination or a Physician with training specific to the sexual assault medical forensic examination. Chesapeake Correctional Center has access to SANE/SAFE nurses who are available 24 hours per day and 7 days per week and there are no charges to the victim for these exams and the availability of these services was confirmed by the HSA.

	<p>CCC policy states a victim advocate from a rape crisis center will be available to an inmate victim. CCC has a MOU signed in 2013 with the YWCA who provide support services and serve as a victim advocate to victims of sexual assault at CCC. The joint agreement remains in effect until either party terminates in writing or the agreement may be amended as mutually agreed upon by both parties. It is stipulated in the MOU that the YWCA is available to provide an advocaat that will accompany and support the victim through the forensic exam process if requested and shall provide any requested emotional support or crisis intervention services.</p> <p>The Auditor determined an appropriate evidence protocol is used when collecting forensic evidence following a sexual abuse incident. The CCC allows inmates access to a victim advocate from a rape crisis center. The facility provides access to a Sexual Assault Nurse Examiner through the Chesapeake Forensic Specialists.</p> <p>Conclusion:</p> <p>The Auditor reviewed the agency's policies, procedures, Memorandums of Understanding, investigative records and conducted interviews with investigators, SANE, victim advocate and medical personnel. The Auditor determined the facility meets the requirements of this standard.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 2.1.31 Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, and Sexual Misconduct</li> <li>2. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>3. Agency Website</li> <li>4. Investigative Files</li> <li>5. Interviews with Staff and Inmates</li> </ol> <p>The Auditor reviewed the CCC website which provides a link with information regarding the agency's policies related to conducting investigations of sexual abuse and sexual harassment allegations. The website states that CCC refers allegations of sexual abuse to the Chesapeake Police Department for criminal investigation and that the CCC investigates any allegation that does not involve potential criminal behavior.</p> <p>The CCC has a policy to ensure an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. The facility's policy is to notify the Chesapeake Police Department of any allegation of sexual</p>

	<p>abuse or sexual harassment to conduct criminal investigations, unless the allegation do not involve potentially criminal behavior. CCC personnel are required to document all referrals to the Chesapeake Police Department who has the legal authority to conduct criminal investigations. The Auditor interviewed a facility investigator and asked what protocol is utilized if the facility investigator determines the act was potentially criminal in nature. The investigator informed the Auditor that the Chesapeake Police Department would be immediately contacted, and the administrative investigation would cease to allow the criminal investigation to be conducted.</p> <p>The CCC reported (8) allegations of sexual abuse and sexual harassment were received during the previous 12 months that had occurred at CCC. The Auditor reviewed all the investigative records and found there were (2) unsubstantiated, (5) unfounded, (1) substantiated. One of the allegations was referred for criminal investigation and the staff member's employment was terminated.</p> <p>The Auditor concluded the CCC is appropriately referring criminal allegations of sexual abuse and sexual harassment to the Chesapeake Police Department and that the CCC has the legal authority to conduct such referrals. The Auditor observed documentation that verified the facility is investigating all allegations of sexual abuse and sexual harassment and there is not a Department of Justice component responsible for conducting administrative or criminal investigations at the facility. Review of policy, investigations as well as interviews with the Facility Administrator and investigators support that any suspicion or knowledge of sexual abuse, sexual harassment, neglect, or retaliation will be reported.</p> <p>Conclusion:</p> <p>After reviewing agency policies, procedures, agency website, investigative reports and interviewing staff and inmates, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Lesson Plans</li> <li>3. Training Records</li> <li>4. Training Acknowledgement Forms</li> <li>5. Interviews with Staff</li> <li>6. Interviews with Inmates</li> </ol>

	<p>7. Observations</p> <p>The CCC policy is written in accordance with this standard and includes all required topics and elements. CCC policy requires that all employees, contractors, volunteers, and civilian staff members who have contact with inmates receive training relevant to sexual abuse and harassment. According to their policy, mental health and medical personnel receive specialized training that is tailored to both male and female inmates. The facility provides PREA training annually to each employee to ensure they remain current on the policies and procedures regarding sexual abuse and harassment. The training for current employees is self-paced computer courses and annual in-house classroom attendance. Each employee must complete all PREA training and pass a multiple question test which is documented electronically. Staff who complete classroom training are required to sign the "Acknowledgement of Preventing Sexual Abuse and Sexual Harassment" form.</p> <p>The CCC policy states that all employees who regularly enter the facility will be trained in accordance with the agency's prevention, detection, response, reporting, investigation, and sanctions related to sexual assault/abuse/misconduct/harassment policies and procedures. Training is required and provided by the training academy staff during new employee orientation. Policy states employees are responsible for understanding and preventing sexual abusive behavior through training, awareness of environment, detection of incidents of sexual abuse, behavior that may lead to abuse, and being responsive to inmate reporting.</p> <p>The auditor reviewed training logs for all employees who had received training for the current year with no deficiencies noted. Newly hired staff are given PREA training during their orientation before assuming work assignments. They are required to sign a verification form acknowledging they have received the employment information. Interviews with the PREA Coordinator and training staff confirmed that a employee is not permitted to have contact with inmates prior to receiving the PREA training during orientation.</p> <p>Conclusion:</p> <p>The Auditor reviewed agency policies, procedures, lesson plans, training records, acknowledgement forms, interviewed staff and inmates, made observations, and determined the facility exceeds the requirements of this standard.</p>
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<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Materials, Interviews, Policies and Other Evidence Reviewed:

1. Policy 1.2.35 Prison Rape Elimination Act of 2003
2. PREA Training for Contractors
3. PREA Information Materials Acknowledgement Form
4. Training Records
5. Interviews with Contractors

The CCC policy is written in accordance with the standard and includes all PREA related topics and elements that require all staff receive training regarding PREA. This training is to be completed in person prior to contact with any inmates and is tailored to both male and female inmates. The facility provides PREA training annually to each contract employee to ensure they remain current on the CCC policies and procedures regarding sexual abuse and harassment.

The CCC's policy requires all contractors and volunteers who have contact with inmates receive training relevant to their responsibility to prevent, detect, monitor, report allegations, and incidents of sexual abuse/sexual harassment of inmates. Policy states the level and type of training provided is based on the services and amount of contact they have with inmates. Volunteers and contractors who have contact with inmates are trained on the agency's zero-tolerance regarding sexual abuse and sexual harassment and how to report such incidents. Volunteers and contractors are required to sign the (PREA Information Materials Acknowledgement) form prior to receiving their clearance to enter the facility.

The Auditor reviewed the training curriculum and verified it included all information required by the standard. The Auditor reviewed the training rosters and random training files, to verify contracted employees are receiving the mandated PREA training. During the document review, the auditor was able to verify that the contractors had signed the Acknowledgement form confirming they had received and understood the PREA training. The auditor reviewed the files of newly hired contract employees and verified that they had signed the training form and that it was retained in their files.

The contract staff interviewed were knowledgeable regarding the PREA information they had received and appear to understand their responsibilities regarding the standards. CCC is providing training in accordance with the standard and documentation is maintained accordingly. The Auditor concluded the facility is appropriately training volunteers and contractors and the training curriculum is appropriate and the facility meets the requirements of the standard. The facility maintains documentation that volunteers and contractors have received training.

**Conclusion:**

The Auditor reviewed the agency's policies, procedures, training curriculum, training records, and interviewed contractors. The Auditor determined the facility meets the requirements of this standard.

<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1-2-35 Prison Rape Elimination Act of 2003</li> <li>2. Preventing Sexual Abuse and Sexual Harassment</li> <li>3. Inmate Training</li> <li>4. Inmate Handbook</li> <li>5. Acknowledgement of Preventing Sexual Assault and Sexual Harassment Form</li> <li>6. Interviews with Staff</li> <li>7. Interviews with Inmates</li> </ol> <p>The CCC policy is written in accordance with this standard and states inmates receive training regarding the facility's zero tolerance policy. This information, inmate handbook, and informal posters, provide inmates with information regarding sexual abuse and assault, the Agency's Zero Tolerance policy and how to report incidents of sexual abuse or harassment. The Auditor observed PREA informational posters in inmate housing areas, intake area, and medical. The inmate handbook is available and provided to inmates in English and Spanish.</p> <p>The auditor reviewed the Intake process during the site review and observed PREA signage with a reporting number and notification of the agency's zero tolerance policy. During interviews with intake staff, the auditor confirmed that the agency's Zero Tolerance policy regarding sexual abuse and harassment is provided by the classification officer whom issues documents and conducts PREA orientation class. Policy requires the inmate acknowledge receiving the "Preventing Sexual Abuse and Sexual Assault" training by signing the "Acknowledgement of Preventing Sexual Abuse and Sexual Assault Training" form. Inmates transferred from another facility will be offered comprehensive PREA training within 30 days of intake.</p> <p>The auditor reviewed a sampling of random inmate files which contained documentation of the initial inmate PREA orientation at the time of admission as well as the comprehensive education provided. Inmates at CCC have received PREA training and interviews indicate that the majority remember receiving information upon arrival. They indicated they are aware of PREA information availability and how to report.</p> <p>As required by the standard, policy provides for education in formats accessible to all inmates. As indicated in the policy, any language barrier or special needs would be handled in coordination with the PREA Coordinator on a case-by-case basis. There have been no instances to accommodate special needs prisoners during this audit period.</p> <p>Conclusion:</p>



