

PREA Facility Audit Report: Final

Name of Facility: Southside Regional Jail

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 08/09/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Brian Sutherland	Date of Signature: 08/09/ 2023

AUDITOR INFORMATION	
Auditor name:	Sutherland, Brian
Email:	bcsuther@gmail.com
Start Date of On-Site Audit:	07/10/2023
End Date of On-Site Audit:	07/12/2023

FACILITY INFORMATION	
Facility name:	Southside Regional Jail
Facility physical address:	244 Uriah Branch Way, Emporia , Virginia - 23847
Facility mailing address:	

Primary Contact	
Name:	Major Brandon Temple
Email Address:	brandont@telpage.net
Telephone Number:	4346340851

Warden/Jail Administrator/Sheriff/Director	
Name:	Anthony Johnson
Email Address:	Johnsona@telpage.net
Telephone Number:	(434) 634-2254

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	LPN Jessica Crispino
Email Address:	jcrispino.ssrj@cbhmedical.com
Telephone Number:	(434) 634- 0938

Facility Characteristics	
Designed facility capacity:	100
Current population of facility:	205
Average daily population for the past 12 months:	149
Has the facility been over capacity at any point in the past 12 months?	No

Which population(s) does the facility hold?	Both females and males
Age range of population:	18-77
Facility security levels/inmate custody levels:	1
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	43
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	0
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	3

AGENCY INFORMATION

Name of agency:	Southside Regional Jail Authority
Governing authority or parent agency (if applicable):	
Physical Address:	244 Uriah Branch Way, Emporia , Virginia - 23847
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information

Name:	Brandon Temple	Email Address:	Brandont@telpage.net
--------------	----------------	-----------------------	----------------------

Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-07-10
2. End date of the onsite portion of the audit:	2023-07-12

Outreach

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

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	230
15. Average daily population for the past 12 months:	149
16. Number of inmate/resident/detainee housing units:	12
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	186
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	4
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	2
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	1
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	2
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>1</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>The facility reported the following physical plant characteristics: 1 building, 12 housing units, 6 single cell units, 4 open dormitories, and 7 segregation cells. The population consists of no youthful offenders, female confined persons in a separate housing unit, and male confined persons 18-77 years of age. The average length of stay is 68 days, and the population consists of all security levels. The random and informal interviews with staff and confined persons provided the auditor an opportunity to identify confined persons listed in other categories such as those that reported prior sexual victimization.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>38</p>

50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	3
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	6
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	<p>The staff count on the first day of the audit was 38 and 6 contractors. This included sworn staff and non-sworn positions. The facility reported limited volunteers have been authorized to enter the facility in the past 12 months due to the COVID-19 Virus. The facility was not authorizing contact visitation at the time of the onsite review. The facility was operating at a 12% vacancy rate.</p>

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	10
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input checked="" type="checkbox"/> Other <input type="checkbox"/> None

<p>If "Other," describe:</p>	<p>The auditor requested at random the fifth confined person on the housing roster based on the selected criteria and included confined persons from all housing units.</p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The auditor attempted to select confine persons from each housing unit to ensure the sample size demonstrated a diverse mix of the population.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>The auditor was able to interview a sample of confined persons from all housing units as the facility was not experiencing a quarantine due to the effects of the COVID-19 Virus. The facility reported a limited number of confined persons that would identify for all specialized categories. The auditor attempted to verify the data reported by the facility during the random and informal confined person interviews.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>10</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	

<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>4</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility reported no deaf or hard of hearing confined persons were currently residing at the facility. Interviews with the PREA Coordinator, classification, and medical staff confirmed no confined persons of this population were present during the onsite review.</p>

<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility reported no confined persons were currently residing at the facility that identify with this category. Interviews with the PREA Coordinator, classification, and medical staff confirmed no confined persons of this population were present during the onsite review.</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility reported no confined persons were currently residing at the facility that identify with this category. Interviews with the PREA Coordinator, classification, and medical staff confirmed no confined persons of this population were present during the onsite review.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility reported no confined persons were currently residing at the facility that identify with this category. Interviews with the PREA Coordinator, classification, and medical staff confirmed no confined persons of this population were present during the onsite review. The facility stated no sexual abuse allegations have been reported in the past 12 months.</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>1</p>

<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The auditor conducted interviews with the staff that supervise segregated housing, the facility PREA Coordinator, and the facility Superintendent and all confirmed no confined persons have been housed in segregation for high-risk victimization in the past 12 months. During the on-site review the auditor spoke with confined persons in segregated housing, reviewed samples of segregation forms, and did not identify any confined persons under this category during the on-site review.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>The facility reported a limited number of confined persons that would identify for all specialized categories. The auditor attempted to verify the data reported by the facility during the random and informal confined person interviews.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>10</p>

<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p>a. Select the reason(s) why you were unable to conduct the minimum number of RANDOM STAFF interviews: (select all that apply)</p>	<p><input type="checkbox"/> Too many staff declined to participate in interviews.</p> <p><input checked="" type="checkbox"/> Not enough staff employed by the facility to meet the minimum number of random staff interviews (Note: select this option if there were not enough staff employed by the facility or not enough staff employed by the facility to interview for both random and specialized staff roles).</p> <p><input type="checkbox"/> Not enough staff available in the facility during the onsite portion of the audit to meet the minimum number of random staff interviews.</p> <p><input type="checkbox"/> Other</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>The random sample of staff included selecting the fifth staff member on the daily duty roster, utilizing staff availability, minimizing scheduling conflicts, and ensuring the samples were selected from all shifts.</p>

Specialized Staff, Volunteers, and Contractor Interviews

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

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	18
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

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

<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>The interviews with the specialized staff attempted to assist the auditor to determine whether or not particular roles and responsibilities are being completed. The facility is limiting access for volunteers into the facility due to the effects of the COVID-19 Virus.</p>
--	--

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

<p>84. Did you have access to all areas of the facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
---	---

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

<p>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
--	---

<p>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
---	---

<p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
--	---

<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>During the site review, the auditor verified the cross-gender presence of staff as announcements were made while entering the housing units. The auditor verified the use of the language line services, tested the outside reporting mechanisms, identified areas of signage that may need to be posted, received positive feedback from the victim advocate, and inspected all areas for blind spots and cross-gender viewing capabilities. The facility addressed concerns during the onsite review such as: clarified the role of the victim advocate for third-party reporting, identified the PREA Coordinator on the organizational chart, posted the third-party reporting poster near the confined person phones, corrected the potential blind spots and provided additional opposite-gender strip search training for staff.</p>
<p>Documentation Sampling</p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

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

During the on-site review the auditor reviewed employee files for PREA questions, criminal history checks, and reference checks. The auditor reviewed employee training files for initial and annual PREA training. The auditor reviewed contract clearance documents, investigative files, and confined person files for initial intake screenings, 30-day reassessments, initial PREA information, and 30-day comprehensive PREA education. The auditor reviewed the intake packet for clarity and observed the intake and reassessment processes. The auditor reviewed all video monitoring equipment for cross-gender viewing.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	4	0	4	0
Total	4	0	4	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	4	0	0
Total	0	4	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

0

<p>a. Explain why you were unable to review any sexual abuse investigation files:</p>	<p>The facility reported no sexual abuse allegations received during the past 12 months. The auditor sampled documents from the previous 12 months for clarification and to provide support for the retaliation monitoring and after-action reviews.</p>
<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files) </p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) </p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) </p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>

<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>4</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>4</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>The auditor selected 4 investigative files to review during the onsite review. The auditor reviewed additional investigative files during review of the facility PAQ. All requested information in this post audit review was deemed essential when the audit process began.</p>

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

- Yes
 No

Non-certified Support Staff

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

- Yes
 No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- The audited facility or its parent agency
- My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- A third-party auditing entity (e.g., accreditation body, consulting firm)
- Other

Identify the name of the third-party auditing entity

Corrections Consulting Services, LLC

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.11 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire responses 2. SOP PREA One - Prison Rape Elimination Act (PREA), March 6, 2017, pages 1-47 3. Facility Organizational Chart 4. Agency PREA Coordinator Position Notification, October 1, 2021

5. Agency Prison Rape Elimination Act Definitions, pages 4-8

Interviews:

1. PREA Coordinator
2. Facility Superintendent

Site Review Observations:

1. Staff performing cross-gender announcements upon entry to all housing units.
2. Supervisory staff documenting unannounced security rounds in the post logs.
3. Signs and posters indicating zero tolerance posted throughout the facility.
4. Reviewed the facility training materials, power point, and lesson plan information.

Findings (By Provision):

115.11 (a) - The agency PREA One policy, page 1 mandates a zero tolerance toward all forms of sexual abuse, sexual assault, staff sexual misconduct, and sexual harassment. The agency policy PREA One describes the approach toward prevention, detection, reporting, and response to all forms of sexual abuse and sexual harassment. This includes facility preventive measures necessary to reduce and prevent sexual abuse and sexual harassment of confined persons such as: architectural design, security supervision, video monitoring equipment, confined person orientation procedures, medical screening within 24-hours of arrival, housing considerations, separate showers, classification screenings, 30-day reassessments, facility staffing plan, staff referrals, supervisory notifications, mental health screenings, unannounced supervisory rounds, opposite gender housing announcements, community corrections procedures, and training.

During the on-site review, the auditor identified staff performing opposite gender housing announcements when entering all housing units, and unannounced supervisory rounds. The rounds were documented as unannounced in the unit logbooks, and the cross-gender announcements were made verbally by staff entering the units. The auditor noted postings throughout the facility indicating zero tolerance toward all forms of sexual abuse, sexual assault, and sexual harassment. The policy includes definitions of prohibited behaviors in the PREA One policy, pages 4-8, and these definitions include sexual abuse, sexual assault, staff sexual misconduct, and sexual harassment. There is a total of five pages included within this policy as a complete glossary of terms. PREA policy One, pages 1-47 explain the presumptive approach toward staff, volunteers, and contractors who engage in sexual abuse will be termination and prosecution referral. PREA One describes the sanctions for

contractors, volunteers, and referrals to law enforcement. Agency policy includes disciplinary sanctions for confined persons found to have participated in all forms of sexual abuse, sexual harassment, indecent exposure, kissing, and inappropriate physical contact.

Training is provided for all confined persons, staff, volunteers, and contractors for the education of the duties and responsibilities toward prevention, detection, reporting, and response procedures. The auditor reviewed the facility training plan, and power point presentations that described the facility methods toward prevention, detection, reporting, and response procedures. The training materials also provided information relating to performing cross-gender strip searches, body cavity searches, and pat-down searches. The training provided information relating to avoiding inappropriate relationships and communicating effectively with special populations. Agency policy PREA One provides information relating to employee, volunteer, contractor, and confined person training regarding zero tolerance for sexual abuse and sexual harassment. This policy also informs the staff how to fulfill their responsibilities toward prevention, detection, reporting, and response procedures.

115.11 (b) - Agency policy PREA One explains the agency employs an upper-level, agency wide PREA Coordinator. The PREA Coordinator position reports directly to the facility Assistant Superintendent and this position is documented in the facility organizational chart as an upper-level Chief of Operations position, and the rank of Major. The auditor reviewed a signed policy by the facility Superintendent on October 1, 2021, designating the PREA Coordinator. The position description emphasized the importance of regulated duties and requirements. The auditor requested the organizational chart be updated to include the PREA Coordinator in the listing with the Major position.

The interview with the PREA Coordinator indicated enough time and authority to develop, implement, and oversee efforts to comply with the PREA Standards. The PREA Coordinator explained the duties and responsibilities associated with the position, direct communication with leadership staff, and confirmed the agency support toward improving the sexual safety of the facility.

115.11 (c) - The Southside Regional Jail operates only one facility and does not provide a facility PREA Compliance Manager within the organizational chart.

Conclusion: Interviews conducted with the PREA Coordinator, and the facility Superintendent confirmed enough time and authority to develop, implement, and oversee the efforts toward PREA compliance. Communication between this auditor, PREA Coordinator, and the facility Superintendent was professional, timely, and knowledgeable. Interviews conducted with staff, confined persons, volunteers, and contractors indicated knowledge regarding the facilities zero tolerance policy toward all forms of sexual abuse and sexual harassment. The PREA Coordinator was always accessible throughout the auditing process, responded to emails and phone calls immediately, and provided adequate responses during the on-site review. The auditor confirmed an agency policy mandating zero tolerance of all forms of sexual abuse and sexual harassment. The facility has a documented implementation plan outlining the facilities approach to preventing, detecting, and responding to sexual abuse and

sexual harassment. Southside Regional Jail is fully compliant with this standard.

115.12 Contracting with other entities for the confinement of inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Standard 115.12 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire responses
2. SOP PREA One - Prison Rape Elimination Act (PREA) Procedures Manual, March 6, 2017, pages 1-47
3. PREA Audit Report, June 10, 2020

Interviews:

1. Agency Contract Administrator
2. Agency PREA Coordinator
3. Southside Regional Jail Superintendent

115.12 (a-b) Agency policy PREA One, page 13, describes the facility shall include in any new contract or contract renewal for the housing of an inmate with a private entity or other entities, including other government agencies, the entity's obligation to adopt and comply with the Prison Rape Elimination Act (PREA) Standards and the Department's policies related to PREA compliance. The facility Superintendent serves as the agency contract administrator and the interview indicated no new agency contracts or contract renewals have been performed since the previous PREA audit in 2020.

The Southside Regional Jail does not contract with other entities for the housing of its confined persons. The auditor confirmed this statement during the agency's Contract Administrator and facility Superintendent interview.

Conclusion: Based upon the review and analysis of all evidence provided, the auditor

	<p>has determined that the facility is fully compliant with this standard. Southside Regional Jail has not entered into any contracts in the last 12 months for the housing of its confined persons.</p>
--	--

115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Standard 115.13 Analysis</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire responses 2. 2023 Facility Staffing Plan 3. Unannounced Rounds Documentation Form (U-5), July 30, 2022, to June 1, 2023 4. Staffing Plan Review Signature Form with PREA Coordinator and the facility Superintendent, December 20, 2020, to December 19, 2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Superintendent 2. Intermediate and Higher-Level Facility Staff 3. Agency PREA Coordinator 4. One Informal Staff Interview 5. 10 Random Staff Interviews <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Viewed video camera footage, monitors, and storage 2. Inspected facility identified blind spots for locking devices, staff patrols, and log entries

Findings (By Provision):

115.13 (a) - The auditor conducted a review of the documented 2023 facility-staffing plan. The Southside Regional Jail designates four security staff members on duty at all times assigned to work in the secure area of the jail. At least one of the staff members must be a female. The posts that are mandated are Master Control, HA Control, HB Control, and Intake. If necessary, the post of Master Control may be vacated and the functions of that duty post moved to the HA Control. The female staff member must be assigned to the area of the jail that houses the highest number of female confined persons. Any deviation from this plan must be approved by the Chief of Operations, or their designee and documented. The auditor did not review any documentation requiring this notification as the facility reported no deviations in the past 12 months. The facility reported 43 staff on the preaudit questionnaire and reported hiring 25 staff in the past 12 months. The total staff on day one of the onsite review was 38 total staff and the facility was operating at a 12% vacancy rate.

The institutional staffing plan is reviewed annually by the agency PREA Coordinator and the facility Superintendent. This is a very thorough process that includes the following: daily shift assignment rosters, summary of personnel documents, and a personnel annual report. The auditor reviewed the daily operation data for the two days during the on-site review and did not find any deviations within the staffing plan for the two days.

The facility utilizes video monitoring equipment, positioned in specific locations for the operators to view. The video monitoring is recorded with digital video recording and network video recording. Each camera has its own specific DVR and the retention rate for each camera recording is 30 days. The facility has 102 cameras that are monitored by duty post staff, controlled, and accessed by investigators and supervisors as needed. These cameras monitor the perimeter and key areas of the facility. There are interior cameras that are also Pan - Tilt - Zoom and fixed devices that are monitored from the Control Room. The Southside Regional Jail camera coverage is monitored twenty-four hours-a-day by a dedicated officer located in the control center and the onsite review did not indicate a concern with cross gender monitoring. The current staffing plan and video monitoring system is adequate for the protection of confined persons from sexual abuse; however, the facility has identified several blind spot areas throughout the facility where enhanced camera coverage will eliminate potential soft spots, including housing units and the areas in the kitchen. The facility has implemented preventive measures until the installation of the cameras can be fulfilled and that is additional unannounced security rounds documented within these areas.

The auditor confirmed the security levels for each shift, support staff, administrative staff, maintenance staff, and management by comparing the staff assigned to the daily duty rosters. The facility Superintendent interview indicated the factors considered in the development of this staffing plan includes generally accepted detention and correctional practices, no judicial findings of inadequacy from Federal,

internal, or external bodies. The composition of the confined person population averaged 149 confined persons and the facility staffing plan was predicated to include 166 confined persons. Jail officers and supervisors monitor each housing unit and conduct unannounced rounds throughout the day. All programming activities are during dayshift hours and the facility provides additional staff to accommodate these needs with the addition of staff to monitor these areas. This auditor verified this process during the site inspection as the staffing levels were consistent with the daily roster report. The elements of State, Local Laws, Regulations, Standards, and other relevant factors are considered when developing the staffing plan. There were no substantiated allegations of sexual abuse or sexual harassment and four unfounded incidents of sexual harassment considered prior to the review of the current staffing plan.

