

**PREA AUDIT REPORT**     Interim     Final

**ADULT PRISONS & JAILS**

**Date of report:** 07/27/17

<b>Auditor Information</b>			
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<b>Telephone number:</b> 540-760-6201			
<b>Date of facility visit:</b> June 28-30, 2017			
<b>Facility Information</b>			
<b>Facility name:</b> Southside Regional Jail			
<b>Facility physical address:</b> 244 Uriah Branch Way, Emporia, VA 23847			
<b>Facility mailing address:</b> <i>(if different from above)</i>			
<b>Facility telephone number:</b> (434) 634-2254			
<b>The facility is:</b> <i>Regional</i>	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input checked="" type="checkbox"/> <i>County Regional</i>
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
<b>Facility type:</b>	<input type="checkbox"/> Prison	<input checked="" type="checkbox"/> Jail	
<b>Name of facility's Chief Executive Officer:</b> Karen Craig			
<b>Number of staff assigned to the facility in the last 12 months:</b> 44			
<b>Designed facility capacity:</b> 100			
<b>Current population of facility:</b> 123			
<b>Facility security levels/inmate custody levels:</b> Minimum, Medium, Maximum			
<b>Age range of the population:</b> 19-65			
<b>Name of PREA Compliance Manager:</b> N/A		<b>Title:</b>	
<b>Email address:</b>		<b>Telephone number:</b>	
<b>Agency Information</b>			
<b>Name of agency:</b> Southside Regional Jail			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> Southside Regional Jail Authority			
<b>Physical address:</b> 244 Uriah Branch Way, Emporia, VA 23847			
<b>Mailing address:</b> <i>(if different from above)</i> <a href="#">Click here to enter text.</a>			
<b>Telephone number:</b> (434) 634-2254			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Karen Craig		<b>Title:</b> Superintendent	
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<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Aretha Robinson-Pegram		<b>Title:</b> Chief of Operations	
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## AUDIT FINDINGS

### NARRATIVE

The Auditor and the Southside Regional Jail entered a contract for PREA audit services on May 16, 2017. The Auditor sent the PREA Coordinator a notice to post in all inmate living units and in the lobby for the public to review. While touring the facility the Auditor observed each notice posted in inmate living units and the lobby. The notice sent to the facility included the dates of the audit and a statement to the inmate population informing them how to confidentially correspond with the Auditor. Inmates were provided the address of the Auditor on the posted notice. All notices were posted on May 16, 2017.

The Auditor received one confidential correspondence from an inmate at the facility. The letter was not opened by the facility prior to mailing it to the Auditor. The inmate was an indigent inmate who was provided postage to mail the letter. The Auditor had difficulty reading the contents of the letter. The Auditor included the inmate on the list of inmates chosen for an interview. The inmate clarified the contents of the letter during the interview. After interviewing the inmate the Auditor determined the letter was not directly related to sexual abuse or sexual harassment.

The Auditor received the facility's completed Pre-Audit Questionnaire from the PREA Coordinator with all attachments prior to the Audit dates. The Pre-Audit Questionnaire and attachments were sent through the U. S. Postal Service on a "thumb drive." The electronic attachment included the Southside Regional Jail's PREA policies, population reports, floor plans, staffing plan, organizational chart, training documents, mission statement, and numerous other supporting documents.

The Auditor maintained contact with the PREA Coordinator prior to arriving at the facility. The PREA Coordinator responded quickly to the Auditor during this time period. The Auditor asked several questions and made some recommendations prior to arriving on site. The Auditor reviewed the facility's website and questioned where investigative responsibilities were published. The PREA Coordinator quickly guided the Auditor to the information. The Auditor informed the PREA Coordinator of the Audit process and information needed during the Audit prior to arriving on site. The Auditor requested a staff and inmate roster be available when arriving for the audit. The PREA Coordinator ensured the information was prepared and readily available to the Auditor.

The Auditor contacted the Sexual Assault Nurse Examiner with the Chesapeake Forensic Specialists, LLC. An interview with the head of forensic nurses took place over the telephone. The SANE was aware of the Memorandum of Understanding with the Southside Regional Jail. She informed the Auditor all forensic examinations take place at the Southampton Memorial Hospital. The Auditor was informed Chesapeake Forensic Specialists, LLC has not conducted a forensic examination in the previous 12 months. She further explained her organization contacts the Family Violence and Sexual Assault Unit who provides emotional support services to inmate victims of sexual abuse. The representative from the Family Violence and Sexual Assault Unit is allowed to accompany the victim during the forensic evidence collection process.

The Auditor contacted the Sexual Abuse Investigator with the Greensville County Sheriff's Office. An interview with the investigator was conducted by telephone. The investigator informed the Auditor the sheriff's office has not conducted a criminal investigation of sexual abuse at the Southside Regional Jail within the previous 12 months. The investigator informed the sheriff's office meets an inmate victim at the Southampton Memorial Hospital for initial investigatory interviews. In the event an allegation does not require forensic evidence collection the investigator interviews the inmate at the Southside Regional Jail.

The Auditor reviewed the facility's Prison Rape Elimination Act information published on the facility's website. Prison Rape Elimination Act information can be accessed within "inmate information" on the facility's website. The website includes a "PREA" link which includes a statement about the facility's policy regarding sexual abuse and sexual harassment, how to report sexual misconduct, how to report allegations for an inmate, the facility's annual report, and a link which explains investigative responsibilities. The facility's annual reports includes data which is aggregated based on a calendar year.

The Auditor arrived at the Southside Regional Jail on June 28, 2017 to begin the on-site portion of the audit. The Auditor met with the facility's Superintendent, PREA Coordinator, First Sergeant and Administrative Assistant. The Auditor informed the group of the process in which the audit will be conducted. The Auditor informed the group he will work with the facility's schedule of events in an attempt to not disrupt normal operations. It was further explained the Auditor is flexible and can interview staff, volunteers, contractors and inmates based on scheduling at any point during the audit. The Auditor requested a detailed tour of the facility at the conclusion of the meeting. After speaking to the group the Auditor was offered a tour of the facility.

A facility tour was conducted and the Auditor was accompanied by the PREA Coordinator, Captain of Security and First Sergeant. The Auditor informed the tour group all areas of the facility will need to be observed. An escort was provided in the following areas; all inmate living units, medical, intake, gymnasium, kitchen, administration, classrooms, library, visitation, property room, laundry room, main control room, secondary control rooms, inmate records, and training room. During the tour the Auditor observed supervision levels, potential blind spots, camera placements, toilet and shower areas, informally interviewed staff and inmates, and observed posted PREA materials. PREA posters were observed in all inmate living units, Administration, gymnasium, public lobby, visitation, classrooms, and the library. Posters included zero tolerance and informed how to report allegations of sexual abuse and sexual harassment. The posters were

bilingual and included English and Spanish.

During the tour the Auditor observed opposite gender announcements from staff when entering inmate living units. Restroom and shower areas were observed to offer privacy to the inmate population without jeopardizing safety or security of the facility. Each shower has a curtain that conceals the inmates upper torso and lower body. Inmates interviewed by the Auditor informed they can shower, utilize the restroom and change clothes without a staff member of the opposite sex viewing their breasts, buttocks or genital areas.

The Auditor conducted both formal and informal interviews with staff and inmates. Formal interviews were conducted in the conference room with staff and in the library with inmates. Informal interviews were conducted sporadically during the audit tour. Staff attending the tour distanced themselves to allow the Auditor opportunity to informally interview staff and inmates. Formal interviews were conducted with 11 inmates and 17 staff members. The Auditor informally interviewed 4 inmates and 4 staff members. Two contractors and one volunteer were formally interviewed. Specialized interviews were conducted with 11 staff members which included mental health, nursing staff, human resources, investigator, classification, incident review team member, first responder, contractor, volunteer, intermediate and high level staff. All staff and inmates cooperated with the Auditor during formal and informal interviews. The Auditor visited with both day and night shifts.

There were no inmates who identified as transgender or intersex for the Auditor to interview during the time of the audit. No inmate currently housed had reported an allegation of sexual abuse or sexual assault to the Southside Regional Jail. There were no inmates who reported suffering sexual abuse in a confinement setting. Neither the mental health professional nor Classification Officer had identified an inmate at high risk of victimization or abusiveness. The facility does not routinely house youthful offenders. During the Audit there were no inmates with intellectual, physical, psychiatric or speech disabilities, blind, low vision, deaf, or hard of hearing.

The Auditor reviewed the material sent prior to arriving on site. The facility's PREA files were reviewed on site. In addition to the provided documentation, the Auditor requested numerous other documents to determine the facility's level of compliance in prevention, detection, and response to sexual abuse, training and education, risk screening, reporting, investigations, inmate discipline, medical and mental health care, and data collection, review and reporting. The Auditor randomly chose 12 inmate records to review. The Auditor requested to review the medical records of 3 inmates who reported suffering sexual abuse in the community. A review was conducted of 43 staff training records, 14 investigator training records, 3 medical staff and 2 contract medical/mental health training records, 3 personnel records and 10 volunteer and contractor training records. Facility staff were fully cooperative and provided access to the Auditor.

At the conclusion of the audit a meeting was conducted with the Superintendent, PREA Coordinator, First Sergeant and Administrative Assistant. The Auditor thanked the staff for their hospitality during the Audit and praised the Superintendent for her staff's efforts. The Auditor informed the Superintendent staff and inmates were well educated regarding the Southside Regional Jail's PREA policies and efforts toward prevention, detection and response to sexual abuse and sexual harassment. All staff and inmate interactions observed during the Audit were professional. The inmate population appear confident in staff abilities to address incidents of sexual abuse and sexual harassment. Inmates interviewed formally and informally felt safe within the facility. During the audit only one complaint was provided to the Auditor from an inmate. The complaint was regarding property and not related to sexual abuse or sexual harassment.

All facility staff the Auditor had contact with appear to support PREA prevention, detection and response efforts. This culture typically does not transpire without the support of command staff. Command staff at the Southside Regional Jail remain proactive towards creating a zero tolerance culture. Staff appear content in their positions and duties within the facility. Staff were receptive and willing to speak to the Auditor during formal and informal interviews. All interactions with staff and inmates were friendly and professional.

The facility appeared to be well operated. Inmates informed the Auditor staff take issues serious and all feel confident in staff's abilities to address sexual abuse and sexual harassment incidents. Several inmates informed the Auditor all they hear about is PREA and they are sick of watching the video everyday. One informed the Auditor he is getting close to being able to recite the entire video. The Auditor felt the daily education video played by the facility contributes to the inmate population's knowledge of prevention, detection, reporting and response to sexual abuse and sexual harassment. The inmate population appear well educated in the facility's PREA efforts.

## DESCRIPTION OF FACILITY CHARACTERISTICS

The Southside Regional Jail is located at 244 Uriah Branch Way, Emporia, VA 23847. The facility is just minutes east of the I-95 corridor to the east in southern Virginia. The jail is approximately 65 miles south of Richmond, 80 miles west of Norfolk and 60 miles north of Rocky Mount, NC. The historic town of Emporia, Virginia is the second least populated town in Virginia and encompasses 7 square miles. Emporia is known for its annual pork festival and as the home of NASCAR driver Elliott Sadler.

The facility sits on 13 acres next to the Greensville County Sheriff's Office and the county complex. The Southside Virginia Community College is also located on the property. The jail totals 47,198 square footage. Inmate living areas compose a majority of the total square footage at 32,592 sq. ft. The facility houses local and state inmates. The Southside Regional Jail serves the City of Emporia and Greensville County. The facility currently holds 60% inmates from the City of Emporia and 40% from Greensville County. The 2 jurisdictions formed the Southside Regional Jail Authority Board and opened the doors of the facility on December 20, 1998. The Southside Regional Jail Authority Board holds bi-monthly meetings on the second Tuesday of the month.

The facility's rated capacity is 100 with a current population of 135. There are 43 current staff members employed by the facility. The average length of stay for the inmate population is 31 days. In the past 12 months the facility admitted 1159 inmates. The population consists of minimum, medium and maximum custody offenders.

The Southside Regional Jail maintains 13 living units, including an infirmary. There are 6 multiple occupancy living units, 5 open bay dormitory style units, 1 single cell segregation unit and 1 infirmary. Staff perform twice hourly security checks at irregular intervals in accordance with the Virginia Board of Corrections Minimum Standards for Local Jails and Lockups. A description of each unit is as follows:

There are 4 male maximum custody living areas labeled as HA100, HA200, HA300 and HA400. Each living unit includes 4 double bunked cells. All 4 cells have a toilet and sink located inside the cell (wet cell). Each maintains a dayroom with a toilet and shower adjacent. The toilet is located behind a "knee wall" and each shower has a closeable shower curtain. Dayrooms offer the inmate population a television, telephone and seating area with a table. The Auditor observed 2 cameras in each unit. Inmates can shower and use the restroom without being viewed by the camera. PREA Posters and a notice regarding the PREA audit were visible in each dayroom. All four living units have a skylight in their ceilings.

Living units HA500 and HA600 are male medium custody living units. Both units house up to 32 inmates in 16 double bunked "wet cells." The two tiered units have a dayroom that offers televisions, telephones and seating with tables for the population. Facility staff allow each tier dayroom access at separate times in each living unit. There is a shower and toilet adjacent to the dayroom and a shower and toilet adjacent to the "catwalk" upstairs. Toilets are tucked behind a "knee wall" and each shower has a shower curtain. Each dayroom has 4 cameras, PREA posters and the notice of the PREA audit posted. The Auditor verified inmates can use the restroom and shower without being viewed by the camera.

Living units HA100, HA200, HA300 and HA400 are located to the left side of a secondary control center while HA500 and HA600 are located to the right side. A secondary control center controls access to and within all 6 living units. At the rear of those living units is a segregation housing unit. The special population unit (SP) has 7 single cells. All cells have a toilet and sink inside. Inmates have access to showers in an adjacent dayroom. Showers have curtains for the inmate's privacy. There are 2 cameras located in the dayroom with 1 camera located in each special purpose cell. The Auditor requested video sample of one cell and observed a grey spot over the toilet area in the cell. Inmates have access to telephone while housed in the special population unit.