	The Auditor reviewed the agency's policies, procedures, Inmate Handbook, Inmate training, acknowledgement form, interviewed staff and inmates. The Auditor determined the facility meets the requirements of this standard.
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<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.1.07 Special Investigations/Internal Affairs</li> <li>2. CPD Memorandum of Understanding</li> <li>3. Training Records</li> <li>4. Investigator interviews</li> </ol> <p>The CCC PREA policy requires that when investigating allegations of sexual abuse, investigators will be utilized that have received special training in sexual abuse investigations pursuant to PREA 115.34. The agency's Special Investigations/Internal Affairs policy requires special training for staff who conduct sexual abuse investigations.</p> <p>The Auditor verified specialized training for investigators who conduct the investigations. The specialized training included Miranda and Garrity, evidence collection in a correctional setting, and required evidentiary standards protocol for administrative findings. An interview was conducted with the CCC investigator who was knowledgeable in the training received and was able to articulate the proper protocol for conducting investigations. Facility supervisors conduct administrative investigations of sexual abuse and sexual harassment, and the Chesapeake Police Department conducts criminal investigations of sexual abuse at the facility. The CCC maintains an MOU with the Chesapeake Police Department to conduct the investigations and the MOU requires the Chesapeake Police Department Investigators receive specialized training to conduct investigations of sexual abuse in confinement settings.</p> <p>The Auditor conducted a formal interview with a facility investigator who stated each agency supervisor is required to obtain the specialized training certification which is maintained by the National Institute of Corrections (NIC). The training is an online based training titled, "PREA: Investigating Sexual Abuse in a Confinement Setting." Several facility supervisors have attended the National Institute of Corrections', "PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations" course.</p>

	<p>Conclusion:</p> <p>The Auditor concluded the facility has provided appropriate training to its supervisors that conduct sexual abuse investigations. The Auditor conducted a review of policies, procedures, training records, curriculum, MOU, interviewed investigators and determined the facility meets the requirements of this standard.</p>
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<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 2.1.31 Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, and Sexual Misconduct</li> <li>2. PowerPoint training</li> <li>3. Training Records</li> <li>4. Interviews with Medical &amp; Mental Health staff</li> </ol> <p>Medical and mental health services at the CCC are provided by Wellpath Care corporation. Welpath staff are required to complete specialized medical training referencing PREA policy offered by their department and the facility. Review of training records reveal each medical and mental health staff member had completed the specialized training offered to CCC employees during their initial orientation and prior to performing services in the facility.</p> <p>CCC policy requires that all staff members receive PREA training in accordance with standard 115.31 and all full-time and part-time medical and mental health staff who work regularly in the facility, receive specialized training dealing with victims of sexual abuse. All medical and mental health practitioners in the facility are required to receive the training mandated for the CCC staff under PREA standard 115.31 or training mandated for contractors and volunteers under PREA standard 115.32, contingent upon the medical staff position at the facility.</p> <p>CCC policy require that all part- time and full-time mental health and medical staff members receive additional specialized training on how to detect and assess signs of sexual abuse and harassment, preserve physical evidence, respond effectively to victims of sexual abuse or harassment, and how to report. The auditor verified that medical and mental health staff received the specialized training through review of training logs provided by the training department. The Auditor cross-referenced the roster of mental health and medical personnel and verified that all current employees had received the required training. The facility maintains documentation that medical and mental health practitioners have received the specialized medical training and forensic exams are not performed at CCC therefore medical staff are not required to</p>

	<p>receive the specialized training.</p> <p>Conclusion:</p> <p>The Auditor conducted a review of agency policies, procedures, training curriculum, training records, interviewed medical staff, and determined the facility meets the requirements of this standard.</p>
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<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 2.6.10 Medical Screening and Access to Medical Service</li> <li>2. Policy 2.1.31 Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, Sexual Misconduct</li> <li>3. Activity Log</li> <li>4. Inmate Records</li> <li>5. Interviews with Staff and Inmates</li> <li>6. Booking Questionnaire</li> <li>7. 30-day Reassessment</li> <li>8. Screening Instrument</li> </ol> <p>CCC policy states all inmates shall be assessed upon their admission to the facility and reassessed no later than 30 days after admission to the facility. The policy is written in accordance with the standard and includes all the required elements. Interviews with the medical staff and intake staff verified that within 72 hours of admissions, all inmates are screened for risk sexual abuse victimization and the potential for predatory behavior. Interviews with inmates confirmed they were asked the risk screening questions during the intake process. Inmates may not be disciplined for refusing to answer or for not disclosing complete information in response to questions asked.</p> <p>The Risk screenings are completed by medical staff at the time of the health assessment. The screenings are completed in CorEMR, which is the medical system utilized by medical staff only. This screening is also used by medical staff to assist in recommendations for housing decisions and referrals. Medical staff conduct a PREA screening as part of the intake process and according to WellPath medical protocol. The auditor reviewed this information and verified it is maintained electronically with limited access. Appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard have been implemented to</p>

	<p>ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.</p> <p>CCC policy states the initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, when assessing the risk of inmates being potential abusers. The auditor reviewed the objective screening instrument and verified that the elements required are present on the screening instrument and completed forms were documented in the inmate files.</p> <p>The PREA Compliance Manager stated an assessment is conducted with inmates within 72 hours of arriving at the facility and an reassessment is made after receiving a request, referral or any additional information that influences an inmate's risk level. The PREA Coordinator confirmed that 30-day reassessments are being completed on all inmates by the Classification officers. The reassessments are documented on the "Housing Unit Victimization and Abusiveness Risk Re-assessment" forms. The auditor reviewed facility logs of 30-day reassessments to determine they had been completed.</p> <p>Conclusion:</p> <p>The Auditor reviewed the agency's policies, procedures, Booking Questionnaire, initial screening forms, 30-day reassessments, activity Log, classification records and interviewed staff and inmates. The auditor determined the facility meets the requirements of this standard.</p>
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<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Policy 2.6.10 Medical Screening and Access to Medical Services</li> <li>3. Policy 2.1.35 Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, and Sexual Misconduct</li> <li>4. Policy 2-5-02 Housing, Viewing, and Searching of Transgender/Intersex Inmates</li> <li>5. Intake Questionnaire</li> <li>6. Inmate Records</li> <li>7. Interviews with Staff</li> <li>8. Interviews with Inmates</li> <li>9. Observations</li> </ol>

The CCC policy requires that screening information from the PREA risk assessment is used in making housing, bed work, education, and programming assignments. Both medical staff and intake officers are required to complete a risk assessment screening upon the inmate being processed into the facility and medical staff use this information to make recommendations on housing, assignments, programs, and referrals. Interviews with Classification staff confirmed that the results of the risk assessment and initial interview with the inmate is used to determine classification decisions and make individualized determinations for each inmate.

CCC policy states that the agency will consider unit assignments for transgender or intersex inmates on a case-by-case basis to ensure the health and safety of the inmate and prevent any potential management or security problems. The policy requires that a transgender or intersex inmate's own view about their safety shall be given serious consideration and that all transgender or intersex inmates are given the opportunity to shower separately from other inmates. The Auditor toured inmate housing units and confirmed that housing unit staff would allow transgender and Intersex inmates to shower separately from other inmates.

The CCC policy states that LGBTQI inmates will not be placed in a dedicated facility, unit, or wing solely based on identification or status, unless the placement is established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting the inmates. Staff are aware of their responsibilities should they receive a transgender inmate regarding this standard. Interviews with facility staff indicate that placement of any transgender or intersex inmates would be made on a case-by-case basis. CCC policy stipulates that placement and programming assignments for transgender inmates will be reassessed at least twice a year to review any threats to safety and views with respect to his or her safety will be given serious consideration. LGBTQI inmates are not placed in dedicated housing areas and interviews with staff confirm that CCC does not use dedicated housing as a means of separation.

At the time of the Audit the Chesapeake Correctional Center was not under a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender or intersex inmates. The Auditor concluded staff are making individualized determinations when assigning inmate's housing, bed, work, and programming assignments. The facility has appropriate policies, procedures, and practices in place to protect vulnerable inmates from those identified as potential sexual abusers.

**Conclusion:**

The Auditor conducted a thorough review of policies, procedures, classification records, Intake assessment, made observations, interviewed staff and inmates. The Auditor determined the facility meets the requirements of this standard.