115.13 (b) - The facility provided information during the Pre-Audit Questionnaire process indicating no deviations within the staffing plan in the last 12 months. The agency developed the annual review document that includes all security personnel, and which post staff members are assigned. This report is developed and updated on an annual basis and the Superintendent interview confirmed this process. Facility policy PREA One implements regular review of the staffing requirements and indicates the PREA Coordinator shall complete and submit the compliance review annually. All deviations from the post chart are documented in an incident report. In circumstances of non-compliance with the staffing plan, the facility Shift Commander shall document, in writing, and justify all deviations from the plan. This documentation shall be forwarded to the facility Superintendent for review. The auditor reviewed no incident reports indicating deviations within the staffing plan. The facility reported all post assignments are filled with overtime hiring. The most common overtime needs consisted of FMLA status, sick leave, annual leave, and training. The facility Superintendent indicated in the formal interview there are mandates within the policy that require every post to be filled. The auditor reviewed a list of current staff documented on the overtime list. During the on-site review, the auditor interviewed one informal staff on an assigned overtime post, and two random staff interviewed from the night shift.

115.13 (c) - Agency policy PREA One includes the specific requirement regarding an annual review of the facility staffing plan by the PREA Coordinator and the facility Superintendent. The PREA Coordinator and the facility Superintendent interviews confirmed the staffing plan is discussed numerous times throughout the year and changes are necessitated as required. The Superintendent confirmed no litigation, and no federal mandates are currently present that may affect the sexual safety of the facility. The interview indicated full compliance with the provisions of this standard. The auditor reviewed the annual staffing plan for 2022 and verified both signatures for the PREA Coordinator and the facility Superintendent. This document included a discussion regarding accepted detention practices, judicial findings, oversight, blind spots, isolated physical plant locations, group dynamics, supervisory staff, programming, regulations, substantiated/unsubstantiated allegations, and vulnerabilities. This information was confirmed by the auditor during the on-site PREA Coordinator interview.

	<p>115.13 (d) - Agency policy PREA One informs staff regarding supervisor unannounced rounds must be made throughout the facility to deter sexual abuse or sexual harassment on each shift. Agency policy PREA One also includes staff who are prohibited from alerting other staff members regarding the supervisor rounds and disciplinary action is the standard result of these actions. The on-site review indicated the supervisory rounds are being conducted and documented on the unit logs. The auditor reviewed documented supervisory logs for July 30, 2022, to June 1, 2023. These documents indicated rounds being conducted during day and night shift activities and at random intervals. The logs did not indicate a distinct pattern as all rounds were conducted at various times and on different shifts. The facility organizational chart indicates higher level supervisors as Lieutenant and above. All rounds were conducted at random intervals, on multiple shifts, and no distinct pattern was identified. The auditor conducted an interview with a Lieutenant, and 1 interview with a Major, and both interviews indicated conducting unannounced rounds, documenting the rounds on the supervisory logs, and attempting to conduct the rounds without staff notifications. One interview indicated the supervisor will enter the facility at random locations, double back on security rounds, and monitor the radio traffic regarding supervisory notifications. All staff interviewed indicated disciplinary action as the result of any infractions regarding unannounced rounds throughout their tours. The auditor conducted one informal staff and five informal confined person interviews, and these interviews indicated higher level staff are present throughout the units on both day and night shifts. The informal staff interviews indicated supervisors are always walking through the units and documenting their presence. The informal confined person interviews indicated supervisory presence within the units, as one confined person advised, "They are always around".</p> <p>Conclusion: Based upon the review and analysis of all evidence provided, the auditor has determined that the facility is fully compliant with this standard requiring the development and review of a facility staffing plan, intermediate or higher-level supervisors conducting documented unannounced rounds, and the facility has developed a policy that prohibits staff from alerting other staff of the rounds occurring.</p>
--	---

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.14 Analysis</p> <p>The following evidence was analyzed in making the compliance determinations:</p>

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire responses
2. Facility policy PREA One PREA Procedures Manual, March 6, 2017, pages 1-47
3. Facility Population Analysis of Age Ranges Document - (12 Months)

Interviews:

1. Line Staff Who Supervise Youthful Confined Persons
2. No Youthful Confined Persons
3. Education and Program Staff
4. PREA Coordinator

Site Review Observations:

1. Reviewed the daily confined person rosters and housing reports
2. Reviewed the facility intake process and classification questionnaire
3. Reviewed the Agency Web Site

Results Based on the Following Provisions:

115.14 (a-c) - The Southside Regional Jail has not housed youthful offenders in the last 12 months. Agency policy PREA One, page 16 describes the considerations for a youthful offender to be housed at Southside Regional Jail. The policy states, "SRJ does not house youthful inmates unless they have been adjudicated as an adult. In such event, the youthful inmate is placed in a special housing area and all efforts are made to keep from sight, sound, or physical contact with any adult inmate until proper arrangements are made to have them transferred to a regional jail that is certified to house youthful inmates." This practice was confirmed during the interview process by the facility Superintendent and verified by the facility population analysis of age ranges for the past 12 months. The auditor reviewed the daily confined person statistics documents for July 11, 2023. These documents also confirmed the presence of no youthful, confined persons in the past 12 months. The facility PREA Coordinator interview confirmed this during the on-site review.

Facility policy PREA One, describes the classification process regarding the housing of youthful offenders and explains the youthful offender will be housed separate from sight, sound, and physical contact with any adult confined persons through use of a shared dayroom or other common space, shower area, or sleeping quarters. This

	<p>statement was confirmed by the facility Superintendent during the onsite review.</p> <p>The auditor viewed the housing segregation area that would be utilized for youthful offenders and the areas are separated by sight and sound from adult offenders. The facility utilizes window coverings, sound barriers, and multiple staff are available for escort to other locations. The youthful offenders can perform recreation and shower activities separate from the adult offenders. All meals are provided by satellite to the confined youthful offenders and delivered by staff. There were no youthful offenders available during the on-site review as no youthful offenders were being housed at the facility.</p> <p>Conclusion: Based upon the review and analysis of all evidence provided, the auditor has determined that the facility is fully compliant with this standard requiring the youthful offender to be housed separate from sight, sound, and physical contact with any adult confined persons through use of a shared dayroom or other common space, shower area, or sleeping quarters. The facility would provide programming activities for youthful offenders, recreation, and private showers separate from the adult offenders . No further action is required within this standard.</p>
--	---

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.15 Analysis</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Responses to the Pre-Audit Questionnaire 2. Agency Policy PREA One, Prison Rape Elimination Act, March 6, 2017, pages 16-17 3. Southside Regional Jail, Prison Rape Elimination Act (PREA), Inmate Comprehensive Educational Booklet, pages 1-9 4. Transgender Search Training Rosters <p>Interviews:</p> <ol style="list-style-type: none"> 1. Non-Medical Staff Involved in Strip Searches

2. 10 Random Staff

3. One Informal Staff, and Five Informal Confined Persons

4. No Transgender/Intersex population

5. 10 Random Confined Persons

Site Review Observations:

1. Confirmation of gender specific posts compared to the daily duty rosters.

2. Intake Risk Screening and Classification Review.

3. Reviewed for Transgender confined persons

4. Opposite gender announcement entering housing units.

Findings (By Provision):

115.15 (a) - Agency policy PREA One, pages 16-17 indicate the facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. The Southside Regional Jail reported no cross-gender strip or visual body cavity searches conducted in the last 12 months. This includes no searches that involved exigent circumstances or performed by nonmedical staff. This was confirmed through 10 random interviews with staff. As all 10 staff interviews reported the facility does not perform cross-gender strip or visual body cavity searches. The auditor conducted 10 random interviews with confined persons and all 10 interviews indicated no cross gender strip or visual body cavity searches have been performed. The confined person population advised strip searches are always conducted by the same gender. This information was also confirmed during one informal interview with staff, and 5 informal confined person interviews as the interviews confirmed the male staff are only allowed to perform pat searches of male confined persons and all strip searches are conducted by the same gender. During the on-site review, the auditor received notice of no confined persons currently housed at Southside Regional Jail that identified as transgender. No non-medical staff involved in cross-gender searches were available for interview due to the facility reporting no cross-gender searches.

115.15 (b) - The Southside Regional Jail houses both male and female confined persons and the auditor made attempts to identify a confined person classified as a transgender person. The facility reported a no confined persons that classify as transgender population. The facility Superintendent confirmed this statement during the onsite review. The facility website indicted the facility houses both male and female populations. The PREA Coordinator interview indicated Southside Regional Jail does not conduct cross-gender pat searches of offenders. The auditor reviewed housing unit logs indicating no cross-gender listings for the population cited in the

past 12 months.

115.15 (c) - Agency policy PREA One, pages 16-17 require the facility shall document all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat down searches of confined persons. The facility Superintendent confirmed this statement during the on-site review. No cross-gender searches of confined persons were observed by the auditor during the on-site review. Interviews with 10 random staff did indicate a concern regarding strip searches of confined persons that identify as transgender. The staff reported utilizing the two staff member concept of one staff searching the top and an additional staff member will search the bottom based genitalia. This issue was addressed with the PREA Coordinator and the facility Superintendent during the onsite review. The PREA Coordinator provided the auditor with training rosters indicating the search training was completed for all security staff during the post audit phase.

115.15 (d) - Agency policy PREA One, page 16 explains inmates shall be able to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. This policy mandates gender specific staff are assigned to Transport Officers, Search Team Officers, Visiting Room Search Officer, and the Intake Officer. The auditor reviewed the daily post assignments during the on-site review and compared the gender assigned with the posted memo requirements. The facility offers confined person shower curtains that do not create blind spots, half walls to protect from viewing during restroom functions, and mirrors that do not affect privacy. The facility restrooms, showers, and living units were inspected for compliance and the auditor observed shower curtains for privacy while taking a shower, restroom barriers for confined person privacy while using the restroom, and camera placements throughout the facility that did not indicate cross gender viewing during periods of undress by the population. The housing unit cells have small windows that create a barrier toward the wet cells that have a toilet and sink combination in the room. This prevents confined person viewing while changing clothes and using the restroom except during incidental viewing during routine staff rounds. Informal interviews with one staff and five confined persons indicated no concerns with viewing of this nature.

Agency policy PREA One, page 17 indicates a procedure for staff of the opposite gender to announce their presence when entering a confined persons housing unit. This practice was observed throughout the facility site review as staff announced their presence and documented this action in the unit logbooks. Several confined person interviews indicated this practice is being applied consistently. The auditor identified the method of notification to the hearing-impaired confined persons during the onsite review as staff will personally notify the confined persons affected based on gender.

115.15 (e) - Agency policy PREA One, page 17 forbids staff to examine inmates for the sole purpose of determining the inmate's genital status. This policy includes transgender and intersex inmates, and if the genital status is unknown, the information will be obtained during the inmate conversations, medical records, or by

	<p>performing a broader examination conducted by a medical practitioner. The Health Services Administrator confirmed this through random staff and confined person interviews. The PREA Coordinator interview and the facility Superintendent interviews confirmed all confined person information is utilized to ensure this process is adhered too. The agency policy PREA One, page 17 explains the departments approach to working with transgender and intersex confined persons. Importantly, this policy explains the classification process and ensures the staff effectively interact professionally and respectfully with this specialized population.</p> <p>The facility is required to develop a Plan of Action to prepare for reception and housing of transgender and intersex populations. The daily process was described to the auditor during the on-site review to include the following: caution is utilized to measure the proper placement toward housing, security, programming, and other needs. Each confined person is considered on a case-by-case basis and the final determination is mandated by the Executive Staff as recommended by the classification staff. The facility reported no confined persons at Southside Regional Jail identify as transgender and the auditor was unable to interview confined persons from this population.</p> <p>115.15 (f) - Agency policy indicates all sworn staff are trained to conduct proper pat down searches on confined persons to include cross-gender searches. Agency policy describes the methods to conduct clothed searches, strip searches, and body cavity searches. This is mandated training for all employees and the auditor reviewed training rosters indicating all security staff have received the mandatory training in the last 12 months. Random interviews with ten staff and one informal staff interview indicated knowledge of the training and verbal demonstrations regarding proper conduct. The training curriculum described proper conduct as utilizing the back of the hand to conduct the pat-down search, maintaining strict professionalism, utilizing correct terminology, providing a private area for the search, limited cross-gender viewing, and being respectful toward population needs.</p> <p>Conclusion: Based upon the review and analysis of all the available evidence, interviews, on-site observations, and policy, procedure, and practice considerations, the auditor has determined that the facility is fully compliant with this standard. No further corrective action is required.</p>
--	--

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Standard 115.16 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire responses
2. Policy PREA One Prison Rape Elimination Act (PREA) Procedures Manual, March 6, 2017, pages 1-47
3. PREA Video English/Spanish, Closed Captioning, and Braille
4. PREA Inmate Comprehensive Education Booklet, pages 1-9
5. Sexual Assault Awareness Newsletter, pages 1-5
6. Sexual Misconduct/ PREA Form, P-I PREA Orientation Form

Interviews:

1. Agency Head
2. Four Confined Persons with a Physical Disability
3. No Confined Person with a Hearing Disability
4. Two Confined Persons with Limited English Proficiency
5. Two Confined Persons with Cognitive Disabilities
6. Ten Random Staff Interviews
7. One Informal Staff Interview

Site Review Observations:

1. Signs and posters indicating zero tolerance posted throughout the facility English/ Spanish formats
2. The unit phones are available with a TTY service and Spanish options
3. Opposite Gender Announcements in the housing units
4. Written materials in both Spanish/English formats
5. Staff interpreters on-site and utilized during interviews
6. Language Line utilized during interviews

Findings by Provision:

115.16 (a) Policy PREA One, Prison Rape Elimination Act, page 17 indicates the agency has established procedures to provide disabled confined persons equal opportunity to participate in or benefit from all aspects of the efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The policy includes language associated with deaf or hard of hearing confined persons, blind or having low vision, confined persons who have intellectual disabilities, psychiatric disabilities, speech disabilities, and limited English proficient. The auditor utilized the facility translator to interview two confined persons with a limited English proficiency disability. The language services were also utilized due to limited understanding with the staff interpreter. The confined person reported the primary language as Spanish, and the facility provided the PREA materials, handbook, and posters in a language understood. The facility Superintendent interview indicated the facility has a contract to provide language line services, the facility is required to post materials in both English and Spanish formats, there are options for the blind, a contract for language services, staff listed as interpreters, and all PREA related materials are available in multiple languages. The auditor inspected the phone systems, and the TTY options are available for hard of hearing populations, and the voice recorded options are available in Spanish formats. The auditor verified the language service as an available option for limited English proficient confined persons.

115.16 (b) The confined person handbooks are written in both English and Spanish format. The PREA and Americans with Disabilities Act provisions are documented in policy PREA One, page 17, and indicate the following resources are available for the confined persons: closed captioning, large print material, reading of materials to confined persons by staff, department translator lists, Braille, and the language line services. Confined persons are provided the PREA education pamphlet in their primary language upon request and the auditor reviewed the intake process. The auditor observed the closed captioning included within the television viewing, and the intake staff reading the PREA pamphlet to the confined person. The auditor interviewed two limited English proficient confined persons that indicated gratitude for the language line service. They advised using this service in the past and the facility PREA Coordinator ensuring the PREA materials were provided in Spanish format.

115.16 (c) The facility provides interpreter services with a language line service known as Language Line Services, Inc. This company also requires its interpreters to undergo a medical interpreter credentialing process. A hotline number is available on the phone lines to report abuse. This service is available for confined persons with limited reading skills in both English and Spanish. The auditor evaluated the number during the on-site review and an immediate response was provided. Email notifications were also received by the PREA Coordinator, and this auditor reviewed the confirmations. Posters and signs are available throughout the facility in both English and Spanish relating to reporting mechanisms, and prevention techniques. Staff training files reviewed indicated training received for managing those at risk of

	<p>sexual abuse and identified the policy against using confined person interpreters. The auditor interviewed 10 random staff, which indicated the use of the language line to conduct interviews with limited English proficient confined persons. The auditor interviewed one informal interview with staff and no staff revealed any reports of utilizing confined person interpreters for incidents of sexual assault and sexual harassment. Interviews conducted with four confined persons with a documented physical disability, two limited English proficiency, and two cognitive disabilities did not reveal concerns regarding this standard.</p> <p>Conclusion: The evidence reviewed by the auditor reveals a significant level of facility importance regarding confined persons with disabilities or with limited English proficiency having the ability to communicate effectively with staff. This includes efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility has implemented an approach to accommodate steps to communicate effectively with confined persons who are deaf or hard of hearing, have speech disabilities, are blind or low vision, intellectual disabilities, limited reading skills, psychiatric disabilities, or limited English proficient. This includes a language line contract, and potential staff interpreter lists. The confined persons and staff interviews did not indicate any concerns regarding the use of confined person interpreters, readers, or assistants during sexual abuse or sexual harassment investigations. The agency has a policy in a written format and the on-site review indicated the facility practice aligns with the written policy. The Superintendent interview indicated a strong knowledge base and the expected communication results designed within the intent of the written policy.</p>
--	---

115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Standard 115.17 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire responses 2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 17-18 3. Seven Random Staff Personnel Files 4. Employee List for VCIN Checks, June 9-10, 2023, page 1

5. Employee List for VCIN Checks, July 30, 2020, page 1

6. Random Volunteer Files

7. Random Contractor Files

Interviews:

1. Human Resource Staff

2. PREA Coordinator

3. One Informal Staff

4. One Contract Staff

5. One Volunteer

Site Review Observations:

1. Seven Random Staff Personnel Files

2. 25 New Employee Background Screenings Confirmed

3. 3 Contractor Background Screenings Confirmed

Findings by Provision:

115.17 (a) The facility Policy PREA One, pages 17-18 prohibits hiring or promoting anyone who may have contact with confined persons and prohibits enlisting the services of any contractor who may have contact with a confined person who has engaged in, been convicted of, or civilly/administratively adjudicated in sexual abuse in a prison, jail, lockup, community confinement facility, or other institution. This was confirmed during the interview with the Human Resource staff member. Each staff member must provide responses to specific questions relative to PREA during the submission of the application. A background questionnaire form is completed authorizing the facility to conduct a background screening. The auditor reviewed seven staff personnel files that indicated a response to these PREA related questions.