Living unit HB300 is the facility's housing for male inmates participating in the Therapeutic Community program. The unit is open dormitory style with 16 sets of triple bunks. It houses up to 48 inmates who participate in the program. The living unit offers a sink, television, telephones and seating with tables. There are 2 cameras in the dayroom which cannot view into the shower and toilet areas. The Auditor observed PREA posters and the posted notice regarding the PREA audit sent by the Auditor.

Living unit HB400 is located next to HB300 with a reverse layout. Unit HB400 is utilized for male inmates participating in the facility's work release program and those who work within the facility. This unit houses up to 48 inmates in an open dormitory style setting with triple bunks. There are 2 cameras in the dayroom. The cameras cannot view into the showers and toilets which are adjacent to the dayroom. Toilets are placed behind a "knee wall" and each shower has a curtain. PREA posters and notice of the PREA audit are posted in the dayroom. Inmates have access to a sink, telephones, televisions and seating in the dayroom.

Female living unit W104 is an open dormitory style unit. The unit houses up to 21 female inmates on double bunked beds. There is 1 shower adjacent to the dayroom. The shower has a curtain for the inmate's privacy. Two toilets are located behind "knee walls" and 1 sink is adjacent to the dayroom. There are 2 cameras that monitor dayroom activities. The cameras do not view into the toilet and shower areas. There is a PREA poster on the living unit dayroom wall and the posted notice regarding the PREA audit. Inmates have access to television, telephones and seating with tables.

Living unit W108 houses female inmates in an open dormitory style setting. There are 12 beds in the dayroom. Two cameras monitor

inmate activity without a view to the shower and toilet area. The shower and toilet are located adjacent to the dayroom. A “knee wall” conceals the toilet while privacy in the shower is provided by a curtain. Inmates have access to a telephone, sink, television and PREA poster in the dayroom. The Auditor observed the notice posted regarding the PREA audit. Female living unit W106 is similar to W108 and houses 6 female inmates.

The facility staffs a Master Control room 24/7 with a minimum of 1 staff member for each shift. The staff member controls access to facility doors, monitors cameras, and controls access into and out of the facility. Camera monitors include a grey square over toilet areas in the special population cells as male and female staff are assigned to work the Control Center. The Control Center has windows which make it difficult to see inside while allowing the staff member to see through to the secured area of the facility. The Control Center staff member has visibility into the public side of non-contact visitation and into the recreation area.

Inmate visitation occurs in the facility’s non-contact visitation area. The visitation area has 8 visitation booths, one of which is handicapped accessible. There is a zero tolerance poster which includes instructions how to report an allegation of sexual abuse or sexual harassment. No cameras are located in the non-contact visitation room. Local jurisdiction inmates can receive 2-15 minute visits per week. Each living unit must adhere to a set visitation day. HA100 and HA200 visit on Sundays from 9:00 am until 11:00 am. HA300 and HA400 visit on Thursdays from 7:00 pm until 10:00 pm. HA500 and HA600 visit on Sundays from 1:00 until 3:00 pm. All females can receive a visit on Sundays from 3:00 pm until 5:00 pm. Those housed in the special purpose living unit can receive a visit on Wednesdays from 8:00 pm until 10:00 pm. Inmates access the non-contact visitation area from the secured side of the facility. The public is allowed access by the Control Center staff member through the lobby.

The facility has an outdoor and indoor recreation area. The recreation roof is half covered by ceiling; the other half is open. Drop down doors can be raised or lowered to divide the indoor/outdoor recreation areas. Two cameras are mounted in the recreation area and monitored by the Control Center staff member. The staff member can directly observe the inmates through a large window. Each inmate living unit receives one hour of recreation per week in accordance with the Virginia Board of Corrections Minimum Standards for Local Jails and Lockups. The Therapeutic Community unit (HB300) receives recreation two times each week. The recreation area can accommodate up to 48 inmates. The Auditor observed a PREA poster on the wall in the recreation area. The poster included a zero tolerance statement and informed how to report allegations of sexual abuse and sexual harassment, including the toll free telephone number. There is one restroom adjacent to the gymnasium which allows inmates the opportunity to use the restroom privately.

Inmates have access to a library which doubles as a classroom on the HA side of the facility. The facility maintains another classroom on the HB side. Both rooms are monitored by cameras. The library can accommodate up to 7 inmates simultaneously. Inmates may attend library one time each week for 30 minutes. The library maintains books, magazines and newspapers for the inmate population. Programs offered by the facility include, Domestic Violence Intervention, Life Skills, Religious Classes, Anger Management, Substance Abuse Counseling, Religious Counseling, General Counseling, Therapeutic Community, Re-Entry Program, and GED Studies and Testing. The Inmate Handbook informs inmates to submit a request and be of good behavior in order to attend.

The Southside Regional Jail employs 3 medical personnel (1 LPN and 2 EMT) and contracts for mental health services and a physician. The medical area maintains a negative pressure cell for those inmates who have a communicable disease. There is one infirmary bed in the medical area. The pharmacy is a locked room which also contains inmate medical records. Inmates are examined or treated in the medical departments exam/treatment room. The Auditor observed one camera in the medical corridor. The camera does not view into the exam/treatment room. Inmates housed in the infirmary cell can shower privately in a restroom which includes a shower. A contract physician comes to the facility once every two weeks. Psychiatric services are performed by a contracted Psychiatrist through telemedicine services. Facility staff transport inmates to a local Dentist for dental services. The contracted mental health professional works 3 days each week in the facility. Inmate sick call is performed Monday through Friday while medical staff remain on call for off duty services. The Shift Commander contacts 911 in the event medical staff are not in the facility for emergency medical services.

The facility’s food services are contracted with Trinity Services Group. The contractor employs 2 full time and 2 part time food service workers in the facility. The kitchen area has one dry storage, two walk in refrigerators and one walk in freezer. Seven inmates work in the kitchen cooking, cleaning and preparing food for the population. The Auditor observed 6 cameras that capture all areas of food service. The Auditor informed the PREA Coordinator the walk in boxes are blind spots. A contracted food service worker informed the Auditor inmates are not left alone while in the walk ins. The PREA Coordinator placed a sign on the walk in doors which requires direct staff supervision if more than one inmate is inside.

The booking area includes seven cells with one being a dry cell and one being a multiple occupancy cell. The area allows staff to separate males from females while being booked into the facility. There is a sallyport which includes one camera. The Auditor observed 2 cameras in the booking area which do not view directly into cells. The shower in the booking area is located behind a door and has a curtain for privacy. Arraignments occur in the video arraignment room to reduce transportation efforts. Local Magistrates have an office in the booking area. The booking staff play the PREA Educational video on a continual basis. The Auditor observed a zero tolerance poster which includes sexual abuse and sexual harassment reporting avenues. When females are booked into the facility the booking officer calls a female from shift to conduct a search of the female. All inmates participating in work release are “changed out” and searched in the booking area. The property room is inaccessible to inmates.

The Administration area has a reception, multiple offices, Armory, staff break room, training room, inmate records room, conference room, and male and female staff locker rooms. The Southside Regional Jail's laundry room has 1 camera monitored by the Control Center staff member. One inmate works in the laundry room which maintains 2 washers and 2 dryers. The facility utilizes green uniforms for females, orange for general population and yellow for male workers. Security staff perform twice hourly security checks in the laundry room at irregular intervals. Commissary services are provided by Oasis Inmate Commissary Services, Inc.

Cameras monitor doors, special purpose cells, dayrooms, corridors, medical, booking, kitchen, gymnasium, classrooms, library, sallyport, and the laundry room. There are 90 cameras that monitor facility areas. The CCTV system has a video retention of 15 days. Cameras can be monitored by the main Control Center and the secondary Control Center in the HB side of the jail. Select supervisory staff can monitor and review cameras on their desktop stations.

During the audit the age ratio of the facility ranged from 19 to 65. The average length of stay at the time of the audit was 31 days. At the time of the audit there were 135 inmates confined in the facility, 114 males and 21 females. Male inmates encompassed 84% of the total population while females were at 16%. The racial demographics were calculated utilizing an inmate roster printed on the first day of the audit.

The racial demographics were as follows:

African American	107
Caucasian	23
Hispanic	5
Total	135

African American Males	92	African American Females	15
Caucasian Males	17	Caucasian Females	6
Hispanic Males	5	Hispanic Females	0
Total Males	114	Total Females	21

African American	79%
Caucasian	17%
Hispanic	4%

Utilizing the same printed inmate roster the age demographics of the facility were as follows:

Age Range	Percentile
18-24	15%
25-29	18.8%
30-39	35.7%
40-49	17%
50-59	11%
60-69	2%
70-79	.5%
80+	0%

Age	Male	Female	AA Male	AAFemale	White Male	White Female	Hispanic Male	Hispanic Female
18-24	16	0	15	0	0	0	1	0
25-29	15	8	12	6	2	2	1	0
30-39	43	5	32	2	8	3	3	0
40-49	21	5	17	4	4	1	0	0
50-59	15	3	13	3	2	0	0	0
60-69	4	0	3	0	1	0	0	0
70-79	0	0	0	0	0	0	0	0
80+	0	0	0	0	0	0	0	0
Total	114	21	92	15	17	6	5	0

## SUMMARY OF AUDIT FINDINGS

The Auditor made several recommendations and requests to the PREA Coordinator prior to and during the audit. The PREA Coordinator responded to the Auditor's recommendations and requests by updating forms, developing forms, providing documentation, and posting signs. The Auditor found the facility complied with all applicable PREA Standards. The Auditor determined 42 standards were applicable to the Southside Regional Jail.

The Auditor found standard 115.12 (Contracting with other entities for confinement of inmates) not applicable to the Southside Regional Jail. The Southside Regional Jail does not contract with other entities for the confinement of its inmates.

The Auditor did not determine standard 115.14 non-applicable to the Southside Regional Jail. The Auditor felt the facility must comply with standard 115.14 during this audit period even though it routinely does not house youthful offenders. During this audit period the facility housed 1 youthful offender overnight who was part of a private transportation to another facility.

The Auditor discussed future PREA efforts with the PREA Coordinator during and after the audit. Advice was provided in the event the facility receives a transgender or intersex inmate for a long period of time. The Auditor also gave advice concerning youthful offenders. The Auditor informed the facility can enter a Memorandum of Understanding with another regional jail certified to hold youthful offenders. A recommendation was given to the PREA Coordinator to discuss credibility assessments with all sexual assault investigators. The Auditor and PREA Coordinator discussed how to make appropriate credibility assessments and document them in investigative reports. The Auditor gave a recommendation to the PREA Coordinator and Classification Officer how to efficiently conduct 30 day vulnerability reassessment of all inmates.

The PREA Coordinator was receptive and compromised a solution to all recommendations and advice provided by the Auditor. The Southside Regional Jail has succeeded in establishing a zero tolerance culture towards sexual abuse and sexual harassment. Executive staff ensure the facility maintains appropriate measures to prevent, detect, and respond to allegations of sexual abuse and sexual harassment.

Number of standards exceeded: 0

Number of standards met: 42

Number of standards not met: 0

Number of standards not applicable: 1

## Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

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

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

### Auditor Discussion:

The Auditor viewed facility policy which stipulates a zero tolerance towards all forms of sexual abuse and sexual harassment. The facility's goal is to create an environment and culture of mutual respect. The policy includes the Southside Regional Jail's approach to prevention, detection, and response to sexual abuse and sexual harassment on pages 9 through 13. The facility utilizes definitions of prohibited behaviors which include; sexual abuse, sexual harassment, and voyeurism. Sanctions for engaging in sexual abuse or sexual harassment are listed in the Inmate Handbook.

The Southside Regional Jail operates one facility and employs a PREA Coordinator. The Chief of Operations serves as the facility's PREA Coordinator. The PREA Coordinator reports to the Assistant Superintendent and has the authority to report directly to the Superintendent for PREA related purposes. The PREA Coordinator feels she has sufficient time and authority to develop, implement and oversee the Southside Regional Jail's PREA compliance efforts.

### Evidence Relied Upon:

Policy – PREA-1 pg. 1  
Organizational Chart  
Interview with PREA Coordinator  
PREA Coordinator Appointment Letter  
Interactions with the PREA Coordinator  
Interviews with Inmates  
Staff Training Records  
Inmate Education Records  
Inmate Handbook, pg. 14-16  
Training Records

### Analysis/Reasoning

Beyond verification of a written zero tolerance policy, the Auditor established the facility has a zero tolerance culture through interviews with staff and inmates. The overall perception of the inmates interviewed was staff take PREA related issues seriously. An overwhelming majority of inmates interviewed expressed they trust staff to handle sexual assault and sexual harassment incidents appropriately.

Staff appeared to understand their responsibilities and role towards compliance with facility PREA policies. Documentation provided to the Auditor verified reported incidents were handled appropriately. All inmates interviewed by the Auditor reported they had not witnessed or had no knowledge of a sexual assault taking place at the facility. The facility outlines its approach to prevention, detection and response to sexual abuse/harassment within the PREA policy. Prevention efforts include, but are not limited to: physical layout, lighting, shower curtains, locked doors, educating inmates, screening inmates and training staff. Detection efforts include, but are not limited to: around the clock supervision, unannounced supervisory rounds, not relinquishing custody to other staff members, being observant and submitting reports, not allowing staff to visit other posts, and encouraging inmates to report incidents. Response efforts include, but are not limited to: accepting third-party reports, protecting and monitoring inmates and staff who report incidents, reporting criminal allegations to the Greenville County Sheriff's Office, conducting prompt and thorough investigations, reporting investigative outcomes to the victim, conducting incident reviews, and employing a PREA Coordinator.