115.43	<b>Protective Custody</b>
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 342 1117 376">Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol data-bbox="320 443 839 689" style="list-style-type: none"> <li>1. Policy 2.1.31 Protective Custody</li> <li>2. Inmate Records</li> <li>3. Interviews with Staff</li> <li>4. Interviews with Inmates</li> <li>5. Observations</li> <li>6. Unit Logs</li> </ol> <p data-bbox="256 723 1445 1014">CCC policy states that the facility will not place inmates who are at high risk for sexual victimization in restrictive housing unless all alternatives have been considered and are not available. CCC policies are written in accordance with the standard and cover all mandated stipulations. CCC's completed PAQ indicates there have not been any instances where inmates at risk for sexual victimization were placed in restrictive housing for the purpose of separating them from potential abusers.</p> <p data-bbox="256 1048 1453 1249">Interviewed staff verified that any inmate identified as high risk would be moved to another housing location and not placed in segregation unless the inmate requested it. During the interview with the PREA Coordinator it was confirmed that no inmates during this audit period have been placed in restrictive housing involuntarily to separate them from potential abusers.</p> <p data-bbox="256 1283 1481 1865">The CCC policy states that if inmates were placed in restrictive housing for involuntary protective purposes, they would be permitted programs, privileges, and any restrictions would be limited. The policy states that such an involuntary housing assignment would not normally exceed 30 days and such a placement would be documented to include the justification for such placement and why no alternative could be arranged. According to the policy, if an inmate is confined involuntarily under these circumstances, the facility shall review the continuing need at least every 30 days. Classification staff are required to conduct a review every 30 days to determine whether there is a continuing need for separation from the general population. Policy requires a personal interview and medical evaluation is conducted when an inmate remains in administrative segregation or disciplinary detention beyond 15 days and every 15 days thereafter. Staff interviewed are aware of their responsibilities regarding this standard, including the need for a review every 30 days.</p> <p data-bbox="256 1899 1445 2022">The facility has appropriate procedures in place to ensure inmates identified at high risk of sexual victimization have access to work, programming, and other privileges afforded to the general population when housed in involuntary protective custody.</p>

	<p>Conclusion:</p> <p>The Auditor reviewed the agency's policies, procedures, housing records, classification records, interviewed staff and inmates, made observations and determined the facility meets the requirements of this standard.</p>
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<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Policy 1.2.13 Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, and Sexual Misconduct</li> <li>3. Inmate Handbook</li> <li>4. Inmate Education Materials</li> <li>5. Zero-Tolerance Poster</li> <li>6. Staff Training Materials</li> <li>7. Cooperative Agreement with YWCA</li> <li>8. Investigative Records</li> <li>9. Interviews Staff and Inmates</li> </ol> <p>CCC policy states there must be at least one way for inmates to report abuse or harassment to either a public entity, private entity, office that is not part of the agency, who can immediately forward inmate reports of sexual abuse or sexual harassment to agency officials and allow the inmate to remain anonymous if requested. The CCC provides multiple internal ways for inmates to report sexual abuse or sexual harassment, retaliation by other inmates or staff reporting sexual abuse and sexual harassment. It also provides ways to report staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p>The auditor reviewed the inmate handbook and found that inmates are informed that they may report instances of abuse or harassment by means of staff members, verbally and in writing, inmate telephone system, and electronically. There are multiple internal ways for inmates to privately report PREA related incidents, including verbally to any staff member, a written note submitted to staff, anonymous reports, and third-party reports. They also can report through the iPads and kiosks available in all inmate housing units. CCC policy requires that staff accept reports of sexual abuse or harassment both verbally and in writing and are required to respond immediately and document as soon as feasible.</p>

At the time of the on-site visit, there were no inmates detained solely for civil immigration purposes. The facility reports they have not had any inmates in that status during this audit period. CCC policy states that if the facility receives an inmate detained solely for civil immigration, staff will provide information on how to contact the relevant Consultant and officials at the Department of Homeland Security.

CCC policy provides a requirement that inmates have the option of reporting incidents of sexual abuse to a public or private entity that is not part of the agency. Inmates also can report to outside entities by means of written request or telephonically to the sexual abuse hotline at 757-226-9922 or YWCA . This information is provided in the inmate handbook and electronically.

Conclusion:

The Auditor reviewed the agency's policies, procedures, Inmate Handbook, Inmate education materials, staff training materials, Zero-Tolerance Poster, MOUs, investigative records, training records, and determined the facility meets the requirements of this standard.



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<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 2.1.31 Preventing Sexual Abuse</li> <li>2. Inmate Handbook</li> <li>3. Staff Interviews</li> <li>4. Inmate Interviews</li> </ol> <p>The Chesapeake Correctional Center does not have administrative procedures in place to accept grievances for sexual abuse or sexual harassment. Therefore, the facility is considered exempt under this standard.</p> <p>Conclusion:</p> <p>The Auditor has determined that CCC is exempt from this standard and meets the requirement of the standard.</p>

<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policy and other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 2.5.02 Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, and Sexual Misconduct</li> <li>2. Preventing Sexual Abuse and Sexual Harassment</li> <li>3. Inmate Handbook</li> <li>4. Zero Tolerance Poster</li> <li>5. Inmate Telephone ID Number Release Form</li> <li>6. Cooperative Agreement with YWCA</li> <li>7. Staff interviews</li> <li>8. Interviews with Inmates</li> </ol> <p>CCC has a policy in place that states they must offer and provide inmates with access to outside victim advocates for emotional supportive services related to sexual abuse.</p>

	<p>Policy stipulates inmates may write the PREA Compliance Manager or Mental Health staff for access to these services and communications between inmates and the organizations are conducted in as confidential manner as possible. The CCC policy states the facility shall inform inmates prior to giving them access, of the extent to which such communications will be monitored. They will also communicate the extent in which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. CCC policy is written in accordance with the PREA standard and it states the facility will provide inmates with access to local, state, or national victim advocacy and rape crisis organizations with a toll-free number. The CCC informs inmates of the degree to which these communications will be monitored prior to affording them access. Inmates are provided information about the services during intake and interviews conducted by the Auditor confirm they are aware of the services available to them.</p> <p>The auditor reviewed the CCC inmate handbook which included information regarding the availability of outside confidential support services for victims of sexual abuse and harassment. The auditor observed posters with information available for third-party reporting. CCC policy requires that inmates and staff are allowed to report sexual abuse or harassment confidentially and these services are provided in multiple ways. Policy requires medical and mental health personnel to inform inmates of their limits of confidentiality when reporting. Interviews conducted with medical and mental health staff confirmed their understanding of obligation relevant to confidentiality limits.</p> <p>The facility provides emotional support services for sexual abuse victims through a written agreement with the YWCA. Contact information with the organization is provided to each inmate during Intake through the PREA education material and the Inmate Handbook. The Auditor tested the inmate telephone system and the PREA Hotline for serviceability. Facility staff advised that calls to the YWCA are not recorded or monitored by the facility.</p> <p>Conclusion:</p> <p>The Auditor reviewed the agency's policies, procedures, Cooperative Agreement, Inmate Handbook, inmate training, Informational posters, telephone form, interviewed staff and inmates. The Auditor determine the facility meets the requirements of this standard.</p>
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<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Materials, Interviews, Policies and Other Evidence Reviewed:

	<ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Agency Website</li> <li>3. Investigative Reports</li> <li>4. Zero-Tolerance Poster</li> <li>5. Inmate Handbook</li> <li>6. Staff Training Curriculum</li> <li>7. Interviews with Staff</li> <li>8. Interviews with Contractors</li> <li>9. Interviews with Inmates</li> </ol> <p>CCC policy is written in accordance with the PREA standards and states that all third-party reports will be accepted and investigated. The CCC publicly provides through their website, a method for the receipt of third-party reports of sexual abuse or harassment. The CCC allows third parties, including current inmates, staff members, family members, attorneys, and outside advocates to assist inmates in filing requests related to allegations of sexual abuse. The Auditor reviewed the CCC website that contains a link to the PREA information which explains PREA and the facility's responsibility for criminal and administrative investigations.</p> <p>Staff interviews reveal they are aware of their obligation to accept and immediately act on any third-party reports received. Staff indicate they will accept a third-party report on behalf of an inmate from a family member, friend or another inmate. Staff stated if they received information, they would document the information and inform their supervisor.</p> <p>Inmates are provided this information during Intake and inmate interviews indicate that they are aware that family or friends can call or write to report an incident of sexual abuse on their behalf. Inmates interviewed stated they felt that staff would respond to any reports received. The inmates feel that the staff take PREA and their safety seriously. The Auditor observed the PREA hotline number on the Zero-Tolerance poster and in the inmate educational information packet. The public is informed on how to report through the facility's website via the link on how to make third-party reports on behalf of inmates. The CCC has not received any third-party reports of sexual assault or harassment during this reporting period.</p> <p>Conclusion:</p> <p>The Auditor reviewed the agency's policies, procedures, website, investigative reports, training and education documents, Inmate Handbook, Informational posters, conducted interviews with staff, contractors and inmates. The Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard

## Auditor Discussion

### Materials, Interviews, Policies and Other Evidence Reviewed:

1. Policy 1.2.35 Prison Rape Elimination Act of 2003
2. Investigative Records
3. Training Materials
4. Interviews with Medical Practitioners
5. Interviews with Mental Health Practitioners
6. Staff Interviews

CCC policy is written in accordance with the standard and requires all staff, contractors, and volunteers to immediately report to a supervisor, any knowledge, suspicion or information related to sexual abuse or harassment. During the site review, staff interviewed confirmed they were required by policy to report any instances or suspicions of sexual abuse or harassment. The Auditor interviewed questioned contract staff referencing their responsibility to report and they confirmed they would report any instance of sexual abuse or harassment as soon as they were made aware of the incident. Interviews with staff indicated they are knowledgeable of their duties and responsibilities to report PREA related information, including anonymous and third-party allegation reports. Interviewed staff stated they were obligated to report any allegations or suspicions without relevance of who it involved. Facility staff understood their responsibility to report any information immediately and document in a written report.