115.17 (b) Policy PREA One, pages 17-18 require the facility to consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with confined persons. This was confirmed during the interview with the Human Resource staff member. The auditor reviewed seven staff personnel files indicating their signatures on the background release forms. None of the seven staff personnel files indicated concerns regarding this provision.

115.17 (c) The Southside Regional Jail facility policy PREA One, pages 17-18, indicates a screening is required by law prior to hiring. This includes the following: employment history checks, criminal history checks, and the National Sex Offender Registry screenings. These checks are completed prior to hiring new employees who may have contact with confined persons, criminal background records checks and efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse, or any resignation during a pending investigation of an allegation of sexual abuse is completed. The auditor spoke with the PREA Coordinator and determined 25 criminal background checks were completed in the past 12 months. These record checks were through the National Crime Information Center, and all current staff background checks are performed prior to employment. The background checks include the following: Biometric information, driving records, investigation files, licensure, military records, and drug related convictions.

115.17 (d) The preaudit questionnaire indicated three background checks were completed for staff covered under contracts for services that may have contact with confined persons. This number was confirmed during the PREA Coordinator interview. The auditor reviewed facility policy regarding the provision of this standard.

115.17 (e) Policy PREA One, page 18 indicates criminal background checks are conducted on all current employees, volunteers, and contractors, at least every five years. This was confirmed during the human resource staff interview. This is captured within the agency reporting mechanism and discussed during the human resource interview. The system that captures this information is the National Crime Information Center, Virginia Crime Information Network, and the Virginia Department of Motor Vehicles. A centralized clearance check form is submitted, and the system consistently captures clearance information that includes driver license information, and Virginia rap sheets.

115.17 (f) All applicants and employees, who may have contact with confined persons, will be asked about previous misconduct in all written applications, interviews for hiring or promotion, or during written evaluations. This was confirmed during the review and interview with the human resource staff member. The auditor reviewed seven staff files and confirmed the signed document was present asking the specific questions relative to sexual abuse, sexual assault, and sexual misconduct.

115.17 (g) Employees must disclose all misconduct allegations and any material omission or false information regarding misconduct will be grounds for termination. The policy PREA One, page 18 explains failure to report criminal charges and convictions may result in disciplinary action, demotion, and termination. In addition, seven staff personnel files were reviewed, and no issues determined regarding this practice.

115.17 (h) The facility tracking mechanism is documented on the applicant summary form and includes a criminal records check, valid driver's license, personal interview, proper documentation provided, Local Inmate Data System review, social security number compliance, certification verification, correctional reference checks to include prior employers, resignations, and substantiated allegations. The PREA Coordinator

	<p>provided documentation demonstrating a criminal history and a driver history inspection was previously conducted for staff. The PREA Coordinator confirmed a criminal background check is conducted prior to offering promotional opportunities and the auditor verified this process during the employee file review.</p> <p>Conclusion: Based on the evidence reviewed by the auditor to include: seven staff personnel files, interviews with the human resource staff, agency, and facility policy, three contractor reviews, and one informal staff interview, the auditor finds no discrepancies within this standard required for corrective action. The steps considered by the facility to ensure the safety of the confined persons with qualified staff are impressive.</p>
--	---

115.18 Upgrades to facilities and technologies	
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Standard 115.18 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire responses 2. Policy PREA One, Prison Rape Elimination Act, (PREA), March 6, 2017, page 18 3. Facility Cameral Locations and Upgrades Document <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Superintendent 2. PREA Coordinator <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Camera and monitor placement throughout the facility 2. Video and storage areas and camera footage

- 3. Gender Specific post assignments
- 4. Cross-gender viewing on video monitoring equipment

Findings by Provision:

115.18 (a) Agency policy PREA One, page 18 indicates when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect confined persons from sexual abuse.

The facility Superintendent confirmed substantial expansions were not performed to the Southside Regional Jail facility in the past 12 months. The interview with the Superintendent indicated the safety and privacy needs for confined persons is always considered. Whenever analysis is performed the idea of creating areas of safety and eliminating blind spots is important. The camera committees are in place at all levels, to ensure when tours are made, the camera placements and electronic monitoring data are all factors to consider when developing budgets.

115.18 (b) Agency policy PREA One, page 18 indicates when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect confined persons from sexual abuse. The facility has performed modifications and upgrades to the video monitoring equipment within the last 12 months. The facility PREA Coordinator reported the facility added seven new cameras throughout the facility to enhance the coverage in certain areas. The auditor reviewed the video footage during the on-site review in correlation with the previously documented gender specific post assignments. There were no concerns identified regarding cross-gender viewing of the video monitoring equipment.

Conclusion: The facility has implemented a policy and a program to monitor the effects of upgrades, camera placement, and video monitoring equipment throughout their facility. Each camera has a full DVR recording support, and all these modern additions were provided to assist in preventing, detecting, and responding to sexual abuse and sexual harassment allegations. The efforts provided by the facility meet the requirements of this standard. The Superintendent confirmed the PREA Coordinator participates in the discussions regarding video monitoring equipment and future expansion.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Standard 115.21 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire responses
2. Agency Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 19-21
3. Memorandum of Understanding (MOU) between the Greenville County Sheriff's Office and the Southside Regional Jail, August 11, 2020
4. Memorandum of Understanding (MOU), Chesapeake Forensic Specialists, February 10, 2020
5. Memorandum of Understanding (MOU), Family Violence Sexual Assault Unit, August 2, 2016

Interviews:

1. 10 Random Staff
2. One Sexual Assault Nurse Examiner
3. PREA Coordinator
4. Confined Persons who Reported Sexual Abuse
5. Victim Advocate (Family Violence Sexual Assault Unit)
6. One Informal Staff Interview

Site Review Observations:

1. Sexual Assault Services Mailing Address posted in all Living Units in both Spanish and English formats.
2. Signs and Posters posted in all living units in English and Spanish formats.

Findings by Provision:

115.21 (a) The Southside Regional Jail utilizes the facility PREA Investigators for

conducting administrative sexual abuse and sexual harassment investigations, and the Greenville County Sheriff's Office has the responsibility for conducting criminal abuse investigations. The Southside Regional Jail and the Greenville County Sheriff's Office utilizes a uniform evidence protocol when conducting sexual assault investigations and forensic medical examinations. Facility PREA policy PREA One describes the uniform evidence protocol required for the facility on pages 19-21.

The auditor interviewed 10 random staff and all interviews indicated securing the scene and the Greenville County Sheriff's Office would be responsible for collecting the evidence at the scene. The agency policy PREA One indicates the standard utilized when conducting sexual harassment and discrimination investigations. The auditor reviewed a Memorandum of Understanding (MOU), between the Greenville County Sheriff's Office and the Southside Regional Jail. This MOU is in effect and the signatures are binding.

115.21 (b) The Southside Regional Jail does not house youthful offenders, and this was confirmed by the agency website, onsite interviews conducted with staff, and the population statistical data. Agency policy PREA One, pages 19-21 explain the protocol established for evidentiary purposes shall be developmentally appropriate for youth. This policy was adapted in correlation with the National Protocol for Sexual Assault Medical Forensic Exams, Adult/Adolescents.

115.21 (c) The facility offers all confined persons who experience sexual abuse access to forensic medical examinations and without financial cost to the victim. Policy PREA One, pages 19-21 explain the facility shall offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without cost, where evidentiary or medically appropriate. The Southside Regional Jail utilizes an off-site medical emergency room, Southampton Memorial Hospital, and the Chesapeake Forensic Specialists. The facility reported no forensic medical exams were performed by a Sexual Assault Nurse Examiner (SANE) during the past 12 months. The number performed by a SANE was zero, and the number performed by a qualified medical practitioner was zero. This auditor spoke with one SANE nurse during the on-site review. The staff indicated they would provide the necessary support at the Chesapeake Forensic Specialists during the sexual assault exam. This was also confirmed by the PREA Coordinator and the Health Services Administrator during the on-site review. The Health Services Administrator confirmed all medical procedures will be performed to the victim at no cost and the auditor reviewed data to support the SANE evaluations will be performed at no cost to the confined persons. The interview with the provider confirmed these efforts and indicated a very professional relationship exists between the two agencies.

115.21 (d) The Southside Regional Jail medical staff complete the National Institute of Corrections training curriculum regarding PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting, and PREA: Behavioral Health Care for Sexual Assault victims in a Confinement Setting. Training certificates were reviewed for medical staff and all training was verified. This includes the initial PREA training and the specialized medical and mental health training.

The auditor reviewed the Memorandum of Understanding with the Family Violence Sexual Assault Unit victim services for confidential support services. The facility provided an updated MOU during the post audit phase with correct signatures from both agencies. The facility poster identified the 24- hour services offered by the agency, advocacy and case management, and hospital accompaniment. The poster offers an address for confined persons to write directly to the agency and the information is also provided in the handbook. The information provided to the confined persons in intake includes a facility sexual abuse awareness pamphlet and the address for the services is included within the pamphlet. The auditor observed this pamphlet being provided to the confined persons during the intake processes. All confined persons are required to sign receipt of the handbook and the PREA pamphlet. The auditor verified signatures during the onsite review.

115.21 (e) The auditor reviewed no incident reports demonstrating a victim advocate present during the sexual assault medical exam as the facility reported zero incidents involving the need for an exam. Policy PREA One, pages 19-21 explain any inmate who alleges sexual abuse or sexual battery should be given a copy of the notification of rights to have crisis intervention services. This was confirmed during the victim advocate interview, and the auditor reviewed the Memorandum of Understanding with the Family Violence Sexual Assault Unit. The auditor interviewed one staff from the Family Violence Sexual Assault Unit. This volunteer confirmed the MOU with Southside Regional Jail, explained the process regarding notifications, discussed the limits to confidentiality, and expressed appreciation for involving them within their program. The interviews with random confined persons indicated knowledge of the victim services but no confined persons are currently enrolled in the program.

115.21 (f) The Southside Regional Jail utilizes the facility PREA investigators for conducting administrative sexual abuse and sexual harassment investigations, and the Greeneville County Sheriff's Office has the responsibility for conducting criminal abuse investigations. This was confirmed during the Superintendent and PREA Coordinator interviews. The auditor reviewed an MOU between the two agencies.

115.21 (g) N/A

115.21 (h) The facility PREA Coordinator verified the facility will always utilize the Family Violence Sexual Assault Unit as the community advocate to offer emotional support, crisis intervention, information, and referrals. The Southside Regional Jail does not utilize staff as representatives for the victim services or to provide emotional support services.

Conclusion: The facility has in place a policy reflecting the efforts toward providing investigations, victim support, evidence protocol, and forensic medical examinations. The auditor reviewed a Memorandum of Understanding for the provisions required and all facility efforts are documented in writing. All provisions were met within standard 115.21 and no further corrective action required.

115.22	Policies to ensure referrals of allegations for investigations
---------------	---

Auditor Overall Determination: Meets Standard

Auditor Discussion

Standard 115.22 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire responses
2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 19-21
3. Reviewed Investigative Documents for Allegations of Sexual Abuse and Sexual Harassment referred to the Greenville County Sheriff's Office for Criminal Investigations

Interviews:

1. Facility Superintendent
2. 1 Facility Investigator
3. PREA Coordinator

Site Review Observations:

1. Reviewed the facility website for Investigative information
2. Reviewed Shift Commander Checklist
3. Reviewed Four Investigative Files
4. Case Management Log Entry System

Findings by Provision:

115.22 (a) On July 10, 2023, the auditor received the allegations and investigations overview document as requested along with the following data: Southside Regional Jail listed a total of four unfounded staff on confined person allegations of sexual harassment in the past 12 months. In the past 12 months, Southside Regional Jail has received nine incident reports regarding allegations of sexual harassment that

resulted in the four listed and reviewed cases. The facility reported no allegations of sexual abuse were reported in the past 12 months. The auditor verified this information with the facility PREA Coordinator and the facility Superintendent.

The Southside Regional Jail recognizes the grievance system as a method of reporting allegations of sexual abuse and no allegations were submitted within the last 12 months regarding allegations of sexual abuse. The facility received 3 allegations of sexual harassment through the grievance procedure and the auditor verified all 3 allegations were investigated. When a grievance form is received indicating an allegation of sexual abuse or sexual harassment, the grievance is rejected and forwarded immediately to the PREA Coordinator for investigation. This process was confirmed by the auditor during the on-site review.

The Southside Regional Jail provides a hotline number as a method of reporting sexual abuse or sexual harassment. The hotline is monitored by Family Violence Sexual Assault Unit and the auditor verified an MOU with the agency. The Southside Regional Jail reported a total of four calls were made to the hotline resulting in investigations conducted within the past 12 months. The administrative investigations are conducted following the outcome of the criminal investigations. A total of four claims of sexual harassment were made and the investigation was determined to be unfounded. The facility reported no substantiated allegations of sexual abuse determined in the past 12 months. There were no criminal cases that resulted in a substantiated allegation and no cases were terminated by prosecution refusal to prosecute. There are currently no sexual abuse administrative cases still pending. There are no sexual harassment cases still pending and four closed cases. The interview with the facility Superintendent explained the facility PREA Coordinator is the point of contact for all investigations. All criminal investigations are referred to the Greenville County Sheriff's Office. The PREA Coordinator will ensure that all cases are completed and documented with complete investigative summaries and the Superintendent is informed of the outcomes.

115.22 (b) The Southside Regional Jail policy PREA One, pages 19-21 require all allegations of sexual abuse and sexual harassment to be investigated and referred for administrative review or criminal prosecution. Policy PREA One, pages 20-21 ensure the allegation of sexual abuse or sexual harassment is referred to an agency with the legal authority to conduct criminal investigations. The Greenville County Sheriff's Office shall be responsible for criminal investigations in matters relating to sexual abuse. This notification policy is posted on the agency website and the procedures for reporting allegations are found in policy PREA One, pages 19-21. This auditor reviewed documentation indicating all four cases were entered into the Case Management Log Entry System. This information was provided and explained by the PREA Coordinator. The facility investigator interview confirmed this process.

This auditor reviewed four investigative reports and determined a lack of a documented credibility assessment. The considerations for credibility were included as discussed throughout the investigative staff interviews but not documented within the reports. This auditor provided recommendations to the investigative staff for future implementation regarding a preponderance of the evidence statement. The

	<p>required burden of proof was considered throughout the investigative process but was not specifically documented as such within the report. The facility investigator indicated the burden of proof for administrative investigations to be the preponderance of the evidence. The PREA Coordinator confirmed the policy is posted on the facility website.</p> <p>115.22 (c) Agency policy PREA One, pages 20-21 indicate the Greenville County Sheriff's Office shall conduct all criminal investigations of sexual abuse, sexual battery, and staff sexual misconduct. The information provided by the agency and facility indicates compliance with this standard. The auditor received no referrals provided by the facility to the Greenville County Sheriff's Office for investigation as no allegations reported required the necessary referral. The facility reported no substantiated allegations of sexual abuse and no substantiated allegations of sexual harassment that rose to the level of prosecution referral.</p> <p>115.22 (d) N/A</p> <p>115.22 (e) N/A</p> <p>Conclusion: Based on the evidence provided by the facility, the agency has a policy governing the investigations of allegations of sexual abuse and sexual harassment. The facility has a documented investigative policy and documents all reports of sexual abuse and sexual harassment. The facility provided the auditor with documentation of the investigations, including full investigative reports with findings. The agency policy is posted on the website, and it describes the investigative responsibilities of both the agency and the separate entity that conducts the criminal investigations on its behalf. The facility meets the provisions of this standard.</p>
--	---

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.31 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire responses 2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 21-22 3. Unit 2: Inmate Rights to be Free from Sexual Abuse and Sexual Harassment and

Staff and Inmates Rights to be Free from Retaliation for Reporting, The Moss Group, Inc., pages 1-66

4. Unit 3, Part I: Prevention and Detection of Sexual Abuse and Sexual Harassment, The Moss Group, Inc., pages 1-63

5. Unit 4: Professional Boundaries, The Moss Group, Inc., pages 1-31

6. Unit 5: Effective and Professional Communication with Inmates, The Moss Group, Inc., pages 1-31

7. Cultures of Safety in Corrections: Supervising a Sexually Safe Culture, The Moss Group, Inc., pages 1-18

8. Southside Regional Jail Authority, PREA Refresher: Prisons and Jail PREA Basics, pages 1-14

Interviews:

1. 10 Random Staff

2. PREA Coordinator

3. 1 Informal Staff Interviews

4. No Confined Persons that identify as Transgender

Site Review Observations:

1. Reviewed Seven Staff Training Files

2. Reviewed Seven PREA Training and Understanding Verification Forms

3. Verified a list of all current staff training dates

Findings by Provision:

115.31 (a) Agency policy PREA One, pages 21-22 include the zero-tolerance standard toward sexual abuse and sexual harassment policy relating to staff training. This policy includes training requirements on how to fulfill their responsibilities for prevention, detection, reporting, and response. This policy includes all elements listed in section 115.31 (a) 1-10. The auditor conducted ten random staff interviews indicating significant knowledge regarding the zero-tolerance policy toward all forms of sexual abuse and sexual harassment, and the staff requirements toward prevention, detection, reporting, and response. The auditor reviewed the PREA Lesson Plan provided by the PREA Coordinator, and the auditor reviewed the power point

presentation associated with the lesson plan during the on-site review. These materials provide the discussion regarding the zero-tolerance standard. The auditor reviewed the PREA Course Lesson Plan that lists the following performance objectives required within the training: The agency's zero-tolerance policy for sexual abuse and sexual harassment, staff responsibilities for prevention, detection, response, and reporting procedures, rights to be free from sexual abuse and sexual harassment, retaliation standards, the dynamics of sexual abuse in confinement settings, victim behaviors, signs and symptoms of threatening behaviors, how to avoid inappropriate relationships, communication and understanding the linguistic, ethnic, or cultural differences, and how to report sexual abuse to outside authorities.