The Auditor determined the PREA Coordinator was able to quickly address and respond to all of the Auditor's requests and recommendations prior to and during the audit. The Auditor reviewed documentation that every staff member has received PREA training and every inmate has received PREA education. Both staff and inmates were well educated regarding PREA efforts.



Conclusion:

The Auditor felt the facility met its goal of creating a zero tolerance culture within the organization. Staff and inmates are able to articulate topics discussed in training and requirements of the PREA standards. The overall atmosphere of the facility was calm and quiet. The Auditor received very little complaints form the inmate population. All of the auditor’s questions, requests and recommendations were handled expeditiously by the PREA Coordinator. The Auditor determined the Southside Regional Jail meets all the requirements of PREA Standard 115.11.

**Standard 115.12 Contracting with other entities for the confinement of inmates**

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

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

Not Applicable

The Southside Regional Jail does not contract for confinement of it’s inmates with other agencies.

**Standard 115.13 Supervision and monitoring**

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

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

Auditor Discussion:

Policy requires the facility to comply with a staffing plan that provides for adequate staffing levels and video monitoring to protect inmates against sexual abuse. Policy requires the Superintendent or his/her designee and the PREA Coordinator to assess, determine and document adjustments to the staffing plan, video monitoring capabilities, and available resources. The Auditor reviewed the facility’s 2016 staffing plan which appears adequate for providing sufficient staffing of the facility. Deviations to the staffing plan are noted by the Shift Commander on Post Assignment Sheets.

During the tour the Auditor observed staff supervising the inmate population. Cameras are strategically placed throughout the facility. The Auditor observed cameras in living unit dayrooms, corridors, booking, medical, laundry, kitchen, library, program areas, sallyport, indoor recreation and medical. Staff in the main control room and secondary control room can monitor cameras. Cameras can be monitored by select staff on their computer monitors. The facility had no upgrades to its monitoring system during this audit period. The facility is considering moving two cameras to aid in supervision efforts.

The facility has no findings of inadequacy by a governing body.

Intermediate level supervisors are required to make unannounced rounds throughout the facility to deter sexual abuse and sexual harassment.

These rounds are documented in an Unannounced Security Rounds Log by both day and night shifts. Facility policy also prohibits all staff from alerting others of supervisory rounds.

Evidence Relied Upon:

Policy – PREA-1 pg. 13-16  
Southside Regional Jail Staffing Plan  
Post Assignment Sheets  
Unannounced Security Rounds Log  
Interviews with Supervisors

Analysis/Reasoning

The facility's staffing plan includes 44 full time positions and 1 part time position. The facility maintains 39 security staff, 3 medical positions, 1 Administrative Assistant, 1 Receptionist and 1 part time civilian position. During the time of the audit the facility had one vacant security position. The staff member had resigned 29 days before the audit began. The vacant position was documented on the Deviation Log submitted with the staffing plan. During the time of the audit the facility maintained a staff to inmate ratio of 1 staff per 3 inmates. Daily deviations from the staffing plan are notated on Post Assignment Sheets. The Auditor reviewed 12 post assignment sheets dating from January 2016 to present. The "comments" section of the form denotes staff vacancies from sick leave and vacation taken.

The facility had no documentation of an annual review of the staffing plan as the staffing plan has not been in existence for a complete year. The Auditor gave recommendations how the facility could improve the staffing plan. The recommendations were taken into account and the staffing plan was adjusted. The PREA Coordinator and the Superintendent are aware of the annual review requirements to assess, determine and document adjustments to the staffing plan in accordance with 115.13 (c) 1-3. The Auditor did observe adherence to requirements of 115.13(a) 1-11 documented in the creation of the staffing plan. It should be noted this is the facility's initial PREA audit.

While touring the facility the Auditor observed staff in each area. Supervisors were observed making unannounced rounds in inmate living units during the audit. The Auditor reviewed one sample of Unannounced Security Rounds Logs from each of the 12 previous months which reveal unannounced rounds are occurring on both day and night shifts. Supervisory staff informed the Auditor they do not inform staff when they are conducting security rounds and do so at irregular intervals with no discernible pattern. All supervisors interviewed by the Auditor stated they would hold staff accountable if they discovered a staff member alerting other staff of supervisory rounds. Subordinate staff are aware of the facility policy prohibiting them from alerting other staff of supervisory rounds.

Conclusion:

The Auditor observed a sufficient staffing plan and is confident the Superintendent and PREA Coordinator will ensure the annual staffing plan will occur. The Auditor was aware the facility had not conducted the annual review of the staffing plan prior to arriving at the facility as the PREA Coordinator was forth coming with the information. The inmate population informed the Auditor staff continually conduct security rounds in the living units and supervisors conduct unannounced security rounds. Inmates reported they feel safe within their living units and other areas in the facility. The Auditor felt the facility showed compliance with 115.13 and therefore found the facility meets the standard.

**Standard 115.14 Youthful inmates**

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

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

Auditor Discussion:

Facility policy states the Southside Regional Jail does not house youthful inmates unless adjudicated as an adult.

Evidence Relied Upon:  
Policy – PREA-1 pg. 16  
Intake Records  
Population Reports  
Staff Interviews

**Analysis/Reasoning:**

Facility policy requires the youthful offender be placed in a “special housing area” until such time he/she can be transferred to a jail that is certified to house youthful inmates. The Auditor reviewed population reports, intake records and conducted interviews with staff. During this audit period the facility housed one youthful offender overnight as he was being transported to another facility by a private transportation company. The youthful offender was housed in an intake cell with no contact with adult offenders. The Auditor reviewed population reports from the previous 12 months and found no other period in which a youthful offender was housed in the facility.

**Conclusion:**

The Southside Regional Jail does not routinely house youthful offenders. A review of population reports, booking records and staff interviews revealed it rarely occurs. The Auditor was informed a youthful offender could be housed in one of the 2 medical cells which are rarely utilized. The Auditor determined the facility meets the requirements of this standard for this audit period.

**Standard 115.15 Limits to cross-gender viewing and searches**

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

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

**Auditor Discussion:**

Facility policy prohibits cross-gender strip searches of inmates unless exigent circumstances exist or are performed by medical staff. Staff are required to document cross gender searches in the facility’s Exigent Circumstances Log. The log requires staff’s written justification for conducting the cross gender search. Female security staff are maintained on each shift as required by the staffing plan. The average annual daily population includes 90% males and 10% females housed in the facility. During the audit there were 84% males and 16% females incarcerated in the facility. The facility reported no cross-gender strip or cross gender visual body cavity searches in the past 12 months. There were no reported incidents of medical staff performing such searches in the past 12 months.

Facility policy and practice enables inmates the opportunity to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia. The policy requires any staff member of opposite gender to announce his/her presence when entering an inmate living unit. The Auditor observed all shower and toilet areas in the facility. Each area provides for the inmate’s privacy without compromising security of the facility. The Auditor observed staff making opposite gender announcements during the audit tour.

Female inmates in the facility are afforded the same programming and out of cell activities as male inmates. Female inmates informed the auditor they are never restricted access to programs because a same sex staff member is not present to conduct a pat-down search. The facility maintains female staff on every shift. There were no reported incidents of a male staff member conducting a pat-down search of a female inmate. Both staff and inmate interviews revealed male staff do not perform cross-gender pat-down searches of female inmates. Interviews with staff and inmates reveal female staff do not pat search male inmates. The facility strictly utilizes same sex pat searches and strip searches.

The Auditor reviewed training documents which reveal all staff received training to conduct cross-gender searches and searches of transgender and intersex inmates. After completion of the training all staff were required to pass a test with 80% or better score. The facility had no transgender inmate incarcerated at the time of the audit. There were no transgender or intersex inmates housed in the previous 12 months.

Evidence Relied Upon:  
Policy – PREA-1 pg. 16-17  
Exigent Circumstance Log  
Shift Rosters  
Staffing Plan  
Training Lesson Plans – Searches  
Training Attendance Rosters  
Training Curriculum  
Staff and Inmate Interviews

#### Analysis/Reasoning

The Auditor reviewed shift rosters and assignments which included adequate female and male staff on each shift. The Auditor observed both male and female staff on each shift visited. At the time of the audit the Southside Regional Jail’s staffing was comprised of 59 percent male and 41 percent female staff. Male staff are assigned to areas that house male inmates while females are assigned to areas that house female inmates to reduce the need for cross gender pat down and strip searches. The Auditor reviewed each staff member’s training record to verify each staff member received training to conduct cross-gender searches and searches of transgender and intersex inmates. No staff member or inmate interviewed by the Auditor has witnessed or heard of an incident in which a cross-gender strip search was conducted at the Southside Regional Jail.

The Auditor observed all shower and toilet areas throughout the facility. Each shower in inmate living units has a curtain the inmate is required to close while showering. The facility’s Special Populations unit maintains cameras in all 7 cells. The Auditor asked a staff member to query those cameras on a computer monitor. While viewing the camera the Auditor observed a dark spot over the toilet area to allow for privacy while utilizing the restroom. Both male and female inmates informed the Auditor they can shower privately and are never in full naked view in front of staff member of the opposite gender. Each inmate interviewed by the Auditor stated opposite gender staff announce their presence when entering the living units. The Auditor observed staff making opposite gender announcements while touring the facility.

The training curriculum reviewed included professional and respectful treatment of transgender and intersex inmates. The Southside Regional Jail utilizes training curriculum published on the PREA Resource Center’s website. All staff interviewed stated they would contact medical staff if they were unsure of a person’s gender during the booking process.

#### Conclusion:

Staff interviewed by the Auditor are aware of their responsibilities of this standard. The Auditor verified all staff have been trained. The facility maintains staffing levels on each shift so as to reduce the need for a cross gender pat or strip search of an inmate. Interviews with staff and inmates and a review of documents reveals compliance with standard 115.15. The Auditor found the facility meets all elements of this standard.

### **Standard 115.16 Inmates with disabilities and inmates who are limited English proficient**

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

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

#### Auditor Discussion:

Facility policy mandates inmates with disabilities equal opportunities to participate in all aspects of the facility’s prevention, detection and response to sexual abuse/harassment information and education. The facility provides PREA educational material to inmates who are deaf or hard of hearing, blind or low vision, and those with intellectual, psychiatric or speech disabilities. Information is provided through closed captioned video, in writing, interpreted through a language line, Braille or directly read by a staff member to the inmate. The agency provides interpretative services with a language line service through Language Line Services, Inc. Teletype phone is also maintained for the use of hearing impaired inmates. Facility policy prohibits the use of inmate interpreters unless a delay would compromise an inmate’s

safety, the performance of first-response duties or the investigation of an inmate's allegations.

Evidence Relied Upon:

Policy – PREA-1 pg. 12 - 13  
Inmate Handbook  
Inmate Comprehensive Education  
Inmate Educational Booklet  
Inmate PREA Newsletter  
PREA Orientation  
PREA Posters  
Language Line Services, Inc.  
PREA Video  
PREA Orientation Acknowledgement

Analysis/Reasoning:

Facility procedures are sufficient to ensure all inmates with disabilities benefit from the facility's PREA prevention, detection and response information and education. At the time of the audit there were no inmates who were deaf or hard of hearing, blind, or who had intellectual, psychiatric or speech disabilities. The Southside Regional Jail's PREA Educational Booklet was transcribed to Braille by the Virginia Department of Corrections', Virginia Correctional Enterprise.

The facility maintains its written PREA materials in English and Spanish. The Auditor observed bilingual PREA posters in the lobby, Administration, gymnasium, library, housing units, intake, and classrooms. Staff play a PREA educational video during the booking process which is closed captioned for the hard of hearing or deaf. The facility maintains the closed captioned video in English and Spanish versions. The Classification Officer discusses PREA material with each inmate booked into the facility to ensure they understand the PREA material. Each inmate signs a PREA Orientation Acknowledgement sheet notating his/her understanding of the material. Inmates have further access to PREA education through the PREA Education video which is played on a daily basis at 2 p. m. One inmate informed the Auditor that staff routinely check to ensure all inmates had their PREA Educational Booklet within their possessions.

In the event an inmate speaks a specialized vocabulary the facility utilizes interpreters through the Lanuage Line telephone services. The facility has no bilingual staff employed. Through interviews with staff and inmates the Auditor verified the facility does not utilize inmate interpreters for PREA related information, education or investigations. Staff informed the Auditor they would only utilize an inmate interpreter if a delay would jeopardize an inmate's safety.

Conclusion:

Educational material utilized by the facility is sufficient to ensure all inmates benefit from its efforts to prevent, detect and respond to sexual abuse and sexual harassment. The inmate population was well educated in the facility's policies regarding sexual abuse and sexual harassment prevention, detection, and response. The Auditor determined the facility meets PREA standard 115.16.

### Standard 115.17 Hiring and promotion decisions

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

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

Auditor Discussion:

Policy prohibits the hiring or promotion of anyone who may have inmate contact and prohibits enlisting contractors who may have inmate contact who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. The policy also prohibits hiring those persons who have been convicted or attempted 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. Policy also prohibits hiring those who have been civilly or administratively adjudicated to have engaged in these activtites. All applicants are asked questions

regarding sexual abuse and sexual harassment as listed in PREA Standard 115.17 (a) during the pre employment process.

Before hiring new employees the facility performs a criminal background check through the Virginia Criminal Information Network and the National Crime Information Center. All applicants, staff, contractors, and volunteers sign a Sexual Misconduct Information Release Form authorizing the facility to conduct a criminal history record check. Policy requires the facility to make its best efforts to contact all prior institutional employers prior to hiring an individual. Background record checks are conducted on contractors and volunteers prior to enlisting services. Policy requires a background record checks of employees and contractors at least every five years.

The facility is required by policy to report substantiated allegations of sexual abuse or sexual harassment upon receiving a request from an institutional employer involving a former Southside Regional Jail employee. The facility's PREA policy informs staff material omissions regarding sexual misconduct, or the provisions of materially false information, shall be grounds for termination.