CCC policy requires confidentiality of all information relevant to sexual abuse or harassment beyond what is required to be shared as a part of the reporting process, treatment, or investigation. Staff confirmed during interviews the requirement to maintain confidentiality and the need to keep the information limited to those that need to know in to preserve the integrity of the investigation. All interviewed staff stated that all information and details related to either inmate allegations or staff allegations should remain confidential. When asked who they report or discuss details of a sexual abuse or sexual harassment allegations with, staff informed the Auditor they only discuss details with supervisors and investigators and would not discuss it amongst other co-workers. The PREA Coordinator and Accreditation Manager verified that all investigative files are kept in locked cabinets and on secured computer servers that had limited access to specific staff.

CCC policy requires that all medical and mental health personnel explain the mandatory reporting requirements and limits of confidentiality to victims of sexual abuse. Interviews with medical staff indicate they are aware of their mandatory reporting requirements and comply with the mandate to disclose the limits of their confidentiality to inmates. Medical staff are aware of their responsibilities to report information, knowledge, or suspicions of sexual abuse, sexual harassment, retaliation, staff neglect or violations of responsibilities, which may have contributed to an incident.

	<p>Interviews with the PREA Coordinator and random staff verified that the agency reports all allegations of sexual abuse or harassment received and information received from a third party is referred for investigation in a timely manner. The staff reporting the incident and shift supervisor create a report that is forwarded to the PREA Coordinator for review and further action. The Auditor conducted a formal interview with a facility investigator who indicated that all allegations are immediately reported and investigated. The Auditor reviewed the investigative files and determined that they were promptly investigated.</p> <p>At the time of the audit there were no juvenile inmates housed in the facility and CCC does not house youthful offenders. The Auditor reviewed the previous 12 months of population reports and discovered no evidence a juvenile inmate being housed during this audit period. If an inmate is below the age of 18, he/she is immediately processed and transported to the Hampton Roads Regional Jail. While processing a juvenile inmate, the facility is placed on lockdown status. Medical and mental health practitioners are required to report allegations of victims under the age of 18 to the designated State or local services agencies under applicable mandatory reporting laws and to the local Department of Social Services.</p> <p>The Auditor concluded staff and contractors are aware of the requirement to report any knowledge, suspicion, or information related to sexual abuse or sexual harassment. Staff understand the requirement to maintain confidentiality. Interviews with medical and mental health practitioners reveal they understand the requirements for reporting sexual abuse which occurred in the community, in a confinement setting, and those of inmates under the age of 18.</p> <p>Conclusion:</p> <p>The Auditor reviewed agency policies, procedures, investigative reports, training materials, interviewed staff and inmates. The Auditor determined the facility meets the requirements of this standard.</p>
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115.62	Agency protection duties
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Housing Reports</li> <li>3. Investigative Records</li> <li>4. Classification Records</li> <li>5. Interviews with Staff</li> <li>6. Interviews with Inmates</li> </ol>

## 7. Observations

Chesapeake Correctional Center policy is written in compliance with the PREA standard which requires that whenever there is a report submitted referencing an incident of sexual abuse or harassment, the victim should be immediately protected. CCC policies require that when staff learn an inmate is subject to substantial risk of imminent sexual abuse, the facility shall take immediate action to protect the inmate. Staff interviewed at CCC were knowledgeable of their duties and responsibilities if they were made aware of an inmate being subject to substantial risk. Staff were able to articulate the steps they would take to protect the inmate, including separating the inmates and alerting appropriate staff of the situation immediately.

All staff were able to answer questions correctly regarding what immediate action they would take if they learned an inmate was at imminent risk of sexual abuse. Higher level staff interviewed by the Auditor were knowledgeable of the options they have available to protect inmates if these circumstances were to arise at their facility. These options include relocating the inmate to a different housing unit at the facility or transferring the inmate to another facility. These situations would be determined on a case-by-case basis and with the best interest of the inmate in mind.

The facility requires Medical and Mental Health Professionals to immediately consult with the Facility Administrator or designee and recommend housing interventions or other immediate action to protect an inmate when it is determined the inmate is subject to a substantial risk. If medical staff determine during a assessment that an inmate is at risk of imminent sexual abuse or is considered at risk sexual victimization, they will work closely with the Chief of Detention and Unit Team to provide alternative housing placement. CCC staff reported there have been no determinations made at the facility that an inmate was at substantial risk of imminent sexual abuse. The Auditor randomly reviewed files and interviewed numerous facility staff in reference to their protective custody protocol. The Auditor was advised there were no inmates at substantial risk of sexual abuse or harassment in the previous 12 months.

### Conclusion:

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

<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Facility Notifications</li> <li>3. Interviews with Staff</li> </ol> <p>The CCC policy is written in accordance with the standard and requires that if the Facility Administrator or his/her designee receives an allegation regarding an incident of sexual abuse that occurred at another facility, they must make notification to the institution alleged within 72 hours and document the notification. During this review period, the facility reported receiving no notifications from an inmate alleging sexual abuse while incarcerated at another facility. According to interviews with the Chief of Detention and PREA Coordinator, they stated they would immediately report such an allegation they would make the required notifications and document accordingly. They confirmed their understanding of their affirmative requirement to report allegations in accordance with the standard.</p> <p>CCC requires that if the Chief of Detention or designee receives notice that a previously incarcerated inmate makes an allegation of sexual abuse had occurred at CCC, the allegation would be investigated in accordance with the standard. The CCC reported receiving no notifications in the past 12 months from another facility that one of their former inmates alleged being sexually abused while incarcerated at CCC. Interviews with the Chief of Detention and PREA Coordinator confirm the staff are aware of their responsibility to fully investigate allegations received from other facilities. staff interviewed have complete understanding of their duties to immediately report any allegations of sexual abuse or harassment, which increases the likelihood that abuse will be detected, reported, and investigated.</p> <p>Conclusion:</p> <p>The Auditor reviewed the agency's policies, procedures and determined the facility meets the requirements of this standard.</p>
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<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Policy 2.5.02 Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, Sexual Misconduct</li> <li>3. Investigative Files</li> <li>4. Training Records</li> </ol>

5. Coordinated Response Plan
6. Interviews with Staff
7. Interviews with Contractors

The CCC policy is written in accordance with the PREA standard and describes actions staff should take in the event of learning an inmate has been sexually assaulted. Policy requires that when an inmate reports an incident of sexual abuse, the responding staff member should separate the alleged victim and alleged abuser, preserve evidence, advise the victim not to take any actions that would destroy any evidence, and take action to prevent the alleged abuser from destroying evidence.

There have not been any instances of reported sexual assault during this review period that required a first responder to preserve or collect physical evidence. All allegations for the previous 12 months were sexual harassment allegations and did not require evidence collection or medical treatment. There were no inmates present during the on-site portion of the audit who had reported sexual abuse.

The Auditor interviewed security officers that are first responders. They explained the steps they would take following an alleged sexual abuse if reported to them. The staff were knowledgeable and communicated the response protocol they would utilize during an incident which included separating the alleged perpetrator and victim, securing the scene, preserving potential evidence, and reporting methods. Staff stated the scene would be preserved and remain secured until the investigator arrived to investigate the incident. The PREA Coordinator and an Investigator stated that once the initial steps were complete and the scene was secure, the Chesapeake Police Department investigator would be notified, depending on the nature of the investigation.

The Auditor conducted interviews with supervisory staff and investigators about the supervisor's response and role following a report of sexual assault. The supervisor stated that they would ensure the alleged victim and alleged abuser were removed from the area and kept separated, the crime scene would be secured, and a staff member posted to ensure no one entered the area where the incident transpired. The alleged victim would be accessed by medical staff for treatment and transported to the ER for a forensic exam if needed. The supervisor stated the investigators would be the only ones allowed in the scene area to process the evidence and to prevent any evidence from the possibility of being destroyed.

CCC Policy requires that if the first responder is not a security staff member, the responder immediately notify a correctional staff member. There were no instances during the audit period where a non-security staff member acted as a first responder to an allegation of sexual abuse. The Auditor interviewed non-security personnel that stated if they were the first at a scene, they would ensure the victim remained with them and they would immediately inform a security officer. They stated they would also request the victim not take actions to destroy evidence.