115.31 (b) This auditor reviewed the staff training curriculum to include rosters, power points, briefing rosters, and lesson plans. This program is a PowerPoint design by the Moss Group Inc., and specifically designed to provide the PREA training elements listed in 115.31 (a) 1-10. The facility trained all staff members in the last 12 months and provided roll call training rosters demonstrating PREA training across all shifts. The agency training is tailored to the gender of the confined persons at the facility to include male and female confined persons and staff. The facility utilizes the National PREA Resource Center, The Moss Group, and the Bureau of Justice Assistance U.S. Department of Justice Guidance in Cross Gender and Transgender Pat Searches power point within their training curriculum. This auditor was unable to interview confined persons that identify as transgender as no confined persons were currently at the facility that identified as transgender male or transgender female.

115.31 (c) The auditor reviewed a total of seven staff training files. The documentation provided indicates all seven staff received the initial and annual PREA training. A complete listing of all staff was provided by the PREA Coordinator to the auditor, ensuring the training was received by all staff at the facility. The PREA Coordinator interview confirmed staff receive PREA training on an annual basis in the academy, during roll call briefings, and during in-service.

115.31 (d) The ten random staff interviewed during the on-site review and one informal staff interview indicated the inability of staff to properly identify the PREA Coordinator. The facility organizational chart was reviewed during the initial orientation to ensure proper identifications and the PREA Coordinator provided written documentation to this auditor ensuring all training was received at the end of the on-site review. The auditor reviewed seven PREA Training and Understanding Verification Forms. This document informs the student that their signature indicates they understand the training being received. The PREA Coordinator explained this form is to be signed by every staff member at the conclusion of the PREA training period.

Conclusion: Based on the review of the facility training policies, staff training curriculum, samples of the training records, and the documentation of the employee signatures signifying comprehension of the training received, the facility meets compliance with this standard. No further corrective action is currently required.

115.32	Volunteer and contractor training
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 266 544 300">Auditor Discussion</p> <hr/> <p data-bbox="256 344 624 378">Standard 115.32 Analysis</p> <p data-bbox="256 490 1334 524">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="256 636 429 669">Documents:</p> <ol data-bbox="256 703 1390 927" style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire responses 2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 22 3. Southside Regional Jail, Prison Rape Elimination Act (PREA), Volunteer and Contractor Educational Booklet, pages 1-16 <p data-bbox="256 1039 416 1072">Interviews:</p> <ol data-bbox="256 1106 684 1218" style="list-style-type: none"> 1. Contract Food Service Staff 2. Program Volunteer <p data-bbox="256 1330 628 1364">Site Review Observations:</p> <ol data-bbox="256 1397 1115 1576" style="list-style-type: none"> 1. Reviewed three Volunteer/Contractor/ Public Visitor Forms 2. Reviewed the facility Biometric process 3. Reviewed three contractor training files <p data-bbox="256 1688 564 1722">Findings by Provision:</p> <p data-bbox="256 1756 1442 2080">115.32 (a) Agency policy PREA One, page 22 explains the zero-tolerance standard and the facility also provides a volunteer and contractor handbook. This auditor reviewed the volunteer and contractor handbook, and the information includes the zero-tolerance policy, requirements for preventing, reporting, detection, response, and the discipline imposed for violations of this policy. The documentation provided by the facility indicates the volunteer and contractor signature understanding the training received. The auditor reviewed Volunteer Orientation Checklist forms acknowledging they understand the training received.</p>

115.32 (b) The Southside Regional Jail has trained three volunteers and three contractors in the past 12 months. The level of training provided is based on the services they provide and the level of contact they have with confined persons. A contractor or volunteer, which spends at least five hours a week with a confined person, would receive the same training as the staff. Each contractor and volunteer must complete an application and a background check is completed. The application consists of the following information: personal information, current employment information, personal identification information, education, emergency contacts, criminal history, and previous institutional experience. Each volunteer and contractor are screened through the Virginia Crime Information Network and the National Crime Information Center.

115.32 (c) The auditor spoke with one contract staff and one volunteer that provided information relating to the training received, handbook notifications, and background questionnaires. All interviews indicated the ability to convey the zero-tolerance policy, preventive actions, notification procedures, and response practices. All interviews confirmed receipt of the PREA pamphlet. The confined person signs a consent form upon the initial intake screening and there are no documented concerns regarding limits to confidentiality. The auditor observed the notification process during the intake screening. The facility volunteer coordinator provided documentation indicating all volunteers have received the PREA pamphlet and signed the notification indicating the volunteer understands the training received.

Conclusion: Based on the review of the evidence provided, the facility ensures all volunteers and contractors that have contact with confined persons are trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The level and type of training is provided to volunteers and contractors based on their level of contact with the confined persons. The sample of volunteers and contractors interviewed indicated knowledge regarding the zero-tolerance policy and how to report any incidents. The agency maintains documentation confirming that all volunteers and contractors understand the training they have received. No corrective action is required regarding this standard.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Standard 115.33 Analysis
	The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire responses
2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 22-23
3. Reviewed the PREA Intake Pamphlet (Spanish/English Format)
4. Confined Persons Handbook (Spanish/English Format)

Interviews:

1. PREA Coordinator
2. One Intake Staff
3. Ten Randomly Selected Confined Persons
4. Five Informally Selected Confined Persons

Site Review Observations:

1. Observed the Intake Process and Issue of the PREA Pamphlet to Confined Persons
2. Reviewed 21 Confined Person Intake Files
3. Reviewed 21 PREA Intake Handout Receipts
4. Observed PREA Posters and Materials Posted in All Living Units, Medical, and Programs (English/Spanish)

Findings by Provision:

115.33 (a-f) Policy PREA One, Prison Rape Elimination Act, pages 22-23 discuss the confined person education requirements and includes elements (a-f) within the policy. The intake officer described the confined persons receive an initial PREA document upon arrival to the intake section. The auditor observed this process during the intake screening and observed confined persons receiving the PREA pamphlet. This document includes the facility zero tolerance policy, the right to be free from sexual abuse, sexual assault, and sexual harassment. It also includes instructions on how to report an allegation by mail. The confined persons can submit a request form, file a grievance to report allegations of sexual abuse, sexual assault, or sexual harassment. They can report to a staff member or call the PREA hotline numbers. The hotline numbers are linked to the PREA Coordinator, facility Superintendent, and the Meherrin River Regional Jail as the provider not part of the agency. The auditor verified the reporting line is in use and received confirmation of the tested reporting.

Facility policy PREA One indicates within the first 30 days of reception additional PREA information will be provided to the confined persons population. This information includes the right to be free from sexual abuse, sexual harassment, and retaliation. Department policies are introduced, response procedures, and directions on how to report an allegation are explained during the comprehensive review. The facility also proudly displays PREA posters, and one is displayed in the intake section regarding zero tolerance.

The intake staff are required to print a confined persons orientation acknowledgement form and the confined person will sign acknowledging they understand the training they have received. The auditor sampled 21 confined person files indicating receipt of the PREA brochure and the 30-day comprehensive education. The PREA Coordinator reported a total of 1092 confined persons admitted during the past 12 months, and 506 of those length of stay exceeded 30 days. This information was confirmed by the PREA Coordinator during the on-site interview.

There are several reporting methods provided to the confined persons and this is discussed in the PREA pamphlet. The PREA information, handout, and Family Violence Sexual Assault Unit information was posted on the wall near the phones in every living unit, in both Spanish and English formats. Posters are visible throughout the facility reminding confined persons regarding zero tolerance toward all forms of sexual abuse, sexual assault, and sexual harassment. The auditor interviewed 10 randomly selected confined persons indicating PREA knowledge, expectations toward privacy, reporting mechanisms, retaliation monitoring, and pride in the overall sexual safety of the facility. The confined persons phones are equipped with a TTY system, the facility provides a language line for numerous languages and a list of certified staff interpreters. The facility employs staff to provide the information verbally to those that cannot read. The auditor requested the postings of the support services and the reporting hotline numbers be placed on the walls near the phones. This was confirmed during the on-site review and the facility provided written notification during the post audit phase.

Conclusion: The auditor has determined the agency has a policy governing PREA education for confined persons. The auditor has also determined full compliance with this standard based on a review of the following evidence supplied by the facility: intake records of confined persons entering the facility in the past 12 months, signed documents by the confined person indicating the understanding of the training received within 30 days of intake, confirmation of all confined persons receiving the PREA information within one year of the effective date of the PREA standards, review of the confined person handbook, PREA pamphlet, education materials in formats accessible to those that are limited English proficient, deaf, visually impaired, disabled or limited reading skills, and observations of materials posted throughout the facility in both English and Spanish formats. The facility has demonstrated compliance and no corrective action is currently requested.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Standard 115.34 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire responses
2. Agency Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 23-24
3. Facility PREA Training Lesson Plan and Power point
4. Reviewed 11 Correctional Investigator Training Files

Interviews:

1. One Facility PREA Investigator

Site Review Observations:

1. Reviewed the facility PREA Training Lesson Plan and Power point
2. Reviewed 11 Correctional Investigator Training Files
3. Reviewed 11 PREA Training and Understanding Forms
4. Reviewed Four PREA Investigative Files

Findings by Provision:

115.34 (a-d) Agency policy PREA One, pages 23-24 include the specialized training requirements for the facility PREA investigators. The required training includes the following: interviewing sexual abuse victims, proper 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 and prosecution referral.

The facility utilizes investigators from the Greenville County Sheriff's Office for all

criminal investigations and the facility trained investigators are assigned to conduct all administrative investigations. The auditor reviewed 11 training records indicating the facility investigators have received the specialized PREA training for investigators. This was confirmed during the investigator interview, and the auditor reviewed four investigative files indicating the investigator for each case reviewed had completed the specialized investigator training for PREA.

The facility staff completed the National Institute of Corrections PREA Investigator online training curriculum. This training provided the necessary elements required within this standard to include the following: interviewing sexual abuse victims, proper 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 and prosecution referral. The auditor reviewed the training outline and power points associated with this learning environment. This training identified the PREA standards that apply to investigating sexual abuse of confined persons and demonstrated six critical investigative techniques and protocols of competent investigations. The facility maintains records of all training received and is easily accessible for review. Agency policy PREA One, page 24, indicates training documentation will be maintained by the PREA Coordinator in the employee training files. The auditor reviewed 11 certificates for staff members that have taken the specialized investigator training class.

Conclusion: Based on the review of the materials provided by the facility: the agency training policy for investigative staff, the investigator training curriculum, documentation that the agency investigators have completed the required training, and the training records and logs presented by the staff, the auditor finds the facility meets all provisions required within this standard. No further action is currently required.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Standard 115.35 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire responses 2. Agency Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page

24

3. Medical Staff Training Files

4. PREA Specialized Training: Medical and Mental Health Care Lesson Plan

Interviews:

1. One Medical Staff
2. One Mental Health Staff
3. one Sexual Assault Nurse Examiner (SANE)

Site Review Observations:

1. Reviewed medical staff training files
2. Reviewed PREA Training and Understanding Verification Forms

Findings by Provision:

115.35 (a-d) Agency policy PREA One, page 24 explains the facility policy, procedures, and practice associated with this standard compliance, and requires all medical and mental health care practitioners to receive the required specialized PREA training. There is a total of five medical staff that work regularly in the facility and the training records indicate all five staff have received the initial PREA orientation and specialized training. The auditor did not identify any medical staff that did not complete the specialized medical and mental health training. The facility PREA Coordinator provided staff rosters indicating the training received.

The auditor reviewed the facility PREA Medical and Mental Healthcare Lesson plan that included the following topics: PREA medical and mental healthcare standards participant guide, lessons on 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 whom to report allegations or suspicions of sexual abuse and sexual harassment. The auditor reviewed PREA Training and Understanding Verification Forms documenting the medical staff signatures and understanding the training they have received. The auditor interviewed one medical staff, and one mental health staff and all interviews indicated knowledge regarding the specialized medical training.

The forensic medical exams are conducted at the Southampton Memorial Hospital by the Chesapeake Forensic Specialists. The facility maintains documentation demonstrating the medical and mental health practitioners have completed and

	<p>understand the training received. The medical staff interview provided direct knowledge regarding 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 whom to report allegations or suspicions of sexual abuse and sexual harassment. The auditor reviewed an MOU with the Chesapeake Forensic Specialists to conduct Sexual Assault Nurse Exams (SANE). The auditor interviewed the Sexual Assault Nurse Examiner and provided confirmation regarding specialized training specific for conducting SANE evaluations, and the interview confirmed the Memorandum of Understanding between the two agencies. The facility provided the MOU to the auditor during the onsite review.</p> <p>Conclusion: Based on the review of the following evidence: agency policy governing training of medical and mental health care practitioners, documentation showing the training has been received by all staff, a review of the training curriculum and signature indicating understanding of the training received, and confirmation of the medical staff training logs ensuring the staff have received the initial training for employees, contractors, and volunteers dependent upon their status, the auditor finds the facility meets all of the provisions required within this standard with compliance. No further action is required.</p>
--	---

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Standard 115.41 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Agency Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 24-25 3. Southside Regional Jail PREA Risk Assessment Tool <p>Interviews:</p> <ol style="list-style-type: none"> 1. One Staff Responsible for Risk Screening

2. Ten Random Confined Persons
3. Five Informal Confined Persons
4. Ten Random Staff
5. One Informal Staff
6. PREA Coordinator

Site Review Observations:

1. Confined Person Risk Screening Process
2. Confined Person Risk Screening Reassessment Process
3. Intake and Classification Housing Assignment Review
4. 21 Confined Person File Reviews
5. Southside Regional Jail Pre-Audit Questionnaire Responses
6. 21 Southside Regional Jail PREA Risk Assessment Tools

Findings (By Provision):

115.41 (a-l) Agency policy PREA One Prison Rape Elimination Act, pages 24-25 explain the screening procedures for risk of victimization and abusiveness. This policy explains that all confined persons are assessed during an intake screening for their risk of being sexually abused by other confined persons or sexually abusive toward other confined persons. Confined persons will also be screened upon transfer to another facility for their risk of being sexually abused or sexually abusive toward other confined persons. The Southside Regional Jail utilizes the PREA Risk Assessment Tool to accomplish the risk screening process. This tool is utilized during the following procedures: the intake screening process, 20-30 days after receipt into the facility, or whenever a confined person participates in an incident of sexual abuse, new information is provided within the history, and during the annual review.

The auditor observed the screening procedures during the on-site review within the initial receipt of the confined person population during the first two hours of arrival. The review was performed by the intake officer in a private office space with a secure workstation. The auditor also observed a reassessment being conducted by a facility staff member in a private office space with a secure workstation. The auditor confirmed the reassessment was conducted within 20 days of the initial receipt of the confined person. Agency policy PREA One, page 24, indicates this tool must be completed within the first 72 hours of reception to the facility. The auditor reviewed 21 confined person files and determined the intake screenings usually take place

within the same day of arrival, and usually within the first two hours. This follows the 72-hour mandate required by the standard. The files reviewed consisted of 21 confined person assessments upon arrival within the first 72 hours, and 21 confined person reassessment files for allegations of sexual abuse. A total of three of the 21 files reviewed required a mental health referral and the auditor confirmed the meetings with the mental health staff occurred within two days.