**Evidence Relied Upon:**

Policy – PREA-1 pg. 17-18

Sexual Misconduct Information Release Forms

Employment Application

Employee Files

Staff Interviews

VCIN Check Log

**Analysis/Reasoning:**

The Auditor interviewed staff who perform background checks and staff who participate in the hiring process. The Auditor verified through the VCIN check log all staff and contractors have had criminal record background checks conducted. The Auditor reviewed the file of one employee who had recently been promoted. A criminal record background check was conducted on the staff member prior to the effective date of promotion. The staff member completed another Sexual Misconduct Information Release form prior to the promotion.

The Auditor reviewed 3 employee personnel files. Each file contained the Sexual Misconduct Information Release Form. One of the files was a newer staff member who was asked information about prior sexual assault/harassment before receiving an offer of employment. Interviews with staff reveal this information is captured in two locations before a person is hired. The facility's application requires a response from the applicant and during the interview the information is captured on the Sexual Misconduct Information Release form.

The Auditor reviewed the file of an applicant who had previous correctional experience with another regional jail. The file contained documentation in which the other facility provided information to the Southside Regional Jail regarding prior allegations of sexual abuse and resignation during a pending investigation. The employee had none. The Southside Regional Jail either faxes, mails, or emails a form with questions regarding previous allegations and resignation to the applicant's previous institutional employer for response. The staff member responsible informed the Auditor a response concerning substantiated sexual abuse/harassment allegations is provided to other institutional employers regarding a previous Southside Regional Jail employee upon request.

The Auditor verified all contractors signed a Sexual Misconduct Information Release Form and a criminal history record check was conducted prior to enlisting their services. Contract staff interviewed by the Auditor informed they were asked questions about previous acts of sexual abuse and sexual harassment.

The facility imposes a continuing affirmative duty upon staff to disclose information related to sexual misconduct through it's PREA policy on pg. 18.

**Conclusion:**

The Southside Regional Jail makes appropriate efforts to uncover previous acts of sexual abuse/harassment before hiring or promoting staff or enlisting the services of contractors. The facility makes appropriate attempts to discover sexual misconduct of current employees through criminal history record checks. The facility has procedures in place to ensure compliance with all requirements of PREA standard 115.17. The Auditor determined the facility meets the requirements of this standard.

**Standard 115.18 Upgrades to facilities and technologies**

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

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

**Auditor Discussion:**

Facility policy mandates the agency considers the effects of design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities. The PREA policy requires the facility to consider how video and electronic monitoring systems may enhance the agency’s ability to protect inmates from sexual abuse.

**Evidence Relied Upon:**

Policy – PREA-1 pg. 18-19  
Video Monitoring System Diagram  
Auditor Observation

**Analysis/Reasoning:**

The Southside Regional Jail has not designed or acquired any new facility during this audit period. There have been no physical plant modifications of the current facility. The facility is currently assessing the possibility of moving two of the four cameras located in the library. The Auditor observed the library and verified two cameras appear sufficient to capture the entire library. The Auditor informed the PREA Coordinator to consider sexual abuse prevention efforts while choosing a new location for the two cameras.

**Conclusion:**

The facility has not designed, acquired, expanded, or modified its existing facility during this audit period. The facility is considering relocating two cameras to assist in sexual abuse prevention, detection and response efforts. The Auditor determined the facility meets PREA Standard 115.18.

**Standard 115.21 Evidence protocol and forensic medical examinations**

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

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

**Auditor Discussion:**

The Southside Regional Jail’s policy requires transporting inmate victims of sexual abuse to the Southampton Memorial Hospital for forensic evidence collection if the sexual abuse occurred within 72 hours. The facility policy allows staff to conduct administrative investigations of sexual abuse. Criminal allegations of sexual abuse/harassment are referred to an agency with the authority to conduct such investigations. All criminal investigations and physical evidence collection in the facility are conducted by the Greensville County Sheriff’s Office investigators.

Sexual abuse allegations received or incidents of sexual abuse that occur within the Southside Regional Jail where evidence of conduct supports criminal behavior are referred to the Greensville County Sheriff’s Office for investigation. Forensic evidence collection is performed by a Sexual Assault Nurse Examiner from the Chesapeake Forensic Specialist, LLC. at the Southampton Memorial Hospital in Franklin, Virginia. The SANE follows a uniformed evidence protocol when collecting evidence. The facility had no allegation of inmate-on-inmate sexual assault requiring transportation to the hospital during this audit period.

The Southside Regional Jail does not routinely house youthful offenders and only had one during this audit period who stayed overnight less than 24 hours in the booking area. The youthful offender arrived with a private transportation company who was transporting a group of

offenders to another agency.

No state entity or U. S. Department of Justice component is responsible for conducting sexual assault investigations in the Southside Regional Jail.

**Evidence Relied Upon:**

Policy – PREA-1 pg. 19-20  
MOU – Chesapeake Forensic Specialist, LLC.  
MOU – Greenville County Sheriff's Office  
MOU – Family/Violence Sexual Assault Unit  
Interview with Sexual Assault Nurse Examiner  
Interview with Greenville Sheriff's Office Investigator  
Inmate Educational Booklet

**Analysis/Reasoning:**

The agency is responsible for conducting administrative investigations. Usable physical evidence is collected by a Greenville County Sheriff's Office investigator. The facility secures the incident scene and allows entry only to the Greenville County Sheriff's Office Investigator. The Auditor interviewed the Greenville County Sheriff's Office Sexual Assault Investigator by telephone during the audit. The investigator informed the Auditor there were no sexual abuse/harassment allegations requiring a response from the Greenville County Sheriff's Office in the last 12 months. A response from the Sheriff's Office was needed beyond the previous 12 months in which no physical evidence was discovered.

Forensic examinations are conducted by a Sexual Assault Nurse Examiner from the Chesapeake Forensic Specialist, LLC. The Auditor contacted the Sexual Assault Nurse Examiner by telephone. The SANE explained they have not conducted forensic evidence collection for an inmate from the Southside Regional Jail in the previous 12 months. She informed the Auditor the agency does maintain a Memorandum of Understanding with the Southside Regional Jail to collect forensic evidence from sexual abuse victims. She explained the evidence collection process to the Auditor. The SANE contacts the Family/Violence Sexual Assault Unit to initiate emotional support services for inmate victims. The Auditor was informed the Sexual Assault Investigator with the Greenville County Sheriff's Office interviews the victim at the Southside Regional Memorial Hospital. Both the SANE and the Greenville County Sheriff's Office Investigator informed the Auditor a victim advocate from the Family/Violence Sexual Assault Unit is allowed to accompany the victim for emotional support. Sexual Assault Nurse Examiners are on site or on call 24/7 at the Southampton Memorial Hospital.

Facility policy prohibits charging inmates a monetary fee for the examination. Inmates interviewed by the Auditor informed they are aware services related to sexual abuse are free of charge to the inmate population. Inmates are informed of the free services in the PREA Educational Booklet. The PREA Educational Booklet further explains how the inmate population can contact those provided services and includes addresses and telephone numbers. Inmates are informed of confidentiality limits within the booklet. Posters within the facility provide the hotline number for inmates to report allegations of sexual abuse.

The facility maintains a Memorandum of Understanding with the Greenville County Sheriff's Office for conducting sexual abuse investigations within the facility. The M.O.U. requires the Greenville County Sheriff's Office to maintain a PREA hotline with a log of complaints, investigate complaints when requested, and to follow a uniformed evidence protocol which was adapted from or otherwise based on the most recent addition 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."

No state entity or Department of Justice component is responsible for investigating allegations of sexual abuse in the Southside Regional Jail.

The facility does not employ a staff member who is a qualified victim advocate.

**Conclusion:**

The facility maintains appropriate Memorandums of Understanding with the Family/Violence Sexual Assault Unit to provide victim advocacy. The facility maintains an appropriate Memorandum of Understanding with the Greenville County Sheriff's Office to conduct appropriate investigations in accordance with standard 115.21(f). Though forensic services have not been needed in the previous 12 months the Southside Regional Jail has a Memorandum of Understanding with the Chesapeake Forensic Specialist, LLC. to provide such. The SANE explained examinations are conducted to maximize usable physical evidence. The Auditor observed sufficient evidence to determine the facility meets the elements of this standard.

**Standard 115.22 Policies to ensure referrals of allegations for investigations**



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

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

**Auditor Discussion:**

The Southside Regional Jail’s policy requires an investigation of all allegations of sexual abuse and sexual harassment. The Southside Regional Jail only conducts administrative investigations of sexual abuse and sexual harassment. The PREA policy requires criminal allegations of sexual abuse and sexual harassment for referral to the Greenville County Sheriff’s Office. The facility informs the public of its investigatory responsibilities on its website.

The facility’s most recent annual report included one allegation of sexual harassment. The incident was a staff-on-inmate incident which was not criminal in nature. The incident was not referred to the Greenville County Sheriff’s Office. The facility investigator was able to substantiate the allegation.

**Evidence Relied Upon:**

- Policy – PREA-1 pg. 20-21
- Southside Regional Jail Website
- Investigative Reports
- Interviews with Investigators

**Analysis/Reasoning:**

The Auditor reviewed the investigative report of the substantiated staff-on-inmate sexual harassment incident. The allegation was substantiated the same day it was reported as the staff member admitted to the allegation. The staff perpetrator was male while the inmate victim of sexual harassment was female. The female had been released from the facility prior to the Audit and could not be interviewed by the Auditor.

The Auditor interviewed the Southside Regional Jail’s Sexual Assault Investigator. The investigator initiates contact with the Greenville County Sheriff’s Office in the event criminal charges are appropriate. Any referrals made for criminal investigation are documented within the investigator’s report. The investigator informed the Auditor all allegations of sexual abuse and sexual harassment are investigated.

The Auditor reviewed the reported information published on the Southside Regional Jail’s website. All PREA related material is published under a tab titled, “PREA.” The public can access investigative efforts in a link titled, “Allegations of Sexual Assault and/or Harassment.”

No state entity or U. S. Department of Justice component is responsible for conducting sexual assault investigations at the Southside Regional Jail.

There have been no referrals for criminal investigations of sexual abuse or sexual harassment in the previous 12 months. This was confirmed when the Auditor interviewed the Greenville County Sheriff’s Office Sexual Abuse Investigator.

**Conclusion:**

The Southside Regional Jail investigators document and make referrals of criminal acts of sexual abuse and sexual harassment directly to the Greenville County Sheriff’s Office investigator. The referral is also documented by the Sexual Abuse Incident Review Team while conducting a review of the incident. Each allegation is investigated to the fullest extent even if an inmate is released or his/her name is not known by the facility. The Auditor determined the facility meets the requirements of PREA standard 115.22.

### Standard 115.31 Employee training

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

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

#### Auditor Discussion:

The Southside Regional Jail's policy requires all staff to be trained on the elements listed in PREA Standard 115.31 (a) 1-10. The facility's training curriculum, lesson plans and Power Point presentations were reviewed by the Auditor. The training provided to all staff was in depth and sufficient to meet the elements of this standards. The Southside Regional Jail utilizes training curriculum published on the PREA Resource Center's website. The curriculum was tailored to both male and female inmates. The Auditor reviewed training records denoting all staff attended the training. Staff were required to pass a written test with an 80% or higher score. Policy requires staff to receive refresher training every two years while receiving refresher information in between those years.

#### Evidence Relied Upon:

Policy – PREA-1 pg. 21-22  
Training Curriculum  
Lesson Plans and PowerPoints  
Training Attendance Rosters  
Staff Interviews

#### Analysis/Reasoning:

The Auditor reviewed the training documents of all Southside Regional Jail staff. Staff did not specifically sign an attendance roster that notated their understanding of the information received. The Auditor did feel each employee understood the training received as each had to pass a test with 80% or higher score on the material. The Auditor recommended to the PREA Coordinator to include a statement of understanding on each training attendance sheet. The training curriculum reviewed by the Auditor meets all elements of PREA standard 115.31(a)1-10.

The Auditor interviewed random and specialized employees. Each was asked questions regarding the PREA training they received. Each Southside Regional Jail employee was able to answer the Auditor's specific questions about the facility's zero tolerance policy, employee responsibilities, right to be free from sexual abuse/harassment and retaliation, sexual abuse dynamics, reactions of victims, detection and response, avoiding inappropriate relationships, communicating with LGBTI inmates, and compliance with relevant mandatory reporting laws. The facility reported 43 staff members have received PREA training. The Auditor verified all 43 staff received PREA training by cross referencing the training attendance rosters and the current list of staff at the facility.

#### Conclusion:

All security and non-security staff in the facility have received training and passed a test on the material. The Auditor found the Southside Regional Jail meets the requirements of PREA Standard 115.31.

### Standard 115.32 Volunteer and contractor training

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

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

**Auditor Discussion:**

Facility policy mandates all volunteers and contractors who have inmate contact receive training based on the level of service provided. The facility reported 28 current volunteers and contractors who have been trained in their responsibilities under the facility’s prevention, detection and response policies. Volunteers and Contractors receive the same training all Southside Regional Jail employees receive.

**Evidence Relied Upon:**

- Policy – PREA-1 pg. 22
- Volunteer and Contractor Training Curricula
- Volunteer/Contractor Handbook
- Interviews with Volunteers and Contractors
- Training Records

**Analysis/Reasoning:**

Each volunteer/contractor receives the Southside Regional Jail’s prevention, detection and response policies through training. The Auditor reviewed training acknowledgment forms of 10 volunteers and contractors. Each volunteer and contractor is required to read and sign a PREA Disclosure Form acknowledging their understanding of the policies they have been trained in.

The Auditor interviewed both contract and volunteer personnel. Each interviewed by the Auditor was able to articulate their responsibilities of the training they received. All volunteers and contractors sign a PREA Disclosure Form which includes the Southside Regional Jail’s prevention, detection and response information.