Medical practitioners at the facility have received specialized training to preserve physical evidence while treating victims of sexual abuse. Nursing staff explained how



	<p>they would attempt to preserve evidence while treating a sexual abuse victim. Medical and mental health practitioners informed they would immediately notify a supervisor if they were the first person to be notified of an alleged sexual abuse. Medical personnel interviewed stated they would first ensure a victim's emergency medical needs are met and request the victim not to use the restroom, shower, or take any other actions which could destroy evidence. Victims would be transported off-site if forensic exams are needed.</p> <p>Conclusion:</p> <p>The Auditor determined both security and non-security personnel are knowledgeable of their duties as first responders during a PREA incident. The Auditor reviewed agency policies, procedures, investigative records, training records, conducted interviews with staff and contractors. The Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Policy 1.2.35.12 Preventing Inmate Sexual Abuse, Harassment, Assault, Sexual Misconduct</li> <li>3. Supervisor PREA Incident Checklist</li> <li>4. Investigative Records</li> <li>5. Interviews with Staff</li> </ol> <p>CCC has a policy that requires the facility to have a Coordinated Response Plan in place to be utilized by specified team members. The CCC developed the plan (Coordinated Response Plan) to assist in facilitating coordinated actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse. The Coordinated Response Plan outlines staff duties in response to a sexual assault incident. The CCC Coordinated Response Plan includes actions required of the following personnel:</p> <ol style="list-style-type: none"> <li>1. Staff, Volunteer, and Contractor Responsibilities</li> <li>2. First Responder (Security/Non-Security)</li> <li>3. Watch Commander</li> <li>4. Medical Response</li> </ol>

	<p>5. Investigator</p> <p>6. Mental Health</p> <p>7. PREA Compliance Manager</p> <p>6. Administrative Response</p> <p>Interviews with multiple staff indicate that they understand their duties in responding to allegations of sexual assault. Staff were knowledgeable of their role and the response actions they should take during an incident of sexual nature. The facility utilizes a (Supervisor PREA Incident Check) form to supplement the agency's policy. Each response action is included on the PREA Incident Check form which requires a date of action, action status, and staff remarks. Various facility staff involved in responding to incidents of sexual abuse are also members of the Incident Review team.</p> <p>There have been zero instances of reported sexual assault at CCC for the previous 12 months. Allegations reported were sexual harassment allegations and did not require evidence collection or medical treatment.</p> <p>The Auditor conducted formal interviews with staff listed in the agency's Coordinated Response Plan and asked questions related to their specific duties in response to a sexual abuse incident. Each person interviewed was knowledgeable regarding their specific duties as required in the CCC Coordinated Response Plan. The Auditor determined the facility has prepared its staff to take appropriate actions in response to sexual abuse incidents. The Auditor determined the facility maintains an appropriate response plan that coordinates the actions of personnel following an incident of sexual abuse and trained its personnel to follow the plan.</p> <p>Conclusion:</p> <p>A review was conducted of the agency's policies, procedures, Coordinated Response Plan, Staff training records, and interviews with staff and inmates. The Auditor determined that CCC meets the requirements of this standard.</p>
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Review:</p> <p>1. Policy - 1.2.35-Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, and Sexual Misconduct</p>

	<ol style="list-style-type: none"> <li>2. PREA Coordinator</li> <li>3. Human Resource Staff</li> <li>4. Virginia Code on Unionization</li> </ol> <p>Virginia Code 40.1-57.2 stipulates, "No state, county, municipal, or like governmental officer, agent or governing body is vested with or possesses any authority to recognize any labor union or other employee association as a bargaining agent of any public officers or employees, or to collectively bargain or enter into any collective bargaining contract with any such union or association or its agents with respect to any matter relating to them or their employment or service."</p> <p>The CCC has not entered into any agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The Auditor reviewed facility records that show the facility ensures personnel who have been alleged to have committed an act of sexual abuse are removed from contact with the alleged inmate victim. The CCC has not entered into an agreement with any agency for collective bargaining.</p> <p>Conclusion:</p> <p>The Auditor concluded the CCC has not entered any collective bargaining that would restrict its ability to remove staff sexual abusers from contact with inmates. The Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Policy 1.2.13 Discrimination, Sexual Abuse and Sexual Harassment</li> <li>3. Policy 1.2.13 Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, and Sexual Misconduct</li> <li>4. Investigative Records</li> <li>5. Interview with Staff and Inmates</li> </ol> <p>The agency's policy includes the requirements of PREA standard 115.66, that ensure inmates and staff are protected from retaliation by staff or other inmates, for reporting an incident. The CCC has designated the Classification Deputy as responsible for monitoring retaliation against inmates or staff. Staff or inmates who report substantiated allegations of sexual abuse or harassment are protected from retaliation for making such reports. CCC policy indicates that the Classification</p>

Deputy is designated as the staff who will be responsible for monitoring retaliation for a minimum period of 90 days. The designated monitor is required to monitor the conduct and treatment of inmates or staff who reported an allegation of sexual abuse or sexual harassment and of inmates who suffered sexual abuse or sexual harassment for a minimum of 90 days. The monitor is required to determine if there are changes that may suggest possible retaliation by inmates or staff and to act promptly to remedy any such retaliation. The retaliation monitor is required to continue monitoring beyond the 90-day period in the event initial monitoring indicates a continuing need.

The Auditor interviewed the staff member responsible for monitoring retaliation. The staff member stated they review disciplinary charges and incident reports, or any other actions related to the inmate which may include documents maintained in an inmate's file and his/her electronic record. The staff member stated the monitoring period would be a minimum of 90 days and in the event the inmate cannot be protected at the facility, staff can and will recommend a transfer. The Auditor inquired as to what protocols are used to protect an inmate who is being retaliated against by a staff member. The Auditor was informed the Chief of Detention would discuss staff assignments with the supervisor to ensure the staff member is not placed in an area where the inmate is housed. The retaliation would be reported through the chain of supervision to ensure the staff member who is retaliating against an inmate is appropriately disciplined.

The PREA Coordinator and Classification Supervisor have the authority to reassign inmates in the facility or to other facilities. They can take other protective measures to ensure inmates were not retaliated against. In addition, the Jail Administrator has the authority to intervene in any way necessary to protect employees from retaliation if they report incidents of sexual abuse or harassment. There have been no reported incidents of sexual abuse/harassment at CCC that would require the staff to invoke any protections from retaliation. In addition, staff interviews confirmed their knowledge of the requirements for protection from retaliation for both inmates and staff members. All staff members interviewed affirmed that they are required to report any incident of retaliation and stated they are aware they could report such incidents anonymously. The agency has prepared checklists that verify compliance with the necessary elements of the standard.

The CCC reported no incidents of retaliation against an inmate during the previous 12 months and there are no inmates currently being monitored for retaliation at the time of the audit. The Auditor reviewed all facility investigative reports from the previous 12-month period and found one determination of substantiated or unsubstantiated decision made within a period that would require staff to currently monitor for acts of retaliation. The inmate was transferred, immediately after the incident and therefore monitoring information was not available.

#### Conclusion:

The Auditor reviewed the agency's policies and procedures, investigative reports, monitoring forms and interviewed staff and inmates. The Auditor determined the facility meets the requirements of this standard.

115.68	Post-allegation protective custody
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 409 1115 443">Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol data-bbox="320 510 820 674" style="list-style-type: none"> <li>1. Policy 2.1.31 Protective Custody</li> <li>2. Classification Records</li> <li>3. Housing Records</li> <li>4. Interviews with Staff</li> </ol> <p data-bbox="256 712 1466 1167">The CCC policy is written in accordance with the PREA standard and requires that the use of segregated housing be subjected to the requirements of PREA standard 115.43. Interviews with staff state they would not place an inmate in segregated housing for reporting sexual abuse or assault unless he or she had requested it or exigent circumstances prevailed. Staff explained that other alternatives are considered and segregation is utilized as last option. The Auditor observed several areas in the facility that sexual abuse victims could be housed to ensure they are protected from abusers without having to place the victim in segregated housing. The auditor toured CCC's restrictive housing areas and was advised by supervisory staff, there were no inmates assigned to restrictive housing because of sexual vulnerability.</p> <p data-bbox="256 1205 1466 1406">The CCC has not had incidents that have required restrictive protective custody during the past 12 months. Interviews with the supervisory staff as well as the Jail Administrator, PREA coordinator and Classification Supervisor, confirmed their knowledge of their responsibility to appropriately adhere to the elements of standard 115.43 (Protective Custody) when there is an allegation of abuse.</p> <p data-bbox="256 1444 1442 1646">During interviews with the Classification Supervisor and the PREA Coordinator, they verified that there have been no instances of inmates being placed in restrictive housing because of sexual victimization or vulnerability. The Auditor reviewed classification and housing records that reveal no inmate was placed in protective custody during the previous 12 months.</p> <p data-bbox="256 1684 421 1718">Conclusion:</p> <p data-bbox="256 1756 1477 2002">The Auditor concluded the facility has a policy that includes the elements of PREA standard 115.43 to ensure inmates receive privileges, programming, education, and work opportunities if placed in Protective Custody. The Auditor reviewed the agency's policies, procedures, classification records, housing records, made observations, and interviewed staff. The Auditor determined the facility meets the requirements of this standard.</p>