The facility utilizes an objective classification screening instrument that includes yes and no responses, classification protocol, a classification questionnaire, a brief jail mental health screen, a booking risks and needs assessment, and a PREA initial intake screening tool. The objective classification screening includes the following criteria for the risk of sexual victimization: confined person mental, physical, developmental disabilities, age, physical build, previous incarcerations, criminal history, violent or nonviolent behaviors, prior sex convictions, whether the confined person is perceived gay, lesbian, bisexual, transgender, intersex, or gender nonconforming, previous sexual victimization, vulnerability perceptions, or if the confined person is detained solely for civil immigration purposes. The auditor observed the staff performing the risk screening to document the responses of the confined person. Staff indicated the scores also reflected the persons personal perceptions of themselves. The auditor reviewed this process with the staff assigned to conduct the screening and monitored the interview being conducted.

The objective classification system questionnaire also assesses confined persons for the risk of being sexually abusive by including the following criteria: prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse. The auditor conducted an interview with the staff performing the screening and was advised, each confined person must be carefully screened, and every evaluation should be unbiased. The results of the screening should be based on the communication between the staff conducting the review and the confined persons own perceptions and responses to the questions. Agency policy PREA One, page 25 indicates confined person's risk level will be reassessed due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the confined person's risk of sexual victimization or abusiveness. Interviews conducted with ten randomly selected confined persons indicated this process was being applied as the confined persons could explain the questions being asked by the facility staff. The confined persons identified the security staff as conducting the initial assessment and the reassessment. This information is consistent with the agency policy previously discussed.

Agency policy PREA One, page 25 explains confined persons will not be disciplined for refusing to answer, or for not disclosing complete information in response to the risk screening, and the facility considers these documents to be treated in a confidential nature. Select staff are authorized to view this data and the facility information technician must authorize usage on all electronic devices. The evidence provided indicates compliance with this standard as once the staff uploaded the responses within the system, he was not able to make revisions. The staff interview advised a new reassessment would have to be uploaded to provide written changes to the responses. The PREA Coordinator interview indicated limited access to review these

	<p>documents once they have been uploaded within the system. Access must be approved by the PREA Coordinator, and a password provided by the information technology department. The PREA Coordinator reported medical staff, intake, and classification staff, and the PREA Coordinator are the current staff designated to have access to the risk assessment scores.</p> <p>Conclusion: Based on the review and analysis of all available evidence to include agency policy governing the screening of confined persons upon admission to the facility or transfer to another facility, screening instruments to determine risk of victimization or abusiveness, and detainee records, the auditor has determined that the agency is fully compliant with this standard regarding confined person risk of victimization and abusiveness. No further corrective action is required.</p>
--	--

115.42	Use of screening information
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Standard 115.42 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire responses 2. Agency policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 26 3. PREA Inmate Risk of Sexual Victimization Questions 4. Southside Regional Jail PREA Risk Assessment Tool <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Coordinator 2. Staff Responsible for Risk Screening 3. Facility Superintendent 4. Reviewed for Confined Persons that Identify as Transgender

5. Reviewed for Confined Persons that Identify as Lesbian, Gay, Bisexual

Site Review Observations:

1. Reviewed the PREA Risk Screening Process
2. Reviewed the PREA Risk Screening Reassessment Process
3. Reviewed 21 Confined Person Files
4. Reviewed the housing unit cell, shower, restroom, and bunk accommodations

Findings (By Provision):

115.42 (a-g) Agency policy PREA One, page 26 explains the facility utilizes the information collected from the risk screenings to inform housing, bed, work, education, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive. This information was confirmed during the interview with the agency PREA Coordinator as the PREA Coordinator advised all facility risk screenings are objective, case-by-case evaluations of the confined person with their own perceptions and views being considered. The views of the confined person are recognized along with the tally provided by the staff on the risk assessment document. The intake screening staff interview indicated utilizing the risk screening instruments to ensure all bed assignments, work assignments, education, and program assignments are carefully reviewed to ensure potential abusers are not interacting with potential victims. The facility electronic housing program (OMS) will also indicate a warning and the name of the confined person will flash red. The system will not allow the user to house potential victims and potential abusers together. The auditor reviewed this process during the on-site review. The auditor was unable to speak with confined persons that identify as a transgender person as the facility reported none on-site during the review. The auditor attempted to confirm confined persons that identify as gay, lesbian, or bisexual but this was unsuccessful as the facility reported no confined persons of this category currently at the facility. All confined persons interviewed agreed their housing was discussed during the classification interview. They agreed to the level of housing recommended by the facility and no further issues were discussed.

Agency policy PREA One, page 26 explains the facility will make individualized determinations on a case- by-case basis to ensure the residents health, safety, and personal views are considered. Reassessments shall be conducted by the intake staff between calendar day 20 and 30 of every confined persons arrival at the facility. Considerations for single cell housing or double cell housing will be determined using the risk assessment tool. The PREA Coordinator confirmed the intake staff will review and recognize an imbalance of power within the cell assignment. This is performed during individualized meetings, conversations, group activities, review of the

disciplinary actions, and considerations based on the confined persons personal views. The software will also indicate a warning within the system, the confined person's name will flash in red, and the system will not authorize the two confined persons to be housed together. This was confirmed during the intake screening staff interview, and all assessments will be documented on the PREA Risk Assessment Tool. The auditor recommended maintaining a keep separate list to document the keep separates within the system. The auditor confirmed this process can be printed from within the OMS system and the facility provided notification.

The agency policy PREA One, page 26 explains the departments approach to working with transgender and intersex confined persons. Importantly, this policy explains the classification process and ensures the staff effectively interact professionally and respectfully with this specialized population. The facility is required to develop a Plan of Action to prepare for reception and housing of transgender and intersex populations. Each confined person is considered on a case-by-case basis and the final determination is mandated by the Executive Staff as recommended by the PREA Coordinator. The facility reported no confined persons were housed at the facility in the past 12-months that identify as transgender, and the auditor was unable to interview this special population.

The facility site review provided the opportunity to confirm all confined person showers are conducted separately, a shower curtain is provided for privacy, and the ten random confined person interviews and five informal confined person interviews concluded no issues reported due to other staff or confined persons viewing them while changing clothes, showering, or using the restrooms. The ten random staff interviews advised no concerns with this type of issue reported. The video monitoring equipment did not indicate any concerns regarding cross-gender viewing during episodes of undress or restroom activities. Staff evaluate the housing considerations for transgender and intersex confined persons to ensure they are provided the opportunity to shower separately from other confined persons. All showers are conducted separately, and confined persons can purchase clothing items through commissary to assist with shower activities. There are designated changing stations to provide additional privacy for the population with multiple beds in each dayroom.

The facility does not place lesbian, gay, bisexual, transgender, or intersex confined persons in a dedicated housing facility, unit, or wing based on their status. This is forbidden in policy PREA One, page 26. The facility Superintendent interview confirmed there are no consent decrees regarding legislative action pertaining to restrictive housing considerations. The on-site review indicated special populations are not assigned to one housing unit as the auditor was able to interview confined persons from all living units.

Conclusion: Based on the review and analysis of the following available evidence: agency policy governing the use of screening information, documentation of the use of screening, documentation of housing decisions, reassessments, and facility housing considerations for the special populations, the auditor has determined that the agency is fully compliant with this standard regarding confined person risk of victimization and abusiveness.

115.43 Protective Custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

Standard 115.43 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire responses
2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 26-27 & 33
3. Administrative Segregation Form

Interviews:

1. Facility Superintendent
2. Staff Supervising Confined Persons in Segregated Housing
3. No Confined Persons in Segregated Housing for Risk of Suffering Sexual Abuse Identified

Site Review Observations:

1. Confined Person Case Files
2. Segregation Housing Records

Findings (By Provision):

115.43 (a-e) Agency policy PREA One, pages 26-27 and 33, defines the information within this standard. Confined persons at high risk of sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and there are no other alternative means of separation. The confined person will not be held for more than 24 hours to complete the assessment. This policy was confirmed during the interview with the facility Superintendent. This policy allows for programming, privileges, education, and work

opportunities to the extent possible. If the facility restricts access to these opportunities, the facility must document on the Administrative Segregation Form. This auditor reviewed the segregated housing records and spoke with one staff member that supervises confined persons in segregated housing. No confined persons in the past 12 months were identified to be housed in segregated housing involuntarily. The preaudit questionnaire indicated nine confined persons have been housed in segregation due to high risk of sexual abuse. However, after further clarification by the PREA Coordinator this was identified as a misprint. The total should have been zero. The auditor reviewed the segregated housing records and determined there were no confined persons currently in special housing for high risk of sexual victimization. Facility policy PREA One, page indicated all reviews for confined persons in segregation are conducted within 30-days. The facility reported no confined persons have been housed in segregation for high risk of sexual victimization in the past 12 months.

Conclusion: Based on the review and analysis of all available evidence, the auditor has determined that the agency has a policy governing involuntary segregated housing for confined persons at high risk for sexual victimization. The facility conducts 30-day reviews and documents accordingly. The auditor reviewed facility records of housing assignments, segregation logs, and verified out of cell activities were not interrupted throughout this review. The auditor has determined the facility is fully compliant with the provisions of this standard.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Standard 115.51 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Agency Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 27-30 3. 2013 Confined Person Handbook 4. Facility Issued Confined Person PREA Pamphlet

5. Southside Regional Jail, Prison Rape Elimination Act (PREA), Inmate Comprehensive Educational Booklet, English/Spanish, pages 1-12

Interviews:

1. Ten Random Staff
2. Ten Random Confined Persons
3. One Informal Staff
4. Five Informal Confined Persons
5. PREA Coordinator
6. Facility Superintendent

Site Review Observations:

1. Reviewed the Family Violence Sexual Assault Unit information posted in the confined person handbook.
2. Reviewed the Third-Party mailing address postings.
3. Reviewed the facility training records and lesson plan.

Findings (By Provision):

115.51 (a-d) The Southside Regional Jail provides multiple methods for confined persons to privately report sexual abuse, sexual assault, sexual harassment, retaliation against reporting staff, neglect, and contributing factors to these incidents. These factors are described in policy PREA One, pages 27-30 and they include: verbally, in writing, anonymously, third-party reporting, request forms, grievance forms, report directly to a family member or friend, write a letter to the staff, call the PREA hotline number, and submit a request for assistance to the staff they trust. The Greenville County Sheriff's Office Hotline number is posted throughout the facility and in the confined person handbook. The confined person can call the Sheriff's Office directly to report the incident and this information is also reported to the facility PREA Coordinator, and the Meherrin River Regional Jail. The auditor reviewed an MOU with both agencies and tested the phone number during the onsite review.

The facility has a documented Memorandum of Understanding with the Greenville County Sheriff's Office and the Meherrin River Regional Jail to provide one method of anonymous confined person reporting to a public entity that is not part of the agency. This information is posted in all confined person living units, documented in the handbook, and available upon the intake PREA pamphlet. The auditor interviewed ten

	<p>randomly selected confined persons and conducted five informal confined person interviews that concluded knowledge of this process. One confined person volunteered to show the auditor the third-party poster located near the phone in the dayroom during the on-site review. This included the information for the Family Violence Sexual Assault Unit information and the auditor tested the phone line during the onsite review.</p> <p>The Southside Regional Jail does not detain confined persons solely for civil immigration purposes and this was confirmed by the PREA Coordinator and the facility Superintendent interviews. However, steps are in place to conduct calls for immigration purposes and these calls are authorized at no cost to the confined person population. All facility mail related to PREA is considered privileged correspondence and is treated in the same manner as legal materials. These items must be opened in front of the confined person and outgoing mail is not searched.</p> <p>Agency policy PREA One, pages 27-30 require all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment, retaliation against confined persons or staff, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This policy also advises the Superintendent or designee will monitor the conduct and treatment of confined persons or staff who reported sexual abuse or sexual harassment for at least 90 days. The Superintendent confirmed this monitoring period during the interview process. The Superintendent also confirmed any allegations reported by another facility or to another facility will be performed from the agency head to the other facilities agency head in writing. This information will then be passed on to the facility PREA investigator promptly.</p> <p>Conclusion: The auditor has reviewed all available information provided by the facility during the Pre-Audit, on-site review, and during the post audit phase. The auditor has determined the facility has several internal methods for confined persons to privately report all allegations of sexual abuse and sexual harassment. This includes internal methods as well as external bodies. The facility accepts reports verbally, in writing, anonymously, and from a third party. Confined persons at Southside Regional Jail are not detained solely for civil immigration services but there is a system in place for free calls for civil immigration purposes. Therefore, the facility has met the requirements of this standard and no further action is required.</p>
--	---

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Standard 115.52 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire Responses
2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 28-29
3. Confined Person Handbook
4. Confined Person Grievance Forms
5. Intake PREA Pamphlet

Interviews:

1. PREA Coordinator
2. Ten Random Confined Persons
3. Ten Random Staff

Site Review Observations:

1. Grievance forms are readily available to the population in all housing units.
2. Reviewed the Grievance Log

Findings (By Provision):

115.52 (a-g) Facility policy PREA One, pages 28-29 describe the grievance procedure for managing confined person grievances regarding sexual abuse. Agency policy PREA One, page 28 explains confined persons shall utilize the grievance system to report sexual abuse or sexual harassment by a staff member or confined person for sexual abuse. If a confined person files a grievance related to staff on confined person sexual abuse/sexual harassment or confined person sexual abuse, the facility Grievance Coordinator shall reject the grievance and forward it to the facility PREA Coordinator for tracking and investigation. The confined person shall be notified of this action. The facility PREA Coordinator reports that the PREA Investigator will be notified immediately to begin the investigation.

The facility reported no allegations of sexual abuse and three allegations of sexual harassment have been submitted through the grievance process in the last 12 months. Interviews with the PREA Coordinator revealed that while the grievance process is set up for reporting of allegations of sexual abuse and sexual harassment,

in the instances such allegations are received through this channel, they are forwarded to the investigator for immediate investigation. Agency policy PREA One states, the confined person grievance system is intended to deal with a wide range of issues, procedures, or events that may be of concern to a confined person. It is meant to address incidents of an urgent or emergency nature including allegations of sexual abuse. Any allegation of a sexual nature (abuse/harassment) against a staff member or confined person for sexual abuse must be addressed through investigation immediately. When faced with an incident of an urgent or emergency nature, the confined person shall contact the nearest staff member for immediate assistance. The auditor reviewed the three grievances alleging sexual harassment and verified all allegations were investigated in a timely manner.

The auditor reviewed the confined person handbook, and the confined person grievance system is listed as an available method of reporting allegations of sexual abuse, sexual assault, or sexual harassment. The auditor conducted ten interviews with randomly selected staff, and these interviews indicated knowledge of the confined persons being allowed to submit grievances regarding sexual abuse. The auditor conducted interviews with ten randomly selected confined persons and several of the interviews indicated they could submit a grievance to notify the staff of an allegation of sexual abuse. The auditor reviewed for rejected grievances indicating allegations of sexual abuse, but the facility reported no grievances received for allegations of sexual abuse within the past 12 months. However, facility policy PREA One explains the response to all grievances related to sexual abuse is immediate and a final decision will be made within 48 hours. All facility grievances are returned with a response to the confined person within five days and the confined person has an opportunity to appeal the decision to the facility Superintendent. The final decision must be returned within five days. The auditor verified this process was adhered to in review of the three grievances submitted for sexual harassment.

Conclusion: The Southside Regional Jail recognizes the grievance system as a primary method of reporting for the confined persons. All grievances received relative to sexual abuse will be accepted and forwarded to the facility PREA investigator for immediate investigation. The facility has a policy to ensure grievances alleging sexual abuse or sexual harassment are forwarded for investigation. Confined persons are informed of the proper ways to submit allegations in the intake PREA pamphlet, comprehensive education, and the confined person handbook. The auditor determined the facility meets the requirements of this standard as its policy is to forward all grievances alleging sexual abuse and sexual harassment immediately to the PREA Investigator for investigation.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Standard 115.53 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire Responses
2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 29-30
3. PREA Intake Pamphlet (Spanish/English)
4. Facility PREA Posters (Spanish/English)
5. 2013 Confined Person Handbook
6. Memorandum of Understanding with Family Violence Sexual Assault Unit, August 2, 2016
7. Southside Regional Jail, Prison Rape Elimination Act (PREA), Inmate Comprehensive Educational Booklet, English/Spanish, pages 1-12

Interviews:

1. Ten Random Confined Persons
2. Confined Persons Who Reported Sexual Abuse
3. Facility Superintendent
4. PREA Coordinator
5. Victim Advocate Provider

Site Review Observations:

1. Verified all third-party reporting materials and Family Violence Sexual Assault Unit materials are posted in the confined persons living units in both English and Spanish.
2. Verified telephone and mail monitoring notices are posted in the confined person living units in both English and Spanish.
3. Tested the hotline numbers for adequacy and received confirmation.

Findings (By Provision):

115.53 (a-c) Agency policy PREA One, page 29 explains the PREA Coordinator shall ensure that confined persons are offered and provided with access to outside victim advocates for emotional supportive services related to sexual abuse which has occurred in a confinement setting. During non-working hours, the Shift Commander shall be responsible for ensuring the support services in Southside Regional Jail are available. Supportive services may be provided via a variety of methods including in person, during a non-monitored phone call, and/or in writing. The PREA Coordinator shall inform confined persons, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. The facility ensures phones within the facility are monitored, that the level of monitoring is clearly posted next to the phone. The auditor noted postings in English and Spanish, and the facility ensures the level of monitoring is clearly posted in the facility handbook and on bulletin boards.