**Conclusion:**

The facility provided documentation showing all volunteers and contractors received PREA training and signed an acknowledgment of understanding. Volunteers and contractors articulated their understanding of the facility’s zero tolerance policy and how to report incidents. The Auditor found the facility meets the requirements of this standard.

**Standard 115.33 Inmate education**

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

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

**Auditor Discussion:**

Facility policy requires inmates to receive PREA related information during the booking process. In addition, the Classification Officer meets with each inmate individually and briefly discusses PREA with each inmate. Each inmate is given the opportunity to ask questions related to sexual abuse or sexual harassment individually with the Classification Officer. The booking officer plays the PREA Educational Video on a continual loop (24/7) in the booking area. The comprehensive inmate education occurs within 30 days of each inmate’s arrival to the facility. Comprehensive inmate education is conducted through a video. Each inmate signs a form acknowledging his/her participation in the comprehensive education. The facility plays the comprehensive inmate education video daily at 2:00 pm. The facility’s PREA policy mandates PREA information be readily available or otherwise visible to the inmate population through posters, handbooks or other written form.

Information to the inmate population is provided in multiple formats. The facility utilizes a video, PREA Education Booklet, Inmate Handbook, posters and an Inmate Newsletter. All PREA material is provided in English or Spanish. The facility's PREA Education Booklet is also provided in Braille for blind inmates. The facility contracts with Language Line, Inc. for other languages. The PREA education video is provided in English and Spanish with closed captioned for the hard of hearing and plays daily at 2 p.m. in each living unit.

In the past 12 months there were 1159 inmates who received initial PREA information during the booking process.

**Evidence Relied Upon:**

- Policy – PREA pg. 22-23
- PREA Orientation Form
- PREA Educational Booklet
- PREA Video
- Inmate Newsletter
- Inmate Handbook
- PREA Posters
- Staff Interviews
- Inmate Interviews

**Analysis/Reasoning:**

Inmates are provided a PREA Educational Booklet and an Inmate Handbook upon intake. Both include information regarding the facility's zero tolerance policy and how to report sexual abuse and sexual harassment incidents. During the booking process each inmate signs a PREA Orientation Form acknowledging he/she received initial PREA information. Comprehensive training is provided within 30 days of intake. The facility documents comprehensive education attendance on a form titled, "PREA Comprehensive Inmate Education." Each inmate receiving the training must sign the form along with the staff member who ensured the training. The Auditor was supplied samples of the signed forms for the previous 12 month period. The Auditor randomly selected five inmate files and verified the inmates received comprehensive PREA education and initial PREA information.

The Auditor observed key information on posters placed within the facility. Each inmate living unit includes a poster encouraging inmates to report sexual abuse and sexual harassment. The poster includes how to report along with a toll free telephone number. The Auditor also observed an Inmate Newsletter which contains the Southside Regional Jail's prevention, detection, and response efforts. Each inmate maintains an Inmate Handbook and a PREA Educational Booklet in his/her possessions.

During interviews with inmates the Auditor was informed they received PREA information during the booking process and again in their living units. Each inmate interviewed by the Auditor was knowledgeable concerning the Southside Regional Jail's prevention, detection and response efforts. The Auditor was informed the inmates were "sick" of hearing about PREA. Several informed the Auditor they can nearly recite the video as it plays every day at 2 o'clock. Each inmate interviewed stated the PREA information was provided to them as soon as they walked through the door.

The Classification Officer informed the Auditor she ensures each inmate understands the PREA information provided by the facility. If the inmate does not understand efforts begin to ensure the information is provided through other means to ensure understanding.

The Southside Regional Jail is not required to educate inmates upon transfer as it only operates one facility.

**Conclusion:**

The facility provides and ensures all inmates benefit from PREA information and comprehensive education. Inmates were aware of the facility's prevention, detection and response efforts. Inmates receive PREA information on a daily basis while in the living unit. The facility has ensured information is made readily available to the population in written format in each inmate's possession and posted in the living units. The Auditor determined through documentation review and inmate interviews the inmate population was educated in the facility's PREA efforts and found the facility meets all requirements of PREA Standard 115.33.

**Standard 115.34 Specialized training: Investigations**

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

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

**Auditor Discussion:**

Facility policy requires special training for sexual assault investigators. Policy requires all investigators be trained for techniques for interviewing sexual assault victims, use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The facility maintains documentation of investigator training in each investigator’s training record.

The agency has 14 trained sexual assault investigators. One investigator completed the “Investigation Sexual Assault” course presented by the Moss Group, Inc. The other investigators completed training through the National Institute of Corrections, “Investigating Sexual Abuse in a Confinement Setting” course.

There is no state entity or Department of Justice component required to conduct investigations in the facility.

**Evidence Relied Upon:**

Policy – PREA-1 pg. 23-24

Training Records

Training Curriculum

Interviews with Investigators

**Analysis/Reasoning:**

The Auditor interviewed one Sexual Assault Investigator. The investigator clearly articulated proper use of Miranda and Garrity warnings, evidence to substantiate a case for prosecution and investigative findings, techniques for interviewing sexual assault victims and the facility’s evidence collection protocol.

The Auditor reviewed the training certificates of all 14 of the facility’s sexual assault investigators. The Auditor reviewed the training curricula of both sexual assault investigator courses. Both training curricula were sufficient to meet the requirements of this standard. The Auditor also reviewed the training records to ensure all 14 investigators received the PREA training offered to all employees. All 14 investigators received the training.

**Conclusion:**

The Auditor found the facility meets the requirements of this standard as each facility Sexual Assault Investigator has been properly trained to investigate sexual abuse allegations.

**Standard 115.35 Specialized training: Medical and mental health care**

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

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

**Auditor Discussion:**

Policy requires medical and mental health staff receive specialized training in addition to training mandated for employees. The training includes how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how and to whom to report allegations or

suspicions of sexual abuse and sexual harassment.

**Evidence Relied Upon:**

Policy – PREA-1 pg. 24

Training Records

Training Curriculum

Interviews with Medical/Mental Health Staff

**Analysis/Reasoning:**

The facility employs 3 medical personnel and contracts 1 mental health professional, 1 Psychiatrist and 1 Physician. The Auditor reviewed training documentation of the five persons. Each Southside Regional Jail medical staff and the mental health professional completed the National Institute of Corrections', Behavioral Health Care for Sexual Assault Victims in a Confinement Setting. The National Institute of Corrections course was designed specifically to meet the requirements of PREA standard 115.35. The facility provided the Auditor with records showing the contract physician attended the specialized medical training with the Virginia Department of Corrections.

Medical staff informed the Auditor they do not conduct forensic examinations at the facility. Forensic examinations are conducted by a Sexual Assault Nurse Examiner at the Southampton Memorial Hospital. Each medical staff and contracted personnel received the training offered to all employees in addition to the specialized medical training.

The Auditor interviewed 2 Southside Regional Jail medical and 1 contract mental health professionals. Each was knowledgeable in detecting and assessing signs of sexual abuse/harassment, preserving physical evidence, responding effectively and professionally to victims and how and to whom to report allegations or suspicions of sexual assault/harassment.

**Conclusion:**

The Auditor verified that medical and mental health personnel received training as mandated by this standard. The facility maintains documentation of the training in training records. The Auditor found the Southside Regional Jail meets the requirements of PREA standard 115.35.

**Standard 115.41 Screening for risk of victimization and abusiveness**

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

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

**Auditor Discussion:**

The Southside Regional Jail has a policy which requires all inmates be assessed during intake for their risk of being sexually abused or sexually abusive toward other inmates. The screening takes place in the booking area (normally) within hours of arriving but no later than 72 hours after arrival. The objective classification considers mental, physical, or developmental disabilities, age, physical build, previous incarcerations, exclusive nonviolent criminal history, prior convictions for sex offenses against an adult or child, perceptions of being gay, lesbian, bisexual, transgender, intersex, or gender nonconforming, previous experiences of sexual victimization, and the inmate's own perception of vulnerability. The objective screening instrument also evaluates prior acts of sexual abuse, prior convictions for violent offenses, and prior institutional violence or sexual abuse. Inmates who refuse to answer the questions are not disciplined by staff. The Southside Regional Jail does not incarcerate solely for civil immigration purposes.

The facility's PREA policy requires a reassessment of an inmates risk of victimization within 30 days of his/her booking date. Policy requires the assessment be based upon additional information received by the facility since intake, or due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Policy also limits information gained from the initial intake assessment to those with a need to know.

Evidence Relied Upon:

Policy – PREA-1 pg. 24-25

Classification and Intake Documents

Sexual Violence Assessment Tool

Victim/Predator Screening Instrument

Discipline Records

Interviews with Intake/Classification Personnel

Interview with Mental Health Professional

Interviews with Inmates

Analysis/Reasoning:

The Auditor reviewed the records of 12 inmates. All classification records reviewed by the Auditor considered all elements of PREA standard 115.41 (d)1-10 and (e). The Auditor verified 30 day reassessments were conducted and included in the classification record. Reassessments are conducted by the Classification Officer.

All information answered by inmates during the booking process is entered electronically in a jail management software on the booking computer. When inmates answer yes to assessment questions the booking officer is required to expand upon the answer. Classification staff utilize the answers to assist in the determination of vulnerability or aggressiveness. The mental health professional meets with each inmate booked into the facility. The mental health professional informed the Auditor she has not identified any inmate at high risk of vulnerability or aggressiveness. The facility had no inmate identified at risk of sexual victimization during the audit. During this audit period there were no 30 day assessments conducted which changed an inmates level of risk of victimization or aggressiveness.

Interviews with intake/classification, mental health professional and random staff and inmates revealed inmates are not disciplined for refusing to answer initial intake questions. The Auditor asked inmates during interviews about questions during the intake assessment. Each inmate recalled being answered questions related to 115.41 (d) 1-10 and 115.41 (e). Medical screening during the booking process includes questions related to sexual victimization.

Information regarding sexual victimization and sexual abusiveness is limited to classification, medical and mental health professionals and supervisory staff. Information regarding sexual victimization maintained in medical records is only accessible to medical and mental health staff.

Conclusion:

The facility is considering the information required in PREA standard 115.41 (d)1-10 and (e) to determine an inmates risk of sexual victimization or sexual abusiveness. The Southside Regional Jail maintains controls to ensure information obtained at booking is limited to select staff with a need to know. The Auditor determined the facility meets PREA standard 115.41.

**Standard 115.42 Use of screening information**

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

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

Auditor Discussion:

The Auditor reviewed facility policy which requires risk screening information be used for housing, bed, work, education, and programming assignments. This information is used to keep separate those at high risk of sexual victimization from those at high risk of sexual abusiveness. Policy mandates classification staff make individualized determinations to ensure the safety of each inmate. Policy prohibits placing gay, lesbian, bisexual, transgender and intersex inmates in dedicated living units.

Evidence Relied Upon:  
Policy – PREA-1 pg. 25-26  
Inmate Records  
Housing Logs  
Inmate Interviews  
Staff Interviews

Analysis/Reasoning:

There were no inmates identified at risk of sexual victimization or abusiveness at the time of the audit. There were no transgender or intersex inmates housed during the time of the audit. Classification documents reveal the facility considers the information obtained from the initial classification assessment to make individualized determinations to ensure the safety of each inmate. The facility has multiple male and female living units to keep separate those identified as victims from those identified as predators.

The Classification Officer and Mental Health Professional meets with each inmate to determine individual needs. During this audit period the facility had no transgender or intersex inmate housed for a period of time that would allow for a reassessment of programming, housing, bed, or work assignments. Facility policy does require a reassessment at least twice each year to review any threats to safety experienced by a transgender or intersex inmate. Each transgender and intersex inmate has the ability to shower separately from other inmates as the showers have shower curtains.

The Auditor interviewed inmates who informed they were asked questions about their sexuality during the booking process. Inmates stated they were asked if they were gay, lesbian, bisexual and identified as transgender or intersex.

Conclusion:

Facility policy requires individualized determinations on each inmate entering the facility. The facility maintains procedures to ensure identified abusers will be separated from identified victims. The Auditor determined the facility meets the requirements of this standard.

**Standard 115.43 Protective custody**

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

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

Auditor Discussion:

Facility policy prohibits placing those at high risk of sexual victimization in involuntary segregation unless all available alternatives have been made with a determination that no available alternative means of separation exist. Policy allows the facility to place a high risk inmate in involuntary segregation for less than 24 hours until an assessment can be conducted. Any restrictions to programs, privileges, education, or work opportunities are documented with the duration, reasons and opportunities restricted.

Facility policy requires involuntary segregation of a high risk inmate only until an alternative means of separation from abusers can be arranged. In this event the facility documents the basis for concern for the inmate’s safety and the reason why no alternative means of separation can be arranged. A requirement exists in the policy to afford each such inmate a 30 day review to assess a continued need of separation from the general population.

Evidence Relied Upon:  
Policy – PREA-1 pg. 26-27  
Housing Records  
Interviews with staff  
Interviews with inmates



**Analysis/Reasoning:**

At the time of the audit there were no inmates identified at high risk of sexual victimization. The facility has not had a need to place an inmate at high risk of sexual victimization in involuntary segregation. All inmates in segregation are afforded programs, privileges, education and work opportunities to the extent possible. Housing records reveal no inmate determined at high risk of victimization was placed involuntarily in segregation. The facility maintains various secured living units to ensure those identified at high risk of victimization are protected from abusers without being placed in involuntary segregation. The Auditor toured each living unit and observed the various area.

Classification staff informed the Auditor she would not leave an inmate identified at high risk of sexual victimization in involuntary segregation for more than 30 days. No inmate at the Southside Regional Jail has been identified at high risk of victimization in the previous 12 months.