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<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.1.07 Special Investigations/Internal Affairs</li> <li>2. Training Records</li> <li>3. Interviews with Staff</li> <li>4. Observations</li> <li>5. Investigative Files</li> </ol> <p>The CCC policy is written in accordance with the PREA standard and requires that the agency conduct administrative and criminal investigations of sexual abuse and harassment. The CCC policy stipulates that they will respond to complaints promptly which may be received internally or externally by a third party. The CCC has all allegations of sexual abuse and sexual harassment, investigated to include third-party and anonymous reports. Administrative investigations include efforts to determine whether staff actions or failure to act, contributed to an act of sexual abuse. Investigative reports are required to include a description of physical evidence, testimonial evidence, the reason behind credibility assessments, and investigative facts and findings. The auditor reviewed investigative reports for one allegation of sexual misconduct during the past 12 months and it contained all required information.</p> <p>During an investigation, at CCC, if it appears the charges are criminal in nature, the investigation will be referred to the CPD investigators. The PREA Coordinator is required to maintain written investigative reports for as long as the alleged abuser is incarcerated or employed at CCC, plus an additional 5 years. The files are maintained by the PREA Manager in a secured cabinet with limited access. Policy prohibits the termination of an investigation if an inmate is released, a staff member is terminated, or staff resigns.</p> <p>CCC investigators are required by policy to cooperate with outside investigators and maintain open lines of communication to remain informed about the progress of a sexual abuse investigation. According to interviews with the PREA Coordinator, if an outside agency were to investigate a sexual abuse case, the departmental investigator serves as a liaison and would keep the Jail Administrator informed of the investigation progress. The auditor reviewed eight training records of staff members who have received specialized training to conduct sexual abuse investigations in confinement facilities and was provided training curricula and training certificates for the designated investigators and verified their completion of the training.</p>

The Auditor conducted a formal interview with one of the facility's designated PREA Investigators who explained their responsibilities. The investigator stated they review criminal histories on all inmates involved in an incident to include, disciplinary history, incident reports, and classification actions. The investigator also reviews video footage if applicable, telephone recordings, staff logs, and any other relevant items which could be considered evidence to support the determination of the investigation. If at any point during the investigation they determine there could be potential criminal charge involved, the investigator would notify the Chief of Detention and have a consultation with the Commonwealth Attorney. The Investigator stated their investigation begins immediately after receiving an allegation notification. If an allegation is reported anonymously, the PREA Coordinator and Investigator both stated the investigation would be handled the same as any other investigation and would continue the investigation even if an inmate is released or a staff member resigns while under investigation.

The CCC had one incident that required investigation during the review period that required referral. A review of the investigative files indicates that the investigators conducted the investigation in accordance with the standard. The reports reflected that the investigator gathered evidence, interviewed witnesses, victims, perpetrators, and conducted the investigation promptly, thoroughly and objectively. No State entity or Department of Justice component has investigated a sexual abuse or sexual harassment at the Chesapeake Correctional Center during the review period.

Conclusion:

The Auditor reviewed facility policy, procedures, investigative records, training records, made observations, interviewed staff and determined the facility meets the requirements of this standard.

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<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.1.07 Special Investigations/Internal Affairs</li> <li>2. Investigative Files</li> <li>3. Interview with Investigator</li> </ol> <p>The facility policy is following the requirements of the standard and imposes no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>A formal interview with both the PREA Coordinator and Investigator confirmed that the staff responsible for administrative adjudication of investigations are aware of the requirements of the evidentiary standard. They communicated what preponderance meant and how they arrived at the basis for a determination. There have been eight allegations of sexual abuse or harassment within the last 12 months for which the auditor reviewed the investigative files. A review of the files indicates that the investigations are being conducted in accordance with the standard. Investigator training programs provide in-depth clarification of this standard. A review of investigative reports revealed Investigators are using preponderance to support their determination of the outcome and the Auditor was able to determine that Investigators understand preponderance as the basis for determining investigative outcomes.</p> <p>Conclusion:</p> <p>The Auditor was able to determine facility Investigators utilize a preponderance as the basis to substantiate sexual abuse and sexual harassment allegations. The Auditor reviewed the agency's policy; procedures, investigative reports, interviewed staff and determined the facility meets the requirements of this standard.</p>

<b>115.73</b>	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interview, Policy and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. CCC Completed PAQ</li> <li>2. Review of investigative files</li> <li>3. Inmate Notifications</li> <li>4. PREA Coordinator interview</li> <li>5. Investigator interview</li> </ol> <p>The CCC policy is written in accordance with the PREA standard and requires an inmate to be notified when a sexual abuse allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. The auditor conducted interviews with the PREA Coordinator and the Investigator, they verified there has been one external investigation in the past 12 months and the facility is responsible for the administrative and criminal investigations initiation.</p> <p>The Auditor reviewed the investigative files for the reported allegations of sexual assault and harassment. The auditor determined notifications to the inmates at the conclusion of the investigation were conducted as required. The PREA Coordinator and Investigator acknowledged that inmates are informed of the determination at the conclusion of the investigation, and they notify the inmate and document the notification. Notifications made by the PREA Compliance Manager to the inmate are provided on a facility letterhead and includes the date, inmate's name, inmate's number, and investigative finding. The notification is signed by the inmate, investigator and the PREA Compliance Manager.</p> <p>Conclusion:</p> <p>The Auditor concluded the Chesapeake Correctional Center informs inmates of investigative determination at the conclusion of an investigation. The Auditor reviewed facility policies, procedures, notifications to inmates and conducted an interview with a Sexual Abuse investigator to determine the facility meets the requirements of this standard.</p>

<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Discrimination, Sexual Abuse and Sexual Harassment</li> <li>2. Interviews with Staff</li> </ol> <p>The CCC PREA and disciplinary policies were reviewed and are following the requirements of the PREA standard. Staff are subject to disciplinary sanctions up to and including termination for violating the sexual abuse or sexual harassment policies. Policy requires that staff found responsible for sexual abuse of an inmate shall be terminated from employment. Employees who are found to have violated jail policy related to sexual abuse and harassment, but not actually engaging in sexual abuse shall be disciplined in a manner proportionate with the nature and circumstances.</p> <p>Interviews with facility staff and administrators verified that a violation of the PREA policy to be of sufficient seriousness, could warrant termination and prosecution in accordance with the law. Staff interviews confirmed staff awareness of the agency Zero-tolerance policy regarding sexual abuse and any such incidents would be investigated and reported to the appropriate agency for prosecution.</p> <p>The Auditor interviewed facility administrative staff regarding the facility's staff disciplinary policy. Management staff stated that a staff member could be terminated for violating the facility's sexual assault and harassment policy and if the conduct is criminal in nature, it will be referred to the Commonwealth Attorney's office for possible prosecution and other licensing agencies would be notified. If an employee under investigation resigns before the investigation is complete or resigns in lieu of termination, that does not terminate the investigation or the possibility of prosecution if the conduct is criminal in nature. The facility would still refer the case to the Commonwealth Attorney's office when a staff member terminates employment that would have otherwise been terminated for committing a criminal act of sexual abuse or sexual harassment.</p> <p>Conclusion:</p> <p>The CCC has a policy to ensure agency personnel who violate sexual abuse or sexual harassment policies are appropriately disciplined and the appropriate agencies are notified. The Auditor conducted a review of the agency's policies, procedures, interviewed staff and determined the facility meets the requirements of this standard.</p>
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<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard

	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Discrimination, Sexual Abuse and Sexual Harassment</li> <li>2. Investigative Files</li> <li>3. Training Curriculum</li> <li>4. Training Records</li> <li>5. Interviews with Staff and Contractors</li> </ol> <p>The CCC PREA and disciplinary policies were reviewed and follow the requirements of the PREA standard. Policy states that contractors and volunteers who violate sexual abuse or sexual harassment policies are prohibited from having contact with inmates and will have their security clearance at CCC revoked and governing licensing agencies would be notified. Contract staff who violate this policy would most likely be terminated by the contract employer and if the conduct of the contractor is criminal in nature, the investigation will be referred to facility investigators and the Commonwealth Attorney's office for possible prosecution. The facility's management team is aware of the requirement to notify relevant licensing bodies following a contractor or volunteer's participation in a criminal act of sexual abuse. There has been one instance where volunteers or contractors have engaged in sexual abuse or harassment in the past 12 months at CCC which required referral.</p> <p>The Auditor interviewed contract staff who verified that they are aware a violation of the PREA policy to be of sufficient seriousness could warrant termination from the facility and possible prosecution in accordance with the law. The contract staff were aware that the agency has a Zero-tolerance policy regarding sexual abuse and any such incidents would be investigated and reported to the appropriate agency for prosecution. The CCC maintains appropriate policies to ensure contractors and volunteers at the Chesapeake Correctional Center are removed from inmate contact after committing an act of sexual abuse or sexual harassment if deemed necessary.</p> <p>Conclusion:</p> <p>The Auditor reviewed the agency's policies, procedures, training documents, investigative record, conducted formal interviews with staff and contractors and determined the facility exceeds in the requirements of this standard.</p>

<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Materials, Interviews, Policies and Other Evidence Reviewed:

1. Policy 2.31.31 Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, and Sexual Misconduct
2. Policy 1.2.35 Prison Rape Elimination Act of 2003
3. Investigative Report
4. Interviews with Staff
5. Investigative Records

The CCC policy states that inmates are not permitted to engage in non-coercive sexual contact and may be disciplined for such behavior. Policy states that staff is prohibited from disciplining an inmate who makes a report of sexual abuse in good faith and based on a reasonable belief the incident occurred even if the investigation does not establish sufficient evidence to substantiate the allegation. CCC prohibits sexual activity between inmates housed at CCC. Inmates found to have participated in sexual activity are disciplined for such activity by the facility and if the sexual activity between inmates is found to be consensual, staff will not consider the sexual activity as an act of sexual abuse.