Policy PREA One, pages 29-30 include the information regarding outside victim advocates for emotional support services relating to sexual abuse, sexual assault, and sexual harassment. Southside Regional Jail utilizes the services of the Family Violence Sexual Assault Unit, a nonprofit organization providing confidential services to persons through counseling, preventive education, and advocacy. Southside Regional Jail also enlists the services of the Greenville County Sheriff's Office and the Meherrin River Regional Jail to provide an outside reporting mechanism for confined persons. This is accomplished by calling a hotline number to access the services and provide notifications. The Family Violence Sexual Assault Unit is a community-based volunteer program designed to enhance the quality of life for victims of sexual violence and provide survivors of sexual abuse with emotional support. Southside Regional Jail established a Memorandum of Understanding with the Family Violence Sexual Assault Unit, and the auditor reviewed both documents for clarity and all signatures are current and binding. The MOU may be revised at any time by either party, or the terms of the agreement do not expire without written notice by both parties. The victim services information is posted in all living units, near the phones, listed on the website, provided in the handbook, and listed on the initial intake PREA pamphlet provided upon arrival at the facility. The auditor confirmed the facility provides the name and address, at no cost to the confined person and these services are confidential. The auditor contacted and verified the services during the Pre-Audit phase and onsite review. A confined person assisted the auditor to demonstrate how to contact the number and the auditor confirmed the process with the staff during the call.

The Southside Regional Jail does not detain persons solely for civil immigration services. The auditor confirmed the facility provides persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies. The ten random staff interviewed were able to identify the victim services as an option for confidential support services. A total of ten random confined person interviews indicated knowledge of the victim services, identified the phone number,

	<p>and the poster. The confined persons reported feeling confident these services would be useful, but no confined persons advised attempts to contact the phone number. The PREA Coordinator was aware of currently confined persons that have utilized the service as they report to the facility when requested. The volunteer interview confirmed confined persons at Southside Regional Jail have received the services at the facility in the past. Interviews with the confined persons attempted to identify those that have reported an allegation in the past that were offered the PREA pamphlet and have not chosen to use the services.</p> <p>Conclusion: Based on the review of all evidence supplied by the facility to include: agency policy regarding an outside victim advocate for emotional support and services, a policy describing one method for confined persons to report anonymously, a policy regarding confined persons being detained solely for immigration purposes, a policy for staff to privately report, accepting reports from those in writing, an MOU with the victim services, confined persons handbook, and staff handbooks, the auditor has determined the facility meets the requirements of this standard. No further action is currently required.</p>
--	--

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Standard 115.54 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 30 3. Zero-tolerance and third-party reporting poster (English/Spanish) 4. Greenville County Sheriff's Office MOU, August 11, 2020 5. 2013 Confined Person Handbook 6. Southside Regional Jail, Prison Rape Elimination Act (PREA), Inmate Comprehensive Educational Booklet, English/Spanish, pages 1-12

	<p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Coordinator 2. Ten Random Confined Persons 3. Five Informal Confined Persons <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Identified the PREA posters in both Spanish/English format indicating the third-party reporting address. 2. Reviewed the facility website for the third-party reporting information. <p>Findings (By Provision):</p> <p>115.54 (a) The facility has established a procedure to receive third-party reports of sexual abuse and sexual harassment. This is described in facility policy PREA One, page 30. This information is also published on the facility's website and the notification process is to notify the Greenville County Sheriff's Office by either calling the office directly or utilizing the facility reporting hotline. There are posters throughout the facility such as: living units, medical, programs, intake, visitation, and reception regarding third-party reporting and the address required to file the complaint. The confined persons are provided an address to contact the Greenville County Sheriff's Office, and they can call the PREA hotline number which is also linked to the Meherrin River Regional Jail. The auditor reviewed an MOU with both agencies during the on-site review. This information is posted on the PREA intake pamphlet, confined person handbook, and signs posted near the phones in the living Units. The ten random and five informal confined person interviews indicated knowledge of the third-party reporting methods and most interviews advised they felt comfortable reporting all allegations of sexual abuse. The auditor tested the hotline for accuracy and received written confirmation the notification was received. The facility provides postings, pamphlets, and a handbook to identify reporting documentation.</p> <p>Conclusion: Based on the evidence provided, the auditor was able to determine the facility provides publicly distributed information on how to report confined person sexual abuse or sexual harassment on behalf of the confined persons. No corrective action is currently required.</p>
--	---

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

Standard 115.61 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire Responses
2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 27
3. Four Incident Report Forms
4. Four Investigative Files

Interviews:

1. Ten Random Staff
2. One Informal Staff
3. Facility Superintendent
4. PREA Coordinator
5. One Medical Staff
6. One Mental Health Staff

Site Review Observations:

1. Reviewed Four Investigative Files
2. Reviewed Four Incident Reports
3. Reviewed Four Allegations of PREA Reports Referred to the PREA Investigator
4. Compared the dates received to the date the investigation began

Findings (By Provision):

115.61 (a-e) Agency policy PREA One, page 27 describes the agency requirements for all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment immediately. The policy also requires the staff to report any knowledge of retaliation against confined persons or staff who reported

incidents and staff neglect that may have contributed to an incident or retaliation. This was confirmed during the interview with the facility Superintendent and the PREA Coordinator. The auditor verified this process during the ten random staff and one informal staff interview as staff conveyed the directive to notify a supervisor immediately.

The staff also identified the Administrative First Sergeant as the primary source for conducting PREA investigations. Policy PREA One, page 27 indicates apart from reporting to a designated supervisor or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to make treatment, investigation, and other security and management decisions. The auditor interviewed ten random staff indicating knowledge of this policy and the mandatory reporting requirements.

The Southside Regional Jail does not house youthful offenders as confirmed during the census report review. Agency policy PREA One explains if the alleged victim is under the age of 18, the facility shall refer the allegation to the designated State or local services agency under applicable mandatory reporting laws. The auditor interviewed one medical staff and one mental health worker and both interviews indicated knowledge regarding mandatory requirements as one medical staff member advised she will always report an allegation to her supervisor and the Shift Commander. Agency policy PREA One explains all reports received by the hotline, established for the third-party and anonymous reporting of sexual abuse or sexual harassment are reported to the PREA Coordinator immediately. The process shall be handled as follows: when the Greenville County Sheriff's Office receives Prison Rape Elimination Act (PREA)-related complaint correspondence at this address, the letter shall be scanned and emailed to the PREA Coordinator for tracking purposes and investigation. The auditor reviewed four incident report forms indicating PREA allegations were referred immediately by the PREA Coordinator for investigation. During the on-site review, the auditor reviewed four investigative files, and four incident reports relating to a sexual harassment allegation. The auditor did not find any concerns relating to a delayed investigation. All investigations began either the same day or the next working day. The facility reported no allegations of sexual abuse were submitted in the past 12-months.

Conclusion: Based on the evidence provided by the facility, the auditor determined the agency has relevant policies governing the reporting by staff regarding incidents of sexual abuse or sexual harassment, and the reporting by the facility regarding all allegations of sexual abuse and sexual harassment to designated investigators. The facility medical staff indicated no limits toward confidentiality regarding the reporting of sexual abuse, sexual assault, or sexual harassment allegations as all staff interviewed advised reporting to the Shift Commander immediately. The facility does not house youthful offenders but the agency policy mandates reporting to the designated State and local services for an alleged victim under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute. The auditor reviewed samples of the reports provided by investigators and determined all investigations began immediately. The facility meets the provision requirements of this standard, and no further action is required.

115.62	Agency protection duties
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 266 544 300">Auditor Discussion</p> <hr/> <p data-bbox="256 344 624 378">Standard 115.62 Analysis</p> <p data-bbox="256 490 1334 524">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="256 636 424 669">Documents:</p> <ol data-bbox="256 703 1386 882" style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 31 3. PREA Allegations and Bed Moves Reports <p data-bbox="256 994 416 1028">Interviews:</p> <ol data-bbox="256 1061 1370 1240" style="list-style-type: none"> 1. Facility Superintendent 2. Ten Random Staff 3. Reviewed for Confined Persons in Segregation for High Risk of Sexual Abuse <p data-bbox="256 1352 628 1386">Site Review Observations:</p> <ol data-bbox="256 1420 1442 1576" style="list-style-type: none"> 1. File reviews indicated confined person behavior concerns as opposed to high risk for sexual victimization 2. Reviewed PREA Allegations and Bed Moves Reports <p data-bbox="256 1688 588 1722">Findings (By Provision):</p> <p data-bbox="256 1756 1482 2080">115.62 (a) Agency policy PREA One, page 31 ensures that when Department staff learn that a confined person is subject to a substantial risk of imminent sexual abuse, appropriate and immediate action shall be taken to protect the confined person. Alleged victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take</p>

	<p>preliminary steps to protect the alleged victim.</p> <p>The facility Superintendent indicated segregation may be ordered immediately to protect the confined person or others, but the action must be reviewed within 24 hours by the housing committee. The Superintendent interview determined the agency takes all allegations seriously and any confined person subject to imminent sexual abuse will receive immediate action. The facility reported no incidents in the past 12 months that determined a confined person was subject to a substantial risk of imminent sexual abuse. The auditor reviewed PREA Allegation and Bed Move reports indicating the housing unit change would be performed immediately upon notification. The auditor interviewed confined persons identified as being housed in segregation and the interviews determined the housing to be due to behavior concerns and not for high risk of sexual victimization. No confined persons were available for interview that were housed in segregation due to high risk of sexual victimization. The facility reported no incidents of this nature were reported in the past 12 months.</p> <p>Conclusion: The auditor determined the agency has a policy governing the facilities protection duties when confined persons are subject to a substantial risk of imminent sexual abuse. The auditor reviewed relevant documentation related to the determination of confined persons substantial risks and the agency's response. This includes medical requirements, investigator requirements, and the relevant views of the facility leadership toward compliance. Based on the review of all evidence provided the facility meets the provision of this standard. No further action is required.</p>
--	---

115.63	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Standard 115.63 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 31 3. Notification of Sexual Abuse Allegation to Another Facility Form

4. Reviewed one case file for notification to another facility

5. Reviewed for case files for notification received from another facility

Interviews:

1. Agency Head

2. Facility Superintendent

3. PREA Coordinator

Site Review Observations:

1. Attempted to review case files including the case history, email notifications from facility heads, Notification of Abuse Allegation Forms, and investigation reports from another facility.

2. Reviewed case files including the case history, email notifications from facility heads, Notification of Abuse Allegation Forms, and investigation reports to another facility.

Findings (By Provision):

115.63 (a-d) Facility policy PREA One, page 31 explains upon receiving an allegation that a confined person was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. The facility Superintendent indicated he would personally contact the Superintendent at the facility where the abuse occurred, and he would expect the other agency to return the same courtesy. The Superintendent explained, "All allegations are taken seriously and treated with an immediate response". The agency policy PREA One explains the documented notification will occur within 72 hours and must be documented in the PREA Tracking System (PTS). Southside Regional Jail has reported one allegation of sexual abuse to another facility in the past 12 months. The auditor reviewed the investigation document and the written notification to the other facility.

Southside Regional Jail has not received any allegations of sexual abuse from other facilities in the past 12 months. The auditor reviewed the process of recording the investigation number and confirmed the investigative actions. The auditor reviewed email notifications for compliance regarding previously reported incidents and the notification would be provided within the mandated 72-hour timeframe to the facility head and documented in an incident report. The Superintendent explained all notifications are received by the agency PREA Coordinator and the Superintendent. The file reviews included the following documents: the case history, email

	<p>notifications from facility heads, Notification of Abuse Allegations Form, and the investigative report. The PREA Coordinator states, "We send the confined person to medical, they are offered medical and mental health referrals, they are offered rape crisis counseling, they are followed for retaliation monitoring, Psychology meets with them and completes paperwork, and then follows them for 90 days. All of this is then forwarded to the facility where the allegation occurred". The auditor verified the steps were provided in the allegation that was reviewed.</p> <p>Conclusion: The facility has a policy to ensure reporting of allegations of sexual abuse of confined persons while confined at another facility. The agency policy requires all allegations of sexual abuse received from another facility to be investigated immediately. All investigations and notifications are documented and referred to the investigator within 72 hours of receipt of the allegation. The auditor reviewed the documentation of allegations that a confined person was abused while in confinement, documentation that the notifications occurred within 72 hours, and the documentation of the notification from each agency head or appropriate staff person. Based on the evidence provided the facility meets the provisions required within this standard and no further action is required.</p>
--	--

115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Standard 115.64 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 31-32 3. Employee Handbook <p>Interviews:</p> <ol style="list-style-type: none"> 1. Non-Security Staff First Responder 2. Security Staff First Responder

3. Requested Confined Persons Who Reported Sexual Abuse

4. Ten Random Staff

Site Review Observations:

1. Reviewed for the Initial Response Checklist for the victim and the abuser
2. Reviewed for Emergency Response Cards being utilized by the staff

Findings (By Provision):

115.64 (a-b) Agency policy PREA One, pages 31-32 describe the staff first responder duties. The policy indicates the staff responsibilities for security and non-security employees. The directives for the security staff include the following four step action plan: separate the alleged victim and abuser, preserve, and protect the scene, collect the evidence if time is allotted, and do not allow the victim or abuser to participate in any activities that may destroy evidence such as: washing, brushing teeth, changing clothes, urinating, defecating, smoking, or eating. If the first responder is a non-security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify a security staff member immediately. The auditor interviewed confined persons attempting to identify those who reported an allegation of sexual abuse. Random and informal confined person interviews indicated a feeling that the staff respected the incidents and attempts to keep them safe from their abusers. The facility reported no allegations of sexual abuse within the past 12 months, no cases that involved the separation of the victim and the abuser, no cases where physical evidence was collected, and the staff informed the auditor they would ensure the confined person does not make any attempts to destroy the physical evidence.

The auditor concluded staff knowledge regarding these actions throughout the facility as the auditor interviewed one security staff designated as a first responder, and one non-security staff. The common response was to notify a supervisor immediately and follow the four-step action plan. The action plan was also noted in the employee handbook, staff training curriculum, and verified during the Superintendent interview. The auditor interviewed ten random staff members, and all ten were able to convey the action plan steps required within the policy to provide an immediate response. The auditor recommended the staff should carry emergency response cards that indicate the four-step action plan. The PREA Coordinator and the facility Superintendent discussed implementing this program in the future.

Conclusion: The agency has a policy governing the staff first responder duties to include security and non-security staff response. The policy mandates the four-step action plan previously mentioned within the body of the narrative. The auditor reviewed documentation and interviews indicating full compliance with this standard. No further action is required by the facility as they have met the requirements of this

	standard.
--	-----------

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.65 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Policy PREA One Prison Rape Elimination Act (PREA), March 6, 2017, pages 41-46 3. Southside Regional Jail Coordinated Response Plan <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Superintendent 2. PREA Coordinator 3. Ten Random Staff 4. One Informal Staff <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Discussed individual response requirements with staff documented in the plan 2. Reviewed the Coordinated Response Plan <p>Findings (By Provision):</p> <p>115.65 (a) Southside Regional Jail has a written plan to coordinate actions for all staff during reported allegations of sexual abuse, sexual assault, and sexual harassment. The action plan describes the procedures for the following participants: volunteers</p>

	<p>and contractors, support staff, security staff, shift commanders, shift supervisors, first responder duties, medical and mental health practitioners, investigators, and facility leadership. The facility plan documented, provides detailed actions for providers, and the staff were able to convey their specific duties during the ten random and one informal staff interviewed. The facility Superintendent and the PREA Coordinator interviews indicated reminders to staff regarding their specific duties annually and the auditor reviewed this information within the training plan.</p> <p>Conclusion: The Southside Regional Jail has a facility institutional response plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership. The auditor reviewed documents and conducted staff interviews to measure the effectiveness of the written plan. Based on the evidence provided by the facility, compliance was indicated, and no further action is required.</p>
--	---

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.66 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 32 3. Comprehensive Medical and Behavioral Health Services Agreement Provided by CBH Medical of Virginia for Southside Regional Jail, January 20, 2022, pages 1-14 4. Trinity Services Group, Inc Contract, July 13, 2021, pages 1-7 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Superintendent

	<p>Findings (By Provision):</p> <p>115.66 (a) The Southside Regional Jail has not entered into any agreement that limits the agency’s ability to remove alleged staff sexual abusers from contact with confined persons pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. In deciding to suspend an employee pending investigation, the Department must be able to demonstrate that the “nature of the allegations” is such that there is cause to remove the employee from the institution pending investigation and not that the employee committed the offenses. The FLSA regulations, for exempt employees, permit suspensions of less than a full workweek for violations of written workplace policies applicable to all employees. This provision applies to applicable written work rules which prohibit serious workplace misconduct, which includes, but is not limited to, workplace violence, sexual abuse, sexual harassment, substance abuse, internet access policies, Code of Ethics violations, or violations of state or federal law. Discipline for these infractions should be consistent with policy PREA One, page 32 of this procedure’s manual.</p> <p>Conclusion: The auditor reviewed the evidence provided by the facility and found no evidence to deny satisfactory compliance toward this standard. These documents do not limit the agency's ability to remove alleged staff sexual abusers from the contact with any confined persons pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The facility Superintendent interview confirmed this process and indicated disciplinary action will be followed by notification to the Greenville County Sheriff’s Office for criminal acts and certifying bodies for certification review.</p>
--	---

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.67 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Retaliation Monitoring Form 3. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 32-33

Interviews:

1. Agency Head
2. Facility Superintendent
3. Staff Member Assigned to Monitor Retaliation
4. Requested Interviews with Confined Persons who Reported Sexual Abuse
5. Requested Interviews with High Risk of Sexual Victimization Confined Persons
6. Ten Random Staff
7. Ten Random Confined Persons
8. PREA Coordinator

Site Review Observations:

1. Reviewed investigative report templates and retaliation monitoring forms

Findings (By Provision):

115.67 (a-e) The agency has established a policy to protect all confined persons and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation, and this is described in agency policy PREA One, pages 32-33. The Department shall protect all confined persons and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other confined persons or staff.