**Conclusion:**

The Auditor found no record of an inmate identified at high risk of victimization being placed in involuntary segregation for his/her protection. It was determined the facility maintains appropriate controls to ensure victims are protected while maintaining access to programs, privileges, education and work opportunities to the extent possible. The Classification Officer is aware and facility policy requires an assessment within 24 hours and maintains a requirement not to ordinarily exceed 30 day placement in involuntary segregation with a 30 day review in the event a high risk inmate is confined in segregation involuntarily. The Auditor found the facility meets the requirements of PREA standard 115.43.

**Standard 115.51 Inmate reporting**

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

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

**Auditor Discussion:**

The Southside Regional Jail provides multiple ways for inmates to privately report sexual abuse and sexual harassment, retaliation by inmates or staff, and staff neglect or violation of responsibilities which may have contributed to sexual abuse/harassment. The inmate population can report by writing a request, grievance, or verbally informing any staff member, utilizing the PREA Hotline, or by writing or verbally informing a third party. Staff are required by policy to accept reports made verbally, in writing, anonymously and from third parties and required to document such reports promptly.

Staff can privately report incidents of sexual abuse or sexual harassment either by verbally informing or writing any facility supervisor at any level of the chain of command. Staff may also privately report sexual abuse or sexual harassment by calling the hotline number.

**Evidence Relied Upon:**

- Policy – PREA pg. 27-28
- MOU – Greenville County Sheriff’s Office
- PREA Educational Booklet
- PREA Orientation Form
- Incident Report
- Inmate Interviews
- Staff Interviews

**Analysis/Reasoning:**

The Auditor reviewed a verbal allegation that was made to a staff member. The staff member accepted the verbal report and immediately informed a supervisor. The staff member completed an Incident Report and submitted it the same day the verbal allegation was received.

The Auditor formally interviewed 11 inmates and informally asked 3 inmates about their sexual abuse and sexual harassment reporting avenues. All 14 inmates were able to articulate the various means of reporting sexual abuse and sexual harassment. Each inmate was aware they could make a report anonymously. The Auditor asked inmates if they felt confident staff would ensure an allegation is taken seriously. Each inmate stated they had staff they were confident in. The overwhelming majority reported that staff take allegations seriously in the Southside Regional Jail.

Inmates were also aware of the hotline number provided for reporting as they informed the Auditor it is posted in their living units. The PREA Educational Booklet provides 2 hotline numbers for inmate reporting of sexual abuse and sexual harassment. One number is monitored by the Greenville County Sheriff's Office while the other is monitored by the Family Violence and Sexual Assault unit. The Family Violence and Sexual Assault Unit is a community based organization. The handbook specifies which number the Family Violence and Sexual Assault Unit monitors.

The Auditor formally interviewed staff and asked 12 staff members how they could privately report sexual abuse and sexual harassment. All staff informed the Auditor they would privately inform their supervisor. Each felt they could report higher in the chain of command if needed. The Auditor was informed by most staff they could also utilize the hotline number.

The facility does not confine inmates solely for civil immigration purposes.

#### Conclusion:

The Southside Regional Jail provides ample avenues for inmates to report sexual abuse and sexual harassment allegations. Staff and the inmate population are aware of all reporting avenues. Staff understand their responsibilities when receiving an allegation from an inmate. The Auditor determined the facility meets the requirements of PREA standard 115.51.

### **Standard 115.52 Exhaustion of administrative remedies**

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

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

#### Auditor Discussion:

The Southside Regional Jail accepts grievances alleging sexual abuse. The facility's PREA policy does not impose a time limit for accepting grievances related to sexual abuse. The policy does not require an inmate to exhaust informal means prior to submitting a grievance related to sexual abuse. No inmate is required to resolve or submit a sexual abuse grievance with or to the staff member who is the subject of complaint.

The facility's PREA policy requires a final decision rendered within 90 days, excluding time consumed by inmates in appeal preparations. Policy allows for an extension up to 70 days in the event 90 days was insufficient to render a decision. The facility must inform the inmate in writing and provide a date the decision will be made. Policy allows for third parties to assist and/or file for administrative remedies regarding sexual abuse on behalf of inmates if the inmate agrees and personally pursues subsequent steps in the process. A declination from the inmate will be documented in writing by the facility.

The facility's PREA policy requires emergency grievances alleging a substantial risk of imminent sexual abuse be forwarded to the Shift Commander. An initial response is required within 48 hours with a final decision made within 5 calendar days. If a grievance alleging sexual abuse is filed in bad faith the inmate may be disciplined.

#### Evidence Relied Upon:

Policy – PREA-1 pg. 28-29

Grievance Log

Inmate Interviews

Staff Interviews

PREA Audit Report

**Analysis/Reasoning:**

The facility has had no grievances alleging sexual abuse during this audit period. The Auditor interviewed staff regarding an inmate alleging a substantial risk of imminent sexual abuse. Each staff member stated they would immediately ensure the inmate is separated and protected and inform a supervisor. Supervisors informed the Auditor they would ensure the inmate is protected by making housing changes if needed and inform the Sexual Assault Investigator.

**Conclusion:**

The Auditor determined the Southside Regional Jail maintains controls to ensure grievances alleging sexual abuse are handled appropriately. Staff understand their responsibilities to ensure inmates alleging a risk of imminent sexual abuse are protected. The Auditor found the facility meets the requirements of this standard.

**Standard 115.53 Inmate access to outside confidential support services**

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

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

**Auditor Discussion:**

The facility has a policy requiring inmate access to community service providers who perform emotional support services to inmate victims of sexual abuse. The facility maintains a Memorandum of Understanding with the Family Violence and Sexual Assault Unit to provide emotional support services.

**Evidence Relied Upon:**

- Policy – PREA-1 pg. 29-30
- PREA Educational Booklet
- MOU – Family/Violence Sexual Assault Unit
- Inmate Interviews
- Staff Interviews

**Analysis/Reasoning:**

The Family Violence and Sexual Assault Unit provides a toll free hotline number for the inmate population for victim advocacy. The hotline number is included in the PREA Educational Booklet each inmate receives. The facility has included the address and phone number of the Family Violence and Sexual Assault Unit in the booklet. The booklet explains communications with the Family Violence and Sexual Assault Unit are kept in as confidential manner as possible and only released to authorities in accordance with mandatory reporting laws. The facility allows confidential meetings with the advocate and inmate when requested by the Family Violence and Sexual Assault Unit.

A majority of inmates interviewed were aware the Family Violence and Sexual Assault Unit provides victim advocates for emotional support services to the inmate population. To date no inmate has requested emotional support services from the Family Violence and Sexual Assault Unit.

**Conclusion:**

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

### Standard 115.54 Third-party reporting

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

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

#### Auditor Discussion:

Facility policy mandates Southside Regional Jail staff accept third party reports both verbally and in writing. The policy requires information regarding third party reporting procedures be published on its website.

#### Evidence Relied Upon:

Policy – PREA-1 pg. 30  
Inmate Interviews  
Facility Website

#### Analysis/Reasoning:

The Southside Regional Jail's website informs the public to call the confidential reporting hotline. The number for the hotline is listed on the facility's website. The website also gives the address to the facility where the public can write a letter addressed to the PREA Coordinator and lists the facility telephone number. The facility has another option for the public who can write or call the Greenville County Sheriff's Office. The address and telephone number of both are listed on the website. The public is informed they can remain anonymous when filing a report.

There were no third party complaints made on behalf of an inmate reported to the facility in the past 12 months.

#### Conclusion:

Inmates interviewed by the Auditor are aware of the facility's third party reporting procedures. Third party reporting information is listed on the Southside Regional Jail's website. The Auditor found the facility meets the requirements of PREA standard 115.54.

### Standard 115.61 Staff and agency reporting duties

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

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

#### Auditor Discussion:

The facility policy requires all staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to their immediate supervisor and/or any other supervisor up to and including Captain, Major, Assistant Superintendent or Superintendent. The policy requires staff to immediately report knowledge of retaliation against inmates or staff and any staff neglect or violation that may have contributed to an incident of sexual abuse or sexual harassment or retaliation. Staff are prohibited from informing anyone other than to the extent necessary to make treatment, investigation and other security and management decisions.

Medical and mental health practitioners in the facility are mandatory reporters when learning of sexual abuse that occurred in a facility. Medical and mental health practitioners are required by policy to inform inmates of their duty to report and limitations of confidentiality at the initiation of services.

Evidence Relied Upon:  
Policy – PREA-1 pg. 30-31  
Investigative Reports  
Incident Reports  
Interviews with Staff

**Analysis/Reasoning:**

The Auditor reviewed an investigative report that shows a staff member immediately reported a staff-on-inmate sexual harassment allegation received verbally from an inmate. A supervisor then reported the allegation to a staff Sexual Assault Investigator who conducted a swift investigation. The investigator determined the allegation was substantiated on the same day the allegation was reported. The staff member is no longer employed at the Southside Regional Jail.

All staff interviewed by the Auditor articulated the facility's requirement to immediately report information regarding sexual abuse, sexual harassment, retaliation and staff neglect or violation of responsibilities which may have contributed. Staff were well aware of the facility's requirement to maintain confidentiality regarding a sexual abuse or sexual harassment incident. Staff informed the Auditor they only report the information to their supervisor, investigator, classification and medical personnel.

All medical staff and mental health contractors interviewed informed the Auditor they are considered mandatory reporters. Medical and mental health practitioners provide limitations of confidentiality at the initiation of services. The Auditor reviewed medical files of 3 inmates who reported experiencing sexual victimization in the community. None of the 3 inmates gave informed consent for the medical staff to report the victimization.

The facility does not house inmates under the age of 18.

**Conclusion:**

All staff, including medical and mental health practitioners are aware of the facility's reporting and confidentiality requirements. The Auditor determined the Southside Regional Jail meets the requirements of this standard.

**Standard 115.62 Agency protection duties**

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

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

**Auditor Discussion:**

Facility policy requires staff to take immediate steps to ensure the safety of an inmate who is at substantial risk of imminent sexual abuse.

Evidence Relied Upon:  
Policy – PREA-1 pg. 31  
Classification Documents  
Staff Interviews

**Analysis/Reasoning:**

The facility reported no inmate was determined at substantial risk of imminent sexual abuse in the last 12 months. All staff interviewed by the Auditor informed they would immediately separate the intended victim from the population and inform their supervisor. Classification staff informed another housing assignment would be made if warranted. Supervisory staff informed the Auditor they will move an inmate at

substantial risk of imminent sexual abuse to another housing unit if warranted. The facility has various areas to ensure inmates who may be at substantial risk of imminent sexual abuse are protected.

**Conclusion:**

The facility has procedures in place to protect inmates who are at substantial risk of imminent sexual abuse. The Auditor found the facility meets the requirements of PREA standard 115.62.

**Standard 115.63 Reporting to other confinement facilities**

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

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

**Auditor Discussion:**

The Southside Regional Jail’s PREA policy requires notification to other confinement facilities where a sexual abuse incident occurred. The PREA policy mandates the notification be made within 72 hours after receiving the allegation and ensures the notification is documented. When receiving notification from another facility that a Southside Regional Jail inmate alleged sexual abuse the Superintendent, or designee in her absence, ensures the allegation is investigated.

**Evidence Relied Upon:**

Policy – PREA-1 pg. 31

**Analysis/Reasoning:**

The Southside Regional Jail has not received notification from other agencies that a Southside Regional Jail inmate had alleged sexual abuse during this audit period. In the absence of the Superintendent, the Assistant Superintendent is designated to notify the other agency within 72 hours of receiving the allegation.

**Conclusion:**

The Auditor determined the Southside Regional Jail meets the requirements of PREA standard 115.63.

**Standard 115.64 Staff first responder duties**

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

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

**Auditor Discussion:**

Facility policy mandates first responders separate an alleged victim and abuser and preserve and protect the crime scene until the Greenville County Sheriff’s Office can collect evidence. The facility’s PREA policy requires first responders to request the victim and ensure the

abuser not take actions to destroy physical evidence. Non-security staff are required to request the victim not take actions to destroy evidence and immediately inform a security staff member.

Evidence Relied Upon:

- Policy – PREA-1 pg. 31-32
- Training Records
- Interviews with Staff
- Interviews with Inmates
- Interviews with Contractors
- Interviews with Volunteers

Analysis/Reasoning:

The Auditor interviewed security and non-security staff with the potential to be first responders following an incident of sexual abuse. All security staff informed the Auditor they would ensure the victim is separated from the aggressor and immediately notify their supervisor. The staff reported they would inform the victim not to bath, brush their teeth, change clothes, use the restroom, drink or eat. The security staff members informed the Auditor they would secure the scene and not allow anyone entrance other than the Greenville County Sheriff's Office Sexual Assault Investigator. The Auditor was informed the staff would ensure a log would be maintained of who, when and why the scene was entered, including any item removed from the scene.

Non-security staff interviewed by the Auditor informed they would immediately notify a security staff member and request the victim not take actions to destroy evidence.

Supervisors interviewed by the Auditor informed they would ensure the victim was separated from the abuser and ensure the victim receives immediate medical care. Supervisors informed the Auditor they would inform a Sexual Assault Investigator and request the victim be transported to the Southampton Memorial Hospital for forensic evidence collection.

Supervisors and medical staff interviewed are aware of first responder duties which include requesting and ensuring actions are not taken that would destroy usable physical evidence. The Auditor reviewed all staff, contractor and volunteer training records to verify first responder training had been received by each.

The facility reported no incident in which staff first responder duties were initiated during this audit period. The facility had one allegation of staff-on-inmate sexual harassment in the past 12 months which did not require first responder duties.

Conclusion:

Security and non-security staff, volunteers and contractors at the Southside Regional Jail have been trained and understand their responsibilities during first response to sexual abuse incidents. Staff, volunteers and contractors displayed their knowledge of those duties to the Auditor through interviews. The Auditor found the facility meets the requirements of PREA standard 115.64.

**Standard 115.65 Coordinated response**

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

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

Auditor Discussion:

The Southside Regional Jail has a written plan that coordinates actions taken in response to an incident of sexual abuse. The plan includes actions listed for volunteers, contractors, support staff, security first responders, Shift Commander, medical/mental health, investigative staff, PREA Coordinator, and facility leadership.