CCC policy states inmates are subject to formal disciplinary action following an administrative finding that they engaged in inmate-on-inmate sexual abuse. According to CCC completed PAQ, there have been no cases of inmate-on-inmate sexual abuse. Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

CCC policy states that disciplinary action for inmates is proportional to the abuse committed as well as the history of sanctions for similar offenses by other inmates with similar histories. CCC policy requires that staff consider whether an inmate's mental health contributed to their behavior before determining their disciplinary sanctions. The CCC does not always have mental health staff available but has mental health staff on call for emergency needs and can transfer inmates if they need specialized mental health treatment. Any decision to offer counseling or therapy to inmates and the initiation of any counseling or therapy for individuals who have committed sexual offenses, is determined at the discretion of the mental health staff in conjunction with development of a treatment plan for the inmate.

CCC policy prohibits disciplining inmates who make allegations in good faith with a reasonable belief that the conduct occurred. There were no occasions in the past 12 months, where inmates were disciplined for filing a report. The Auditor reviewed investigative files, classification files, inmate records and interviewed staff. There is no evidence to suggest an inmate received a disciplinary charge for making an allegation of sexual abuse or sexual harassment.

The Auditor determined the agency maintains policies that align with PREA standard 115.78 and follows protocol. Facility personnel ensure the policy is applied when choosing whether to discipline an inmate for reporting or participating in an act of sexual abuse.

	<p>Conclusion:</p> <p>The Auditor reviewed the facility's policies, procedures, investigative records, interviewed medical and mental health practitioners to determine the facility meets the requirements of this standard.</p>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 2.6.06 Medical Care Services</li> <li>2. Policy 2.6.12 Mental Health Services</li> <li>3. Inmate Records</li> <li>4. Medical Records</li> <li>5. Interviews with Staff</li> <li>6. Interviews with Inmates</li> </ol> <p>The CCC policy is consistent with the requirements of the PREA standards. The policy requires staff offer a follow-up meeting with medical or mental health staff within 14 days of arrival at the facility for an inmate that reports sexual victimization either in an institutional setting or in the community. It is CCC policy to identify, monitor, and counsel inmates who are at risk of sexual victimization, as well as those who have a history of sexually assaultive behavior.</p> <p>The agency's policy stipulates information related to sexual victimization and abusiveness that occurred in an institutional setting, be strictly limited to medical, mental health, and other staff only as necessary. The protected information will be used to create treatment plans, security and management decisions, housing placement, bed assignments, work assignments, education, and program assignments, or as otherwise required by Federal, State, or local law. Medical and mental health practitioners at the Chesapeake Correctional Center are required to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of 18. CCC does not house youthful offenders under 18 years of age.</p> <p>Review of random inmate files verified that the screenings were being conducted in accordance with the standards and the policy. The Auditor reviewed files of inmates who were identified as needing follow up care. The inmates were offered and received the follow-up care within 14-day period as stated by the standards. Medical staff interviews confirm that if an inmate answers (yes) on the screening questionnaire to previous victimization, it automatically triggers an alert for a referral and the inmate is offered a follow-up meeting to be scheduled. This information is recorded in a</p>

	<p>medical electronic file and each medical staff member has an individual login and password for access to the system.</p> <p>Conclusion:</p> <p>The Auditor reviewed the agency's policies, procedures, inmate medical and classification records, conducted interviews with medical and mental health staff. After a thorough review the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 2.6.10 Emergency Medical Services</li> <li>2. Policy 2.1.31 Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, and Sexual Misconduct</li> <li>3. MOU with YWCA</li> <li>4. Inmate Handbook</li> <li>5. Medical Record</li> <li>6. Investigative Record</li> <li>7. Training Records</li> <li>8. Interviews with Staff</li> <li>9. Interview with SANE</li> <li>10. Interview with Victim Advocate</li> </ol> <p>The CCC policy is written in compliance with the PREA standard and states that all inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Interviews with medical staff, as well as the PREA Coordinator, confirm that victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Wellpath contract medical staff provide coverage 24 hours per day, seven days a week and have a MOU with a local Crisis Center.</p> <p>While there have been no documented incidents of sexual abuse requiring emergency medical or mental health services during the review period, the staff are aware of their responsibilities regarding protection of the victim and evidence in the case of a report of sexual assault. In addition, the contracted medical and mental health staff are available 24 hours per day in the case of emergency or crisis intervention services. For services required outside the scope of their experience, the victim can be treated at the local hospital emergency department.</p>



	<p>CCC policy states that inmate victims of sexual abuse 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. There have been no incidents of sexual assault at the CCC in the last 12 months requiring these services. CCC policy states that forensic examinations will be performed by Sexual Assault Forensic Examiners (SAFE) or Sexual Assault Nurse Examiners (SANE) without a financial cost to the victim.</p> <p>The Auditor conducted a telephone interview with a victim advocate from the YWCA and discussed the responsibility between the organization and the agency. The advocate informed the Auditor the YWCA provides crisis intervention services to inmate victims at the Chesapeake Correctional Center at no charge. The Advocate stated when an inmate request such services the advocate meets the SANE at the facility and provides support to the victim during the forensic examination and if needed, the advocate will continue to provide crisis intervention services beyond the forensic examination.</p> <p>Conclusion:</p> <p>The Auditor reviewed the agency's policies, procedures, medical records, investigative records, Inmate handbook and interviewed staff, SANE, victim advocate and inmates. The Auditor determined the agency meets the requirements of this standard.</p>
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<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 2.6.12 Mental Health Services</li> <li>2. Policy 2.6.10 Emergency Medical Services</li> <li>3. Policy 1.2.35 Preventing Inmate Sexual Abuse, Sexual Harassment, Sexual Assault, and Sexual Misconduct</li> <li>4. Inmate Medical Record</li> <li>5. Interviews with Staff</li> <li>6. Interview with SANE</li> </ol> <p>The CCC policy is written in compliance with the PREA standard and states that the facility 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.</p>

Interviews with medical and mental health staff confirm that these services would be available to inmates who have been victims of sexual abuse and are consistent with the community level of care. There has been one instance of sexual abuse during the review period and the inmate was no longer housed at the facility, therefore the Auditor was unable to review any related documentation regarding follow-up and ongoing medical and mental health care.

CCC policy states that inmate victims of sexual abuse receive timely unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of these actions are determined by medical and mental health practitioner's judgment. Policy requires treatment services to be consistent with the community level of care and provided without financial costs regardless of whether the victim names the aggressor or cooperates with any investigation arising out of the incident. If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual violence is made, first responders will take preliminary steps to protect the victim and shall immediately notify the shift supervisor. Inmates are offered mental health and medical services, forensic and sexual assault exams, to be conducted by a qualified professional.

The Auditor interviewed the mental health practitioner concerning what services are offered to victims of sexual abuse and was informed that counseling sessions, referrals if appropriate, and follow-up services are provided at no cost to the inmate. The mental health practitioner also creates treatment plans and follow-up treatment plans. The Auditor was provided documentation that concluded services offered at CCC are consistent with community level services and verified the services through observations and interviews. The mental health practitioner is clear on their requirement to conduct the evaluation within 60 days of learning of the abuse and stated the assessment would be conducted much sooner.

CCC policy requires that female inmate victims of sexual abuse which occurs while in the facility, will be offered pregnancy tests. Inmate victims who become pregnant while in the facility will receive comprehensive information about all lawful pregnancy-related medical services. Inmate victims of sexual abuse while in the jail will be offered tests for sexually transmitted infections as medically appropriate. CCC policy 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. Interviews with medical staff confirm that these services would be provided to the inmate at no cost and there have not been any incidents of sexual assault at CCC in the last 12 months requiring these services.