The facility attempts to employ multiple protection measures by monitoring housing changes, transfers for victims and abusers, removal of staff through termination, emotional support services, monitoring the performance evaluations, disciplinary actions, unannounced lockdowns, denial of privileges, grievances, and the confined persons are provided with materials to assist the communication process. Literature is posted in the handbook, posters, and methods of reporting retaliation described in daily education. The Superintendent indicated additional reviews may be considered once the 90-day review has concluded.

Random interviews with ten staff members and ten random confined persons indicated no cause for concern with retaliation. As one interview indicated, they are keeping us safe and watching us all the time. The auditor interviewed the PREA Coordinator and no confined persons were identified as high risk for sexual victimization and no interviews indicated retaliation concerns. The facility reported no

	<p>allegations of retaliation in the past 12 months, and the classification files documented the 90-day review. The auditor reviewed the Retaliation Monitoring Form and recommended an evaluation is conducted each week for a total of 13 weeks (90 days). The facility PREA Coordinator is in the process of updating the new form and all reviews indicated no concerns regarding retaliation.</p> <p>Conclusion: The Southside Regional Jail has an agency policy protecting all confined persons and staff who report abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation. This extends from retaliation from confined persons or staff and includes the monitoring of confined persons and staff following a report, and the agency response to the suspected retaliation. The auditor reviewed documentation and interviews to support these findings and the auditor finds the facility has met the provisions of this standard with compliance. No further action is required.</p>
--	---

115.68	Post-allegation protective custody
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Standard 115.68 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 33 3. Confined Person Handbook <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Superintendent 2. Staff Supervising Segregated Housing 3. Confined Persons in Segregated Housing <p>Site Review Observations:</p>

1. Reviewed if records and documentation of housing assignments of confined persons who alleged to have suffered sexual abuse exist. Documentation of in-cell and out- of-cell programs, privileges, education, and work opportunities for those in segregated housing.
2. Reviewed if the facility restricts access to programs, privileges, education, or work opportunities.
3. Reviewed records for length of placement in segregated housing for those who alleged to have suffered sexual abuse.
4. Reviewed records indicating confined persons are placed in involuntary segregated housing for a period that does not ordinarily exceed 30 days.
5. Reviewed for Case files of confined persons who alleged to have suffered sexual abuse held in involuntary segregated housing in the past 12 months.

Findings (By Provision):

115.68 (a) Policy PREA One, page 33 clearly defines the information within this standard. Confined persons at high risk of sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and there are no other alternative means of separation. The confined person will not be held for more than 24 hours to complete the assessment. Adherence to the guidelines set forth in policy PREA One, page 33 of this procedure's manual shall occur when confined persons at a high risk for sexual victimization or those who have alleged sexual abuse are involuntarily placed into Protective Custody (PC) after a determination has been made that no other available alternative means of separation exist from likely abusers. An administrative hearing shall be conducted as outlined below.

1. The hearing shall be conducted by the classification staff. When a confined person is placed into involuntary Administrative Custody (AC) due to high risk for sexual victimization or after allegedly suffering sexual abuse, the hearing shall take place within 24 hours of placement or the next business day.
2. The reason(s) for the AC confinement must be explained to the confined person in writing and the person must be provided with the Administrative Segregation Form. When a confined person is placed into involuntary AC due to high risk for sexual victimization or after allegedly suffering sexual abuse, the document must articulate:
 - a. the basis for the staff member's concern for the confined persons safety.
 - b. the other alternative means of separation that were explored, and
 - c. the reason no alternative means of separation can be arranged.

This policy was confirmed during the interview with the facility Superintendent. This policy allows for programming, privileges, education, and work opportunities to the

extent possible. This auditor reviewed the segregated housing records and spoke with the staff that supervise confined persons in segregated housing. No confined persons in the past 12 months were identified to be housed in segregated housing involuntarily. The initial review would be conducted within 24 hours. The confined persons would be reassigned to the general population. The facility would document the privileges such as recreation, education, and programming. The confined person may not be authorized work opportunities due to behavior concerns and this would be documented on the segregation forms. The auditor interviewed the confined persons in the restricted housing unit, and they were able to utilize all authorized activities during confinement. The auditor determined no confined persons were housed in segregation due to concerns regarding their sexual safety.

Conclusion: The agency has a policy governing the use of segregated housing to protect a confined person who is alleged to have suffered sexual abuse. The auditor reviewed the facility evidence provided, interviews, and on-site compliance determinations. Based on the evidence provided the facility demonstrates compliance with all provisions within this standard. No further action is required.

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.71 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Investigative Reports 3. Record Retention Schedule 4. Copies of Case Records 5. Sample of Cases Referred for Prosecution <p>Interviews:</p> <ol style="list-style-type: none"> 1. Investigative Staff

2. Confined Persons who Reported Sexual Abuse not Identified

3. Facility Superintendent

4. PREA Coordinator

Site Review Observations:

1. Reviewed Case Files

2. Reviewed Investigative Reports

Findings (By Provision):

115.71 (a-l) The Greenville County Sheriff's Office conducts all criminal investigations regarding allegations of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment for the Southside Regional Jail as required in facility policy PREA One, pages 33-35. This information was confirmed during the investigator interview. Agency policy requires the investigations to be conducted promptly, thoroughly, and objectively for all allegations of sexual abuse, sexual assault, and sexual harassment. The auditor reviewed four investigative files to include reports from the third-party allegations and no cases are still pending.

The facility reported no staff on confined person allegations of sexual abuse, no confined person allegations of sexual abuse on another confined person, four staff on confined person allegations of sexual harassment, and no allegations of confined person sexual harassment on another confined person. The facility reported the four cases as closed, and unfounded for sexual harassment. No allegations of sexual abuse were reported in the past 12 months. The facility reported no cases were referred to the prosecutor for indictment.

Agency policy requires the use of investigators who have received specialized training in sexual abuse investigations. This training includes interviewing sexual abuse victims, proper 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 Greenville County Sheriff's Office will prepare compelled interviews and communicate all activities with the County Prosecutor. The compelled interviews would be conducted while moving forward throughout the investigative process and truth telling devices, such as a polygraph, would not be utilized strictly to continue the investigation. The Greenville County Sheriff's Office authorizes investigators to support the Southside Regional Jail. The auditor verified investigators have received the specialized PREA investigator training. All four investigative records reviewed by the auditor were conducted by trained investigators. The facility spreadsheet used to track the investigations listed the PREA First Sergeant as the investigator in administrative investigations. The auditor confirmed the investigator has received the specialized PREA training. The

shift supervisors gather the information and the certified PREA investigator conducted all investigations and support was provided by staff interviews, reviewing investigative records, email notifications, and revised spreadsheets. The shift supervisors gathered personal data, secured the scene, and performed first responder duties.

All cases are reviewed by the command staff, and determinations made based on the following: written reports, physical and testimonial evidence, credibility assessments, and the investigative facts and findings. All investigations are documented in a written report and maintained for as long as the alleged abuser is incarcerated or employed by the agency, and then five years thereafter. Agency policy explains the departure of the alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating the investigation. All parties will cooperate with the investigation and outside licensing bodies will be notified. This was confirmed during the investigator and Superintendent interviews.

Conclusion: The Southside Regional Jail has an agency policy related to the handling of criminal and administrative agency investigations in cases where sexual abuse is alleged. The auditor reviewed all evidence provided, reviewed case files, conducted interviews, and reviewed a sample of the retained investigations. This auditor reviewed four investigative reports and determined the lack of a documented credibility assessment. Considerations for credibility were assessed and discussed throughout the investigative staff interviews. However, the investigator did not thoroughly document this evidence in the written report. The auditor recommended corrective measures moving forward to the investigator and also supplied the Credibility Assessment Guide created by the National PREA Resource Center. The facility PREA Coordinator provided written assurance that these measures will be documented moving forward. The auditor was not able to review sample documentation from the investigator as the facility reported no additional allegations have been investigated during the time of this audit. The auditor recommended the investigator review the previous investigative reports submitted to document the credibility assessments moving forward. The evidence provided demonstrated compliance with this practice. The auditor finds Southside Regional Jail meets the provisions of this standard and no further action is required.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Standard 115.72 Analysis
	The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire Responses
2. Investigative Reports
3. Record Retention Schedule
4. Copies of Case Records
5. Sample of Cases Referred for Prosecution

Interviews:

1. Investigative Staff

Site Review Observations:

1. Reviewed Case Files
2. Reviewed Investigative Reports

Findings (By Provision):

115.72 (a) Agency policy PREA One, page 35 requires the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The interview with the facility PREA investigator revealed the facility standard is preponderance of the evidence. This evidence was verified through monitoring the results of four total investigations conducted.

The facility reported no staff on confined person allegations of sexual abuse, no confined person allegations of sexual abuse on another confined person, four staff on confined person allegations of sexual harassment, and no allegations of confined person sexual harassment on another confined person. The facility reported the four cases as closed, and unfounded for sexual harassment. No allegations of sexual abuse were reported in the past 12 months. The facility reported no cases were referred to the prosecutor for indictment.

Facility policy PREA One, page 35 explains, in administrative investigations, the Department shall impose no standard higher than a preponderance of the evidence, as defined in the glossary of terms, in determining whether allegations of sexual abuse or sexual harassment is substantiated.

Conclusion: The agency has a policy imposing a standard of preponderance of the

	evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment is substantiated. Based on the evidence provided, the auditor has determined compliance with the provisions of this standard. No further action is required.
--	---

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Standard 115.73 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Investigative Reports 3. Record Retention Schedule 4. Copies of Case Records 5. Sample of Cases Referred for Prosecution 6. Investigation Summary with Confined Person Notification <p>Interviews:</p> <ol style="list-style-type: none"> 1. Investigative Staff 2. Facility Superintendent 3. Confined Persons who Reported Sexual Abuse Not Identified <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Reviewed Case Files 2. Reviewed Investigative Reports

3. Reviewed Confined Person Notifications

Findings (By Provision):

115.73 (a-e) Agency policy PREA One, page 35 requires, following an investigation into a confined persons allegation of sexual abuse, the agency must inform the confined person as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The auditor reviewed a documented sexual harassment investigation and written notification to the confined person was provided as an unfounded complaint. The PREA Coordinator reported four sexual harassment investigations completed in the last 12 months and four notifications were documented as issued to the confined person. Agency policy PREA One, page 35 requires if the allegation is that a staff member has committed sexual abuse against the confined person, the agency shall subsequently inform the confined person whenever the staff member is no longer posted in the unit, no longer employed at the facility, indicted on a charge, or have been convicted on a charge related to sexual abuse. The policy reflects that these steps are not required if the results of the allegation are unfounded.

The facility reported no staff on confined person allegations of sexual abuse, no confined person allegations of sexual abuse on another confined person, four staff on confined person allegations of sexual harassment, and no allegations of confined person sexual harassment on another confined person. The facility reported the four cases as closed, and unfounded for sexual harassment. No allegations of sexual abuse were reported in the past 12 months. The facility reported no cases were referred to the prosecutor for indictment.

Agency policy requires when the allegation is the result of sexual abuse by another confined person, the facility must notify the victim when the agency learns that the alleged abuser has been indicted on a charge, or convicted on a charge, and these steps are not required if the result of the allegation is unfounded. The facility Superintendent and the PREA investigator confirmed this communication process during the on-site review. The PREA Coordinator indicated knowledge of this occurring throughout the investigative process. This auditor reviewed documentation of this notification process occurring during the on-site review.

Conclusion: The agency has a policy requiring that any confined person who makes an allegation of suffering sexual abuse in an agency or facility is informed, in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. Based on the evidence provided, the Southside Regional Jail meets the provisions of this standard with compliance. No further action is required.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Standard 115.76 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire Responses
2. Investigative Reports
3. Record Retention Schedule
4. Copies of Case Records
5. Sample of Cases Referred for Prosecution
6. Investigation Summary with Confined Person Notification
7. Sample of Records of Termination, Resignation, or other Sanctions for Violation of Sexual Abuse or Sexual Harassment Policies
8. Discipline Related to Sexual Abuse, Sexual Harassment, or Retaliation
9. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 36

Interviews:

1. Facility Superintendent

Site Review Observations:

1. Reviewed Case Files
2. Reviewed Investigative Reports
3. Reviewed Confined Person Notifications
4. Reviewed the MOU between the Southside Regional Jail and the Greenville County Sheriff's Office

	<p>Findings (By Provision):</p> <p>115.76 (a-d) The presumptive disciplinary sanction for staff who has engaged in sexual abuse at the Southside Regional Jail is termination and this is explained in agency policy PREA One, page 36. This policy was confirmed by the facility Superintendent during the interview process and reviewed by the auditor in the employee handbook. Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment policies. The disciplinary action is commensurate with the acts committed, staff disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. The auditor reviewed documentation in attempts to determine if other staff actions may have contributed to the incident that led to disciplinary sanctions for staff such as: failing to act to prevent sexual abuse from occurring, standing by while the abuse takes place, failing to act as required after the incident, negligent supervision that leads to, or could lead to an incident, or deliberately ignoring evidence that a colleague has abused a confined person. No findings of this nature were reported within the four unfounded investigative reports reviewed. The facility reported no incidents in the past 12 months for staff who have been terminated or disciplined for violation of the agency sexual abuse or sexual harassment policies.</p> <p>The auditor reviewed the disciplinary action of staff with the facility Superintendent and the sanctions imposed for violation of this policy is termination. The facility Superintendent confirmed past incidents being referred to law enforcement for prosecution and notifying the applicable licensing board such as the Criminal Justice Services, Board of Nursing, and the Department of Education. These notifications occur upon termination or resignations in lieu of termination. This is required by agency policy PREA One, page 36. The Greenville County Sheriff's Office conducts all criminal investigations, and the auditor reviewed the Memorandum of Understanding provided by the facility.</p> <p>Conclusion: The Southside Regional Jail has a policy regarding disciplinary violations for acts of sexual abuse or sexual harassment. The auditor attempted to determine if the facility could demonstrate evidence to support any forms of disciplinary action such as: sample records of terminations, resignations, other sanctions, and law enforcement referral. The facility reported no incidents of sexual abuse or sexual harassment that rose to this level of reporting. The auditor determined the Southside Regional Jail meets the provisions required within this standard. No further action is required, and the presumptive expectation of disciplinary actions is termination.</p>
--	---

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Standard 115.77 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire Responses
2. Investigative Reports
3. Record Retention Schedule
4. Copies of Case Records
5. Sample of Cases Referred for Prosecution
6. Investigation Summary with Confined Person Notification
7. Sample of Records of Termination, Resignation, or other Sanctions for Violation of Sexual Abuse or Sexual Harassment Policies
8. Discipline Related to Sexual Abuse, Sexual Harassment, or Retaliation
9. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 36

Interviews:

1. Facility Superintendent

Site Review Observations:

1. Reviewed Case Files
2. Reviewed Investigative Reports
3. Reviewed Confined Person Notifications
4. Reviewed the MOU between the Southside Regional Jail and the Greenville County Sheriff's Office

Findings (By Provision):

115.77 (a-b) Agency policy requires any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with confined persons and shall be

reported to law enforcement agencies. This procedure is not enforced if the activity is clearly not criminal, or the allegation is unfounded. Notifications will also be made to relevant licensing bodies and the facility shall take appropriate remedial measures to determine further contact with confined persons in the case of any other violation of agency sexual abuse or sexual harassment. The facility did not report any volunteer or contractor terminations, discipline, law enforcement referrals, or notifications to relevant licensing bodies for violations of sexual abuse, sexual assault, or sexual harassment. This was confirmed during the facility Superintendent interview and informal interviews with the command staff. The auditor reviewed documentation in attempts to determine if other volunteer or contractor actions may have contributed to the incident that led to disciplinary sanctions for staff such as: failing to act to prevent sexual abuse from occurring, standing by while the abuse takes place, failing to act as required after the incident, negligent supervision that leads to, or could lead to an incident, or deliberately ignoring evidence that a colleague has abused a confined person. No findings of this nature were reported within the four unfounded investigative reports reviewed.