Evidence Relied Upon:  
Policy – PREA-1 pg. 32  
Coordinated Response Plan  
Staff Interviews

**Analysis/Reasoning:**

The Southside Regional Jail’s plan includes actions each position must take following an incident of sexual abuse. The Auditor conducted interviews with various staff who perform the roles included in the plan. The staff are aware of the plan and their responsibilities detailed in the plan.

**Conclusion:**

The Southside Regional Jail maintains an appropriate response plan that coordinates staff actions following an allegation of sexual abuse. The Auditor determined the facility meets PREA standard 115.65.

**Standard 115.66 Preservation of ability to protect inmates from contact with abusers**

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

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

**Auditor Discussion:**

No agency is responsible for collective bargaining at the Southside Regional Jail. The facility’s PREA policy prohibits the facility from entering into collective bargaining agreements that limit its ability to remove staff from contact with inmates pending the outcome of an investigation.

Evidence Relied Upon:  
Policy – PREA-1 pg. 32

**Analysis/Reasoning:**

Virginia is a “right to work” state and therefore not a collective bargaining one. No governmental entity is responsible for collective bargaining on behalf of the facility. No staff member has been accused of sexual abuse during this audit period.

**Conclusion:**

Virginia code 40.1 - 57.2 prohibits state, county, and municipalities from collective bargaining or entering into a collective bargaining contract with a union with respect to any matter relating to an agency or their employment service. The facility maintains appropriate policies to ensure inmate victims are protected from alleged staff abusers. The facility meets the requirements of this standard.

**Standard 115.67 Agency protection against retaliation**

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



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

**Auditor Discussion:**

The Southside Regional Jail’s PREA policy addresses the protection of inmates against retaliation from staff and inmates. Protection measures included in the policy are housing changes, transfers, removal of staff or inmates from inmate sexual abuse/harassment victims and emotional support services. Facility policy requires the Chief of Security, or his/her designee monitor all acts of possible retaliation. The period of retaliation monitoring will be conducted for a minimum of 90 days.

**Evidence Relied Upon:**

- Policy – PREA-1 pg. 32-33
- Inmate Records
- Staff Interviews
- Inmate Interviews

**Analysis/Reasoning:**

The Auditor interviewed one staff member who conducts retaliation monitoring. The staff member informed the Auditor monitoring of retaliation normally takes place for 90 days but will be extended beyond 90 days if a continuing need exists. The Auditor was informed monitoring occurs until a threat of retaliation no longer exists.

The monitoring process includes a review of discipline reports, housing assignments, program assignments, Incident Reports, grievances, staff evaluations, staff post assignments and formal and informal status checks on inmates.

The facility reported no incidents of retaliation against staff or inmates in the previous 12 months. There were no inmates currently incarcerated in the facility who reported an allegation of sexual abuse or sexual harassment suffered within the facility for the Auditor to interview. Random inmates interviewed by the Auditor stated the facility takes allegations serious and feel confident allegations are handled appropriately.

**Conclusion:**

The Auditor determined the Southside Regional Jail meets the requirements of this standard.

**Standard 115.68 Post-allegation protective custody**

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

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

**Auditor Discussion:**

The Southside Regional Jail’s PREA policy allows inmate access to programs, privileges, education, and work opportunities, to the extent possible when inmate victims of sexual abuse are placed in segregation involuntarily. The policy mandates the requirements of PREA Standard 115.43 for all involuntarily segregated victims of sexual abuse.

**Evidence Relied Upon:**

- Policy – PREA-1 pg. 33
- Inmate Segregation Form
- Housing Records

Analysis/Reasoning:

In the event an inmate is placed in segregation after suffering sexual abuse the facility completes an Inmate Segregation Form. The form requires staff to document the reason for placement, programs available and any reasons for limitations. The form includes a 30 day reassessment. In the event the sexual abuse inmate victim request segregated housing the staff member documents on the form and the inmate signs agreeing to placement in segregation. The form is maintain in the inmates record.

The facility has not placed an inmate victim in involuntary segregation during this audit period. There has been no inmate victim requesting placement in segregation during the previous 12months. The facility maintains other viable housing options for protecting inmate victims of sexual abuse. The Auditor reviewed segregation records and did not observe inmate victims currently housed in segregation.

Conclusion:

The facility maintains procedures to ensure inmate sexual abuse victims placed involuntarily in segregation are afforded opportunities and privileges. The Auditor determined the facility meets the requirements of this standard.

**Standard 115.71 Criminal and administrative agency investigations**

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

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

Auditor Discussion:

The facility’s policy allows for staff who have received specilized training to conduct administrative sexual abuse/harassment investigations. Policy mandates a referral of criminal allegations of sexual abuse/harassment to the Greenville County Sheriff’s Office for criminal investigation. The Southside Regional Jail’s PREA policy requires all sexual abuse/harassment allegations be investigated promptly, thoroughly, and objectively. The requirement remains the same for all third-party and anonymous reports of sexual abuse and sexual harassment.

Facility investigators are required to gather and preserve direct and circumstantial evidence, including physical and DNA evidence, available electronic monitoring data and interview alleged victims, suspected perpetrators, and witnesses. Inmates are not required to submit to polygraph examinations as a condition for proceeding with a sexual assault/harassment investigation.

The agency currently employs 14 sexual abuse trained investigators.

Evidence Relied Upon:

- Policy – PREA-1 pg. 33-35
- Interviews with Investigators
- Investigative Staff Training Records
- Investigative Reports

Analysis/Reasoning:

The Auditor interviewed one of the Southside Regional Jail’s sexual assault investigators. The Auditor reviewed the training files of all 14 sexual assault investigators. The facility’s sexual assault investigators have received appropriate training to conduct sexual assault/harassment investigations.

The investigator informed the Auditor she gathers and preserves direct and circumstantial evidence, interviews staff and inmate witnesses, inmate victims, inmate abusers, and reviews any prior complaints and reports of sexual abuse involving the alleged abuser. The investigator informed the Greenville County Sheriff’s Office is immediately notified when she learns criminal charges may be placed on the abuser. The investigator informed the Auditor she ceases interviews regarding the allegation after making the referral to the Greenville County Sheriff’s Office.

The Auditor discussed how credibility is determined with the investigator. The investigator informed she determines credibility on an individual basis with the abuser, victim and any witnesses, including staff witnesses. The investigator's credibility assessment is based on a review of Incident Reports, grievances, Inmate Request Forms, and considers any information previously supplied by the inmate, discipline history, criminal history and any other relevant material to help determine credibility.

The facility reported 1 allegation during the previous 12 months. The allegation was a staff-on-inmate allegation of sexual harassment. The Auditor reviewed the investigative report. The Auditor determined the investigation began promptly and was thorough and objective. The investigation was concluded the same day the allegation was received. The report included physical and testimonial evidence and maintained copies of documentary evidence. Staff actions were the cause of the allegation. Facts and findings were included in investigative reports.

The investigative report did not include a credibility assessment as the staff member admitted to the allegation. After reviewing the investigative report the Auditor informed the investigator and the PREA Coordinator to ensure credibility assessments are conducted and documented in investigative reports when investigations are not as "cut and dry." The Auditor was informed credibility assessments will be documented in future reports. The Auditor recommended to train all investigators how to conduct and document credibility assessments.

The investigator informed the Auditor all allegations are investigated to the fullest extent even if the inmate is released. This is true of all investigations even when a staff member terminates employment. The Southside Regional Jail is located next to the Greenville County Sheriff's Office. The investigator stated the facility has a good relationship with the sheriff's office so remaining informed during a criminal investigation of sexual abuse is not an issue.

The Southside Regional Jail maintains a Memorandum of Understanding with the Greenville County Sheriff's Office to conduct sexual abuse investigations. The Southside Regional Jail maintains all investigative reports in a locked cabinet in a locked office for a minimum of 5 years after an inmate is released from custody or after a staff member terminates employment.

No state entity or Department of Justice component is responsible for conducting sexual abuse investigations in the Southside Regional Jail.

**Conclusion:**

The facility maintains documentation and investigations are conducted according to this standard. The facility sexual assault investigator who conducted all investigations in the past 12 months is knowledgeable of the requirements of this standard. The Auditor determined the facility meets PREA Standard 115.71.

**Standard 115.72 Evidentiary standard for administrative investigations**

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

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

**Auditor Discussion:**

The Southside Regional Jail's PREA policy places no standard higher than a preponderance of evidence to substantiate an allegation of sexual abuse or sexual harassment.

**Evidence Relied Upon:**

Policy – PREA-1 pg. 35

Interviews with Investigators

**Analysis/Reasoning:**

The Auditor interviewed a Southside Regional Jail Sexual Assault Investigator who described preponderance as the standard of evidence for sexual abuse/harassment investigations. The Auditor reviewed 1 investigative file in which a preponderance of evidence was the standard.

Conclusion:

The Auditor determined the Southside Regional Jail meets the requirements of PREA standard 115.72.

**Standard 115.73 Reporting to inmates**

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

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

Auditor Discussion:

The Southside Regional Jail has a policy which mandates an inmate victim of sexual abuse or sexual harassment will be informed of the results of a sexual abuse or sexual harassment investigation. Notification is required when the investigation is determined substantiated, unsubstantiated or unfounded. For incidents of staff-on-inmate allegations, the inmate is informed when the staff member is no longer posted within the inmate’s unit, staff member is no longer employed at the facility, has been indicted on a charge, or has been convicted of a charge related to sexual abuse. For incidents of inmate-on-inmate allegations, policy requires the inmate be notified when the abuser has been indicted on a charge or convicted of a charge related to sexual abuse within the facility. The facility documents notification on a form titled, “PREA Investigation Form.”

Evidence Relied Upon:

- Policy – PREA-1 pg. 35
- Allegation of Sexual Abuse – Report to Inmate Form
- Notifications to Inmates
- Investigative Records
- Interviews with Investigators

Analysis/Reasoning:

The Auditor reviewed the investigative documents of the 1 allegation reported during the previous 12 month period. The inmate alleged staff-on-inmate sexual harassment. The inmate received notification of the investigative results 4 days after making the allegation. The investigator delivered the written notification to the inmate in person. The allegation was substantiated and did not require notification of criminal investigation by to the Greenville County Sheriff’s Office. The allegation was recorded as a staff-on-inmate sexual harassment and reported on the annual report published on the facility website. The facility had no unfounded or unsubstantiated allegations in the previous 12 months.

Conclusion:

The facility maintains a form to ensure inmates remain informed of investigative results. The facility investigator did inform the inmate who made the only allegation of sexual abuse or sexual harassment in the last 12 months. The Auditor found the facility meets the requirements of this standard.

**Standard 115.76 Disciplinary sanctions for staff**

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

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

**Auditor Discussion:**

The facility’s PREA policy includes discipline sanctions for staff who violate sexual abuse or sexual harassment policies. The facility stipulates termination as the presumptive discipline sanction for staff who engage in sexual abuse. Policy requires sanctions to be commensurate with the nature and circumstances of the act committed, discipline history, and sanctions imposed for comparable offenses committed by other staff. Facility policy requires notification to the Greenville County Sheriff’s Office when staff are terminated or resign when facing termination for violating sexual abuse or sexual harassment policies.

**Evidence Relied Upon:**

Policy – PREA-1 pg. 36  
Interviews with Executive Staff

**Analysis/Reasoning:**

The facility has not terminated a staff member for violating sexual abuse or sexual harassment policies. The Southside Regional Jail had 1 staff member who admitted violating the facility’s sexual harassment policies after an inmate reported an allegation. The staff member immediately resigned. The investigative report reviewed by the Auditor revealed a recommendation to terminate the employee. The act was not criminal in nature.

Command staff are proactive towards adherence with the PREA standards. Command staff are fully aware of their requirement to notify the Greenville County Sheriff’s Office and relevant licensing bodies when staff resign or are terminated for violating sexual abuse policies.

**Conclusion:**

The facility’s leadership assures staff are appropriately disciplined for violating sexual abuse and sexual harassment policies. The facility has appropriate policies and measures to ensure staff are appropriately disciplined for violating sexual abuse and sexual harassment policies. The Auditor found the facility meets the requirements of this standard.

**Standard 115.77 Corrective action for contractors and volunteers**

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

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

**Auditor Discussion:**

The facility has a policy requiring the Greenville County Sheriff’s Office be notified when a contractor or volunteer violates the facility’s sexual abuse policies; unless the act is not criminal in nature. Contractors and volunteers will be prohibited from inmate contact for violating those policies. If the act committed is clearly not criminal, the facility considers other appropriate remedial measures and considers further contact with inmates.

**Evidence Relied Upon:**

Policy – PREA-1 pg. 36  
Interviews with Volunteers and Contractors

Analysis/Reasoning:

There have been no sexual abuse or sexual harassment allegations against a contractor or volunteer in the past 12 months. All volunteers and contractors interviewed by the Auditor were aware of the facility's zero tolerance policy and has received training in such policies. All volunteers and contractors sign an acknowledgement which explains the facility's sexual abuse and sexual harassment policies and the corrective action steps for violating the policies. Command staff notify licensing bodies including, but not limited to, the Virginia Board of Nursing, chaplaincy boards, counseling boards, etc.

Conclusion:

The Southside Regional Jail has not had a need to take corrective action against a volunteer or contractor. There is a policy in place in the event corrective action against a contractor or volunteer is needed. The Auditor determined the facility meets this standard.