Staff interviews confirmed the presence of policies and procedures consistent with the standard and confirmed the medical and mental health are knowledge of the policy and PREA standard. The Auditor conducted formal interviews with medical and mental health practitioners. Mental health practitioners stated they do not stipulate a minimum or maximum number of appointments with victims of sexual abuse. Mental health practitioners stated they meet with victims and abusers if the victim or abuser requests such a meeting or if medically necessary. Treatments and evaluations occur

	<p>as needed or until treatment plans determine a need no longer exists.</p> <p>Conclusion:</p> <p>The Auditor reviewed policies, procedures, medical records, interviewed medical and mental health practitioners to determine the facility meets the requirements of this standard.</p>
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<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Incident Review</li> <li>3. Investigative Record</li> <li>4. Training Records</li> <li>5. Interviews with Staff</li> </ol> <p>CCC has a policy that governs the review of all substantiated or unsubstantiated allegations of sexual abuse. CCC policy 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 review team will consist of upper-level management officials, supervisors, investigators, and medical/mental health personnel. During this review period, the CCC reports there have been one administrative investigations of alleged sexual abuse at the facility and information was confirmed by the PREA Coordinator. There allegation was an allegation of sexual abuse which was referred to the Chesapeake Police department for review.</p> <p>CCC policy states that the review team will consider a need to change policy or practice to prevent, detect, or respond to sexual abuse. The CCC has appointed a team that conducts Incident Reviews at the conclusion of sexual assault investigations as stipulated by the standard. This was confirmed during interviews of the Facility Administrator and PREA coordinator. A written report of the findings is prepared and maintained by the PREA Coordinator. The PCM indicated that the reviews ordinarily take place within 30 days of the conclusion of the investigation but can take place sooner. An interview with a member of the Incident Review team stated that if there was an incident that required a review, all factors would be</p>

	<p>considered and a report of the findings including recommendations for improvement would be completed and submitted to the Chief of Detention for review. The PREA Coordinator stated any recommendations would be implemented or the reasons for not doing so would be documented.</p> <p>The Auditor determined the facility is conducting incident reviews within 30 days of the conclusion of each substantiated and unsubstantiated sexual abuse investigation and the Incident Review Team documents the findings of each incident review.</p> <p>Conclusion:</p> <p>The Auditor reviewed the agency's policies, procedures, Sexual Abuse Incident Review report, training records, investigative record, conducted interviews with staff and determined the facility meets the requirements of this standard.</p>
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<b>115.87</b>	<b>Data collection</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Annual Report</li> <li>3. Agency Website</li> <li>4. Interviews with Staff</li> </ol> <p>The CCC policy is consistent with the requirements of the PREA standard and states that the facility will annually aggregate uniformed data for every allegation of sexual abuse which is necessary to answer all questions from the most recent version of the "Survey of Sexual Violence" conducted by the Department of Justice and complete an annual report based upon the data. The Auditor reviewed the Annual Report available on the facility website, including aggregated sexual abuse data for calendar year 2022.</p> <p>An interview with the PREA Coordinator confirms the facility maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Data from the previous calendar year is supplied to the Department of Justice no later than June 30th of each year, if requested.</p> <p>The facility is collecting and aggregating sexual abuse data on an annual basis as</p>

	<p>required by the standard and the report uses a standardized set of definitions, which are available on the facility website and in the CCC policy. The CCC does not contract with a private facility for the confinement of its inmates.</p> <p>Conclusion:</p> <p>The Auditor observed evidence the facility is collecting and aggregating sexual abuse data annually. The reported data is derived from a standardized set of definitions. The Auditor reviewed the facility's policies, procedures, website, annual report and interviewed staff to determine the facility meets the requirements of this standard.</p>
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<b>115.88</b>	<b>Data review for corrective action</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Annual Report</li> <li>3. Agency Website</li> <li>4. Interviews with Staff</li> </ol> <p>The CC policy mandates that facility collects and aggregate data to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The facility annual report will include a comparison of the current year's data and corrective actions with those from prior years and must provide an assessment of the progress in addressing sexual abuse. The report must be approved by the PREA/ADA Supervisor and Chief of Detention, before being made readily available to the public through the facility public website. Specific material may be redacted from the reports when publication of the material would present a clear and specific threat to the safety and security of a facility or staff. If material is redacted, the report must indicate the nature of the redacted material.</p> <p>The Auditor reviewed the CCC website and verified the agency maintains annual reports that include findings and corrective actions for their facility. The public can access the facility reports through the "Inmates" dropdown tab and then by clicking on the "Prison Rape Elimination Act" link. Each report is accessible through the "PREA Reports Page" link and each annual PREA Report and/or individual facility PREA Audit Report can be reviewed. The facility website includes annual reports published from 2014 through 2022.</p> <p>The Auditor interviewed the PREA Compliance Manager about the annual reporting process and verified that the information for the annual report is derived from</p>

	<p>Investigative Reports, Incident Reviews and other relevant documents included in investigative records from the facility. Corrective actions are implemented at the facility when recommended and any corrective actions taken are documented in the facility annual report.</p> <p>Conclusion:</p> <p>The Auditor observed evidence the facility is collecting and aggregating sexual abuse data annually. The reported data is derived from a standardized set of definitions. The Auditor reviewed the agency's policies, procedures, website, annual report and interviewed staff to determine the facility meets the requirements of this standard.</p>
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<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Policy 1.2.35 Prison Rape Elimination Act of 2003</li> <li>2. Agency Website</li> <li>3. Interviews with Staff</li> </ol> <p>The agency's policy requires sexual abuse data is securely retained. Policy states all aggregated sexual abuse data is readily available to the public annually on the facility website and requires sexual abuse data is maintained for at least 10 years after the date of initial collection, unless Federal, State, or local law requires otherwise. The data is maintained on the facility's secure computer servers and the facility is required to remove all personal identifiers before making sexual abuse data public on its website.</p> <p>Information for the agency's annual report is maintained by the PREA Compliance Manager and PREA Coordinator. The information for the annual report is obtained from investigative files and incident review reports. The Auditor conducted an interview with the facility's PREA Compliance Manager and PREA Coordinator who advised the information is obtained through investigative reports and files. The Auditor was informed that collected data is maintained electronically in a secure computer database and in written form in a locked and limited access secured area. All electronically maintained data has limited restrictive access and is only accessible by a unique username and password by the PREA Coordinator and PREA Compliance Manager.</p> <p>The Auditor reviewed the agency's website which included annual sexual abuse data collection in an annual report published on the agency website and found no personal</p>

	<p>identifiers were included.</p> <p>Conclusion:</p> <p>The Auditor reviewed the facility's policy, procedures, website, annual report, interviewed staff and determined the facility meets the requirements of this standard.</p>
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<b>115.401</b>	<b>Frequency and scope of audits</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Agency Website</li> <li>2. PREA Audit Reports</li> <li>3. Observations</li> <li>4. Interviews</li> </ol> <p>The Auditor received confirmation of PREA Notice postings via email of photos dated six weeks in advance of the on-site visit. The Notices were placed in the inmate housing units, program areas, and work assignment areas. During the Auditor interviews, inmates confirmed their observation of the PREA Notice postings throughout the institution which verified the procedure to submit confidential correspondence to the Auditor. During interviews with mailroom staff, it was documented that inmates are allowed to forward confidential correspondence to the Auditor in the same manner as mail addressed to legal counselor.</p> <p>This is the first year of the fourth audit cycle for CCC and their website identifies the PREA audit report posted for the facility during the past audit cycle. The auditor was provided files prior to the on-site audit for review to support a determination of compliance with PREA standards. During the on-site visit, pre-audit and post audit phases, the auditor received and reviewed sufficient document sampling based on the size of the facility. The documents included, PREA investigative files, staff/ inmate training records, inmate risk screenings, review of housing unit logbooks, program information and other pertinent documentation.</p> <p>The auditor interviewed the required number of staff and inmates based on the PRC recommendation of facility population size and demographics. All individuals interviewed were knowledgeable regarding PREA requirements and protocols. The auditor was given access to all documentation requested and was afforded the opportunity to tour and visit all areas at CCC. Interviews with supervisory staff, non-supervisory staff, upper management staff and inmates, were conducted on-site in an area that ensured privacy.</p> <p>Conclusion:</p>

	The Auditor determined that CCC meets the requirements of this standard.
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<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Agency Website</li> <li>2. Previous PREA Audit Report</li> </ol> <p>The Auditor reviewed the CCC website which included the facility's previous PREA Audit final report. The previous audit was conducted in June 2020. The agency ensures that at the conclusion of audit, the Auditor's final report is published on the agency's website and is made readily available to the public. Additionally, PREA audits conducted in 2017 &amp; 2020 were published and posted on the facility website (<a href="https://www.chesapeakesheriff.com">https://www.chesapeakesheriff.com</a>).</p> <p>Conclusion:</p> <p>The Auditor determined the facility meets the requirements of this standard.</p>



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

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

Has the agency employed or designated an agency-wide PREA Coordinator?	yes
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
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**115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	na
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Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	na
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**115.12 (a) Contracting with other entities for the confinement of inmates**

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

Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na
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	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

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

	facility does not have female inmates.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

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

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



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

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

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

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

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

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

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

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



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

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

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

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

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

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

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

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



	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	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.)	na
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	na
	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.)	na
	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.)	na
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	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.).	na
	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.)	na
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	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.)	na
	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.)	na
	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.)	na
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	na
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	yes

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

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

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

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

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

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



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

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

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

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

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

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

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

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



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

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

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

(f)	
	<div data-bbox="322 188 1273 555"> <p>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.)</p> </div> <div data-bbox="1305 188 1353 219">yes</div>