**Standard 115.78 Disciplinary sanctions for inmates**

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

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

Auditor Discussion:

The facility's PREA policy subjects inmates to discipline sanctions after a disciplinary hearing or following a criminal finding of guilt for an inmate-on-inmate sexual abuse. Discipline sanctions for engaging in inmate-on-inmate sexual abuse are commensurate with the nature and circumstances of the abuse committed, the inmate's discipline history, and the sanctions for comparable offenses by other inmates with similar histories. Policy requires consideration of mental disabilities or mental illness contributions of an inmate-on-inmate sexual abuse incident when determining sanctions. The Southside Regional Jail does not deem an act as sexual abuse if the activity was not coerced. Inmates will not be disciplined for sexual contact with staff when the staff member consented to the act. The Southside Regional Jail prohibits sexual activity between inmates.

Evidence Relied Upon:

Policy – PREA-1 pg. 36-37  
PREA Educational Booklet  
Discipline Records  
Staff Interviews

Analysis/Reasoning:

There were no inmates disciplined for reporting sexual abuse in the past 12 months. No inmate has been disciplined for inmate-on-inmate sexual abuse in the past 12 months. The inmate PREA Educational Booklet explains inmates will be disciplined for violating the facility's sexual abuse and sexual harassment policies.

An interview with the mental health professional reveals she attempts to correct underlying reasons or motivations for committing sexual abuse in perpetrators. She explained the participation of a perpetrator is not required. There were no reports filed which were determined by the facility as false or frivolous reporting. No inmate has been disciplined for filing a report in bad faith.

Conclusion:

The Southside Regional Jail has procedures in place to ensure inmates are appropriately disciplined for violation of sexual abuse and sexual harassment policies. The Auditor determined the facility meets the requirements of this standard.

## Standard 115.81 Medical and mental health screenings; history of sexual abuse

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

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

### Auditor Discussion:

The Southside Regional Jail mandates a 14 day follow up with medical or mental health professionals for inmates who reported suffering sexual abuse in an institutional or community setting during the booking process. The PREA policy strictly limits victimization or abusiveness information to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions such as, housing, bed, work, education, and program assignments. Medical and mental health professionals are required by policy to obtain informed consent from inmates who reported suffering sexual victimization in a community setting.

### Evidence Relied Upon:

Policy – PREA-1 pg. 37  
Inmate Medical Records  
Inmate Classification Records  
Interviews with Inmates

### Analysis/Reasoning:

While in the medical area the Auditor reviewed the files of 3 inmates who reported suffering sexual victimization in a community setting. All 3 inmates were offered a follow up with the mental health professional within 14 days. The longest time expired before receiving a follow up was 4 days. This was an inmate who was booked prior to a weekend. The mental health professional interviews every inmate booked into the facility.

The mental health professional interviewed by the Auditor informed she sees every inmate coming into the facility. She conducts a vulnerability assessment on each. The mental health professional is knowledgeable regarding informed consent when receiving a report of victimization suffered in a community setting. She stated she is a mandatory reporter when inmates inform of suffering sexual victimization in an institutional setting. She reports the victimization suffered in an institutional setting directly to the Classification Officer so appropriate housing, programming and work assignments can be established. She also explains to each inmate he/she can submit a request for further counseling sessions with her. The mental health professional establishes no maximum length of time she will continue to counsel an inmate. Inmates who reported suffering sexual abuse in a community setting must give signed written consent prior to the mental health professional reporting the victimization.

The Auditor spoke to one inmate who reported suffering sexual abuse in a community setting. The inmate informed the Auditor a follow up was offered by the mental health professional. There were no inmates currently at the Southside Regional Jail who reported suffering sexual abuse in a confinement setting.

The Auditor interviewed 2 nursing staff. They informed the Auditor they ask limited questions regarding sexual abuse history. They explained the mental health professional conducts a more detailed assessment of each inmate. Medical staff were aware they must get written informed consent from an inmate who reported suffering sexual abuse in a community setting. Medical staff were also aware they are considered mandatory reporters when learning an inmate suffered sexual abuse in a confinement setting. All records related to victimization are maintained securely and are limited to key personnel.

### Conclusion:

The Southside Regional Jail ensures inmate information related to sexual victimization is securely maintained and access is restricted to those who must make decisions for inmate housing, programming, work and treatment. The Auditor verified the facility is offering each inmate victim a 14 day follow up with the mental health professional. Medical and mental health staff are aware of confidentiality limitations and informed consent requirements. The Auditor found the facility meets the requirements of this standard.

## Standard 115.82 Access to emergency medical and mental health services

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

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

### Auditor Discussion:

The Southside Regional Jail's PREA policy requires victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Policy mandates staff first responders to take preliminary steps to protect inmate victims and immediately notify the medical and mental health professionals following a sexual abuse incident. Policy prohibits the facility from receiving financial compensation from an inmate victim for treatment services related to sexual abuse, even if he/she fails to name the abuser or cooperate with the investigation.

### Evidence Relied Upon:

Policy – PREA-1 pg. 37-38

MOU – Family/Violence Sexual Assault Unit

Security Staff Interviews

Medical Staff Interviews

Inmate Interviews

### Analysis/Reasoning:

Non-security staff members informed the Auditor they would immediately notify a security member in the event they learn of a sexual abuse incident. Security first responders informed the Auditor they immediately separate the victim from the abuser and notify their supervisor. The Auditor interviewed supervisors who informed they ensure inmate victims of sexual abuse receive immediate medical care.

The Southside Regional Jail employs 3 medical personnel. The medical personnel rotate “on call” status in the event incidents occur during off hours. Facility supervisors can call 911 to activate emergency medical services in the event services are needed when medical staff are not in the facility.

The facility maintains a Memorandum of Understanding with the Family Violence and Sexual Assault Unit to provide emotional support services to inmate victims of sexual abuse. Initiation of emotional support services are initiated by the Sexual Assault Nurse Examiner. Inmates may call or write the Family Violence and Sexual Assault Unit for emotional support. Representatives from the Family Violence and Sexual Assault Unit meet victims at the Southampton Memorial Hospital to provide crisis intervention services. The Southside Regional Jail maintains 1 mental health professional contractor who provides mental health services to inmate victims.

Emergency contraception and sexually transmitted infections prophylaxis are offered during the forensic examination. The Auditor confirmed this with a telephone interview with the Sexual Assault Nurse Examiner. There have been no inmates offered emergency contraception or sexually transmitted infection prophylaxis in the previous 12 months. Medical staff informed the Auditor they do not charge inmates a fee for any service related to sexual abuse victimization.

Inmates interviewed by the Auditor were aware medical services related to sexual assault are free to the inmate victim.

### Conclusion:

The facility has procedures in place to ensure inmate victims of sexual assault receive appropriate medical services and after care interventions. The facility notifies inmates of these services through the PREA Educational Handout. The Auditor found the facility meets PREA standard 115.82.



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

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

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

#### Auditor Discussion:

The facility’s PREA policy requires medical and mental health evaluations be offered to all inmates who have suffered sexual abuse in a jail, prison, lockup or juvenile facility. Policy includes follow-up services, treatment plans, and when necessary, referrals for continued care. Inmates are not required to pay for medical or mental health services related to sexual abuse at the Southside Regional Jail..

#### Evidence Relied Upon:

Policy – PREA-1 pg. 38-39  
Interviews with Medical Staff  
Interviews with Inmates

#### Analysis/Reasoning:

There were no inmates incarcerated at the time of the Audit who had reported suffering sexual abuse in a confinement facility. The facility has not had a need to provide ongoing medical or mental health services to an inmate victim of sexual abuse. The Auditor reviewed medical files of 3 inmates who reported suffering sexual abuse in the community. All 3 were offered followup services with a mental health professional.

The mental health professional informed the Auditor all victims are offered evaluations. She further explained she attempts to counsel and work with sexual abusers to determine underlying causes of their actions. The mental health professional stated she creates treatment plans, follow-up services and referrals for continued care if needed. Both medical and mental health staff felt services are consistent with a community level of care.

Medical staff informed the Auditor pregnancy tests are offered to female victims of sexual abuse. They also offer timely and comprehensive information about and timely access to lawful pregnancy-related services. The Auditor discussed the use of the “morning after” pill. Medical staff will offer the morning after pill to female victims who become pregnant as a result of sexual abuse. Inmate victims of sexual assault are offered sexually transmitted infection testing. Inmates interviewed by the Auditor are aware services related to sexual abuse are free to the inmate population.

#### Conclusion:

The Southside Regional Jail provides adequate and ongoing medical and mental health care to inmate victims of sexual abuse that are consistent with medical care provided in the community. The services provided include follow ups, treatment plans and referrals when appropriate. All female victims are offered pregnancy test when warranted and sexually transmitted infection testing is provided. The Auditor found the facility meets the requirements of PREA standard 115.83.

### **Standard 115.86 Sexual abuse incident reviews**

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

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

**Auditor Discussion:**

Facility policy requires a sexual abuse incident review be conducted at the conclusion of every substantiated and unsubstantiated sexual abuse investigation. The PREA policy requires the review to occur within 30 days of the conclusion of each unsubstantiated and substantiated investigation. The Facility’s incident review team consists of upper-level management, line supervisors, investigators, and medical/ mental health practitioners. The Incident Review Team does not review incidents which are determined unfounded.

**Evidence Relied Upon:**

Policy – PREA-1 pg. 39-40  
Sexual Abuse Incident Review Report  
Interviews with Staff

**Analysis/Reasoning:**

The facility had one substantiated case within the previous 12 months. The case was a staff-on-inmate sexual harassment. The Auditor reviewed the report from the incident review. The team consisted of the PREA Coordinator, Lieutenant, First Sergeant, Investigator/Chief of Security, Mental Health Counselor, Nurse and Superintendent. The review team considered policy and procedure changes, examined the area, staffing levels, and monitoring technologies. The team also considered whether the incident was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender or intersex identification, status or perceived status, gang affiliation, or other group dynamic.

The Auditor interviewed one member of the incident review team. The team member informed the Auditor they perform a review within 30 days of the conclusion of an investigation. Each member of the review team completed a review form at the conclusion of the review. The Auditor recommended to complete one form for the entire review. The review form included considerations of motivating factors, a review of the incident area, discussed policy and procedure changes, reviewed staffing levels and monitoring technologies. The team recommended adding cameras to housing unit B classroom after completion of the current budget year. A recommendation was also made to monitor staff more closely and continue educating staff and inmates. The Superintendent and PREA Coordinator received a copy of the incident review teams’s reports.

**Conclusion:**

The Southside Regional Jail complied with the elements of this standard in a review of the only incident reported. The Auditor found the facility meets this standard.

**Standard 115.87 Data collection**

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

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

**Auditor Discussion:**

The Southside Regional Jail mandates sexual abuse data be collected for each reported incident of sexual abuse and sexual harassment. The requirement to collect and review the data is on an annual basis. A standardized set of definitions is utilized to collect the facility’s sexual abuse and sexual harassment incident data.

Evidence Relied Upon:  
Policy – PREA-1 pg. 40  
Annual PREA Report  
Facility Website

Analysis/Reasoning:

The facility was not required to report data to the Department of Justice during this audit period. The Auditor verified the facility's collected data is sufficient to answer the Department of Justice's Survey of Sexual Violence. The facility utilizes definitions for sexual abuse, sexual harassment, voyeurism, carnal knowledge, and rape. The PREA Coordinator is responsible for aggregating the facility's data annually. The PREA Coordinator aggregates the facility's sexual assault data from January 1<sup>st</sup> to December 31<sup>st</sup>.

Conclusion:

The PREA Coordinator collects and aggregates facility sexual abuse and sexual harassment data annually. The Auditor reviewed the collected data to ensure the data was sufficient to answer the U. S. Department of Justice's, Survey of Sexual Violence. The facility utilizes a standardized set of definitions as included in its policy. The Auditor determined the facility meets the requirements of PREA standard 115.87.

### Standard 115.88 Data review for corrective action

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

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

Auditor Discussion:

The Southside Regional Jail's PREA policy requires a review of its aggregated data in an effort to assess and improve the effectiveness of sexual abuse prevention, detection, and response efforts. The PREA coordinator completes an annual report and publishes the report on the facility website. The annual report includes identifying problem areas and taking corrective action on an ongoing basis. Policy allows the facility to redact any information which could present a security and/or safety threat to the facility.

Evidence Relied Upon:  
Policy – PREA-1 pg. 40-41  
Annual Report  
Southside Regional Jail Website

Analysis/Reasoning:

The Auditor reviewed the facility's 2016 annual report on its website. The report included one allegation of staff-on-inmate sexual harassment. The facility's report addressed no problem areas discovered and information utilized to make future corrective actions. The report does not include data from 2014 or 2015. This is the facility's first PREA audit. The facility began data collection in January 2016. The annual report was approved by the Superintendent prior to publishing the report on the website. No personal identifying material was included or redacted from the facility's report.

Conclusion:

The Auditor determined the facility is in compliance with PREA Standard 115.88.

## Standard 115.89 Data storage, publication, and destruction

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

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

### Auditor Discussion:

The facility's PREA policy requires collected sexual assault and sexual harassment data be securely maintained for at least 10 years after the initial collection of the data. Policy states the facility may remove all personal identifiers which would present a clear and specific threat to the safety and security of the facility before publishing the report on its website. If the facility redacts information from the report an indication of the nature of the material must be included.

### Evidence Relied Upon:

Policy – PREA-1 pg. 41  
Annual PREA Report  
Facility Website  
Interviews with PREA Coordinator

### Analysis/Reasoning:

The PREA Coordinator maintains facility collected data in her locked office in a locked file cabinet. She also maintains an electronic copy of the data on her computer. The computer is password protected and maintained in her office. Aggregated sexual abuse data is readily available to the public in the annual report publicized on the facility website. The report does not include personal identifiers. The PREA Coordinator informed the Auditor she maintains sexual abuse data for at least 10 years after it is collected.

### Conclusion:

The Auditor observed the PREA Coordinator's office where sexual abuse and sexual harassment data is maintained. The Auditor also reviewed the facility's sexual abuse data on its website. The Auditor found the facility compliant with this standard.

**AUDITOR CERTIFICATION**

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.



Auditor Signature

07/27/17

Date