Conclusion: The Southside Regional Jail has a policy regarding disciplinary violations for acts of sexual abuse or sexual harassment. Based on the evidence provided by the facility such as: sample records of terminations, resignations, other sanctions, and law enforcement referral the auditor determined the Southside Regional Jail meets the provisions required within this standard. No further action is required, and the presumptive expectation of disciplinary action is termination.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Standard 115.78 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Investigative Reports 3. Record Retention Schedule 4. Copies of Case Records

5. Sample of Cases Referred for Prosecution
6. Investigation Summary with Confined Person Notification
7. Sample of Records of Termination, Resignation, or other Sanctions for Violation of Sexual Abuse or Sexual Harassment Policies
8. Discipline Related to Sexual Abuse, Sexual Harassment, or Retaliation
9. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 36-37
10. Confined Person Classification Files
11. Confined Person Disciplinary Files
12. Confined Person Medical Files

Interviews:

1. Facility Superintendent
2. Medical Staff
3. Mental Health Staff

Site Review Observations:

1. Reviewed Case Files
2. Reviewed Investigative Reports
3. Reviewed Confined Person Notifications
4. Reviewed the MOU between the Southside Regional Jail and the Greenville County Sheriff's Office
5. Reviewed Confined Person Medical Files

Findings (By Provision):

115.78 (a-g) Agency policy informs confined persons shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the confined person engaged in sexual abuse or following a criminal finding of guilt for sexual abuse. The facility reported no administrative findings of substantiated or unsubstantiated sexual abuse and no criminal findings in the past 12 months. There are no pending allegations for review and the auditor reviewed four unfounded investigative reports for staff on confined person allegation of sexual

	<p>harassment. This was confirmed by the facility Superintendent, Mental Health staff, medical staff member, and four confined person medical files were reviewed. The Mental Health staff indicated potential screenings to address or correct the underlying reasons or motivations for abuse. The facility utilizes medical and mental health staff for assistance and the Family Violence Sexual Assault Unit for counseling services.</p> <p>Agency policy advises the facility may discipline a confined person for sexual contact with staff only upon a finding that the staff member did not consent to such contact. The facility prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish enough evidence to substantiate the allegation. The facility prohibits all sexual activity between confined persons and may discipline confined persons for such activity.</p> <p>Conclusion: The agency has a policy which states confined persons are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative or criminal finding that the confined person engaged in confined person sexual abuse. The auditor reviewed all records and findings associated with the provisions of this standard and no further action is required. The Southside Regional Jail meets the compliance required with this standard.</p>
--	---

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.81 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Confined Person Medical Files 3. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 37 4. Classification Records 5. Mental Health Confidential Disclosure Statement

Interviews:

1. Facility Superintendent
2. Medical Staff
3. Mental Health Staff
4. One Confined Person Reporting Prior Sexual Victimization

Site Review Observations:

1. Reviewed files and records logs

Findings (By Provision):

115.81 (a-e) The auditor reviewed randomly selected electronic medical files and reviewed the facility policy regarding confined persons experiencing prior victimization and abusiveness. Agency policy provides this information and verifies staff shall ensure that the confined person is offered a follow-up meeting with a mental health practitioner within 14 days of the intake process. This was also confirmed during the interview with the Mental Health staff. Agency policy PREA One, page 37 explains, If the screening pursuant to PREA standard 115.41 indicates that a prison or jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow up meeting with a medical or mental health practitioner within 14 days of the intake screening or sooner, if clinically indicated. This information is documented in the medical incident injury report. Interviews with one confined person who disclosed sexual victimization during a risk screening interview, and review of corresponding documentation is consistent with the policy requirement and adhere to this standard. The auditor interviewed a confined person that reported prior sexual victimization during the risk screening and the confined person confirmed being offered a follow up referral with mental health. The confined person reported this was conducted within a few days and the inspection of the medical file indicated two days.

The auditor did not identify any concerns with the tracking mechanism presented by the medical staff regarding the 14-day reviews. The staff member from intake will generate the referral request based on the information received during the risk screening interview. The referral will be noted in the medical files, and this begins an internal time clock to track the number of days until the 14-day review is completed. The medical staff and authorized staff are provided with a username and password to access the medical records. This information is strictly for treatment plans, housing decisions, bed assignments, work details, educational programming, or as otherwise required by federal, state, and local law. The medical screening form is signed by confined persons to provide consent for professional health care services and receive

	<p>instructions regarding access to medical, dental, and mental health care. Interviews with medical and mental health staff revealed that a consent form is signed by the confined persons regarding the limits to confidentiality. The auditor reviewed sample consent forms and no discrepancies were noted in association with the mental health follow-up reviews. The auditor noted files reviewed indicated a mental health referral was made by the intake staff member and the review of the medical files indicated the confined persons were seen within the 14-day period.</p> <p>Conclusion: The Southside Regional Jail has a policy governing the facility response to medical and mental health services in correlation with the review of the confined person risk assessment screenings. The policy stresses confidentiality within the medical environment and manages the immediate health needs, security risks, and the determination for further treatment. A review of all evidence provided by the facility indicates full compliance with the provisions of this standard. No further action is required.</p>
--	---

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Standard 115.82 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Confined Person Medical Files 3. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 37 4. Classification Records 5. Mental Health Confidential Disclosure Statement 6. Medical and Mental Health Records <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Superintendent

2. Medical Staff

3. Mental Health Staff

4. One Confined Person Reporting Prior Sexual Victimization

5. Sexual Assault Nurse Examiner

Site Review Observations:

1. Reviewed files and records logs

Findings (By Provision):

115.82 (a-d) Agency policy requires victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The facility offers 16-hour medical care and 24-hour crisis intervention services. The facility provides off-site emergency room care and utilizes the Southampton Memorial Hospital and the Chesapeake Forensic Specialists for the SAFE/SANE exams.

The Family Violence Sexual Assault Unit provides 24-hour counseling and crisis intervention services, and the facility supports its own crisis stabilization and transitional care units. The Chesapeake Forensic Specialists performs all sexual assault examinations and offers prophylaxis to safeguard from sexually transmitted diseases. The SANE provides the notification to the Family Violence Sexual Assault Unit for onsite advocacy during the exam. The volunteers will be notified to provide crisis intervention services and advocacy.

The level of care at the Southside Regional Jail is consistent with the level of care demonstrated within the community. The auditor spoke with the SANE staff and confirmed onsite exams are conducted with the presence of a volunteer advocate. The auditor reviewed the MOU for the Family Violence Sexual Assault Unit and the emails between the facility and the Chesapeake Forensic Specialist. This auditor reviewed the confined person handbook provided by the facility to ensure compliance. The treatment services are provided to every victim without financial cost, regardless of whether the victim names an abuser or cooperates with any investigation arising out of the incident. This was confirmed by the Health Services Administrator and no concerns were present during the informal confined person interviews. The auditor interviewed one confined person who reported sexual victimization during risk screening, and they did not indicate any concerns within this standard. All the confined persons interviewed indicated knowledge of the program and the offsite emergency room care.

Conclusion: Based on the auditor's review of the evidence provided by the facility to include policies regarding access to treatment services, samples of secondary materials relating to forms, logs, and immediate notification documents, Southside Regional Jail is fully compliant with this standard. No further action is required.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Standard 115.83 Analysis
	The following evidence was analyzed in making compliance determinations:
	Documents:
	<ol style="list-style-type: none">1. Southside Regional Jail Pre-Audit Questionnaire Responses2. Confined Person Medical Files3. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 38-394. Classification Records5. Mental Health Confidential Disclosure Statement6. Medical and Mental Health Records
	Interviews:
	<ol style="list-style-type: none">1. Facility Superintendent2. Medical Staff3. Mental Health Staff4. One Confined Person Reporting Prior Sexual Victimization5. SANE Nurse6. Ten Random Confined Persons
	Site Review Observations:
	<ol style="list-style-type: none">1. Reviewed files and records logs
	Findings (By Provision):

	<p>115.83 (a-h) The facility Mental Health staff indicated the facility offers medical and mental health evaluation and treatment to all confined persons who have been victimized by sexual abuse. The Mental Health staff advised the evaluation and treatment plans are consistent with the level of care demonstrated within the community. At times, the confined person may qualify for additional services due to their status. The treatment plans may consist of referrals for continued care, medications, transfers to other facilities, or accommodations upon release.</p> <p>Southside Regional Jail houses female offenders as confirmed during the population analysis. There have been no reported incidents involving vaginal penetration that resulted in the need to perform a pregnancy test. This was confirmed during review of the PAQ and during the interviews with the medical and mental health staff.</p> <p>Agency policy explains victims will be offered tests for sexually transmitted infections and all treatment services will be provided at no cost to the victim. This information is supported in the confined person handbook. The Family Violence Sexual Assault Unit will also provide outside emotional support services and their volunteers are also on-site conducting programs. This information was confirmed during the Health Services interview and the informal staff interviews. The informal confined person interviews expressed knowledge regarding the free medical, mental health, and emotional support services offered at the facility. The Family Violence Sexual Assault Unit information was posted near every phone in the confined person living units. This was confirmed during the post audit phase as the auditor identified the materials were posted as requested by the auditor. All random confined person interviews confirmed knowledge of this service. The auditor reviewed the financial statements with medical staff indicating the testing would be conducted at no cost to the victim.</p> <p>Conclusion: Based on the auditor's review of the following evidence provided by the facility: policy governing ongoing medical and mental health care for sexual abuse victims and abusers, medical records indicating timely access to treatment plans, referrals, and sexually transmitted infections testing as medically appropriate. The auditor determined the facility was found in compliance with the provisions of this standard and the level of care is consistent with the level of care within the community. No further action is required.</p>
--	--

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Standard 115.86 Analysis
	The following evidence was analyzed in making compliance determinations:

Documents:

1. Southside Regional Jail Pre-Audit Questionnaire Responses
2. Agency Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 39-40
3. Incident Review Team Document

Interviews:

1. Facility Superintendent
2. PREA Coordinator
3. Incident Review Team Member

Site Review Observations:

1. Discussed the Incident Review Team Process

Findings (By Provision):

115.86 (a-e) Agency policy PREA One, pages 39-40 mandates the facility conduct a sexual abuse incident review at the end of every sexual abuse investigation unless the allegation has been determined to be unfounded. This incident review must be conducted within 30 days of the conclusion of the investigation. This process was confirmed by the Superintendent and the PREA Coordinator interviews. The incident review team consists of the following: upper-level management officials, supervisors, investigators, and medical/mental health staff.

The facility presents a report of its findings from the sexual abuse incident reviews and makes a final recommendation for improvement or documents the reasons for not performing improvements. The criteria included within the reviews consists of the following: policy revisions, incident motivations by race, ethnicity, gender identity, lesbian, gay, bi-sexual, transgender, intersex, gang affiliation, physical barriers that may have contributed to the abuse, adequate staffing levels, video monitoring equipment or lack of, mandated training by staff and confined persons, appropriate supervision, notifications, and operational considerations. The auditor reviewed four unfounded investigative files for sexual harassment and discussed the incident review process with the facility staff. The facility provided the review document and noted the information was provided within the form. The auditor reviewed allegations from the previous 12-month audit period and observed the incident review process being

	<p>completed within the previous allegations. The auditor made recommendations to enhance the presence of the PREA standard within the documented form and the PREA Coordinator took the recommendations under advisement. The Superintendent confirmed review of the reported facility incident reviews.</p> <p>Conclusion: The auditor determined the facility met this standard with compliance based on the review of the following documentation: policies on conducting sexual abuse incident reviews, sample documentation of completed investigations, documentation of review team minutes, and recommended findings. No further action is required.</p>
--	---

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.87 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Agency Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 40 3. Annual Administrative Review of Sexual Abuse and Sexual Harassment Allegations Document, pages 1-4 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Superintendent 2. PREA Coordinator 3. Incident Review Team Member <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Discussed the Incident Review Team Process

	<p>Findings (By Provision):</p> <p>115.87 (a-f) The auditor reviewed the facility uniform data for every allegation of sexual abuse and compared the data to the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. The facility aggregates the incident-based sexual abuse data annually and includes definitions as appropriate to the Survey of Sexual Violence. The auditor reviewed the data collected from 2016 through 2022 as the data is compiled for a one-year (calendar) period after December. The Southside Regional Jail does not operate another facility or contract with other facilities for the confinement of its persons. The PREA Coordinator securely maintains all documentation used to compile the information and the Southside Regional Jail maintains the investigative data and records. Approved data is posted on the agency website and available upon request by the Department of Justice. The facility Superintendent confirmed the use of all facility data relative to this standard.</p> <p>Conclusion: The auditor reviewed the agency policies for collecting data on sexual abuse allegations, the instrument used for collecting the data, the set of definitions applied, the facility website, and a sample of the historical data used to determine the facility is fully compliant with the provisions of this standard. No further action required.</p>
--	--

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.88 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 40 3. Annual Administrative Review of Sexual Abuse and Sexual Harassment Allegations Document, pages 1-4 <p>Interviews:</p>

	<ol style="list-style-type: none"> 1. Facility Superintendent 2. PREA Coordinator 3. Incident Review Team Member <p>Findings (By Provision):</p> <p>115.88 (a-d) Agency policy requires the facility to review data collected and aggregated to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. This auditor reviewed the data posted on the facility website that includes the total number of substantiated, unsubstantiated, and unfounded allegations of sexual misconduct by confined persons to other confined persons and staff-to-confined person reports from 2016 to 2022.</p> <p>This information is approved by the facility Superintendent and posted on the agency website for review. The agency PREA Coordinator advised this information is utilized to identify problem areas and initiate corrective action measures when appropriate. The facility Superintendent confirmed the use and data associated with this report during the interview. No facility data was redacted from the annual report for publication and this was verified by the PREA Coordinator. The facility identified areas of improvement regarding their video monitoring equipment and will look to providing installation in the near future.</p> <p>Conclusion: The auditor reviewed evidence provided by the facility such as corrective action plans, an annual report of findings, website materials, and found the facility is fully compliant with the provisions of this standard. No further action required.</p>
--	---

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.89 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses

2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, page 40
3. Annual Administrative Review of Sexual Abuse and Sexual Harassment Allegations Document, pages 1-4

Interviews:

1. Facility Superintendent
2. PREA Coordinator
3. Incident Review Team Member

Findings (By Provision):

115.89 (a-d) The PREA Coordinator indicated all documentation utilized for data collection is maintained by the PREA Coordinator. The PREA Coordinator collects the data and maintains electronic files on a secure server. The data report is approved by the Facility Superintendent and posted on the agency website annually. The auditor reviewed the report and did not observe any personally identifying information. Agency policy requires the facility to maintain sexual abuse data collected for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.

Conclusion: Based on the auditor's review of the agency policy, facility website, interviews, and historical data, Southside Regional Jail is fully compliant with the provisions of this standard. No further action is required.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Standard 115.401 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses

2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 1-47
3. PREA Audit Notice Verification
4. Postal Communications from Confined Persons Were Not Received

Interviews:

1. Facility Superintendent
2. PREA Coordinator
3. Confined Persons Submitted Correspondence

Site Review Observations:

1. Reviewed the Agency Website and Facility Data

Findings (By Provision):

115.401(a-n) The Southside Regional Jail conducted its first cycle PREA audit on July 27, 2017, and the facility was found in compliance on 42 standards, no standards exceeded expectation, 42 met the standards, and no standards were documented as does not meet requirements. The auditor found one standard (115.12) not applicable. The auditor reviewed the report on the facility website during the preaudit phase. There were only 43 standards required for compliance at the time of the audit.

The Southside Regional Jail conducted its second cycle PREA audit on October 26, 2020, and the facility was found in compliance on 45 standards, no standards exceeded expectations, 45 met the standards, and no standards were documented as does not meet or as not applicable. The auditor reviewed the report on the facility website during the preaudit phase.

The auditor was provided authorized access to the entire facility and received this access during the on-site review. No restrictions were placed on the auditor during the Pre-Audit, onsite review, and post audit phases. The auditor received all documents requested and was provided electronic viewing upon request. The on-site review provided the auditor the opportunity to conduct private interviews with confined persons, staff, volunteers, and contractors without limitations. The facility PREA Coordinator provided photographic evidence regarding the posting of the PREA Audit Notification in all living units on May 26, 2023. This posting provided the confined persons and staff a name and mailing address for the auditor. The auditor confirmed this posting during the on-site review as staff and confined person interviews validated the posting at least six weeks prior to the on-site review. The

	<p>auditor received no postal communication from confined persons at Southside Regional Jail and no correspondence from staff.</p> <p>Conclusion: The auditor has determined based on the evidence provided by the facility and review of the facility website; Southside Regional Jail meets compliance with the provisions of this standard. No additional action is required.</p>
--	--

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.403 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Southside Regional Jail Pre-Audit Questionnaire Responses 2. Policy PREA One, Prison Rape Elimination Act (PREA), March 6, 2017, pages 1-47 3. PREA Audit Notice Verification 4. Postal Communications from Confined Persons Were Not Received <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Superintendent 2. PREA Coordinator <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Reviewed the Agency Website and Facility Data <p>Findings (By Provision):</p> <p>115.403 (a-f) The auditor verified the final audit reports were published on the facility website, and the auditor reviewed all documentation and compliance efforts.</p>

The auditor attempted to confirm all prior recommendations were completed from the previous audit.

The Southside Regional Jail conducted its first cycle PREA audit on July 27, 2017, and the facility was found in compliance on 42 standards, no standards exceeded expectation, 42 met the standards, and no standards were documented as does not meet requirements. The auditor found one standard (115.12) not applicable. The auditor reviewed the report on the facility website during the preaudit phase. There were only 43 standards required for compliance at the time of the audit.

The Southside Regional Jail conducted its second cycle PREA audit on October 26, 2020, and the facility was found in compliance on 45 standards, no standards exceeded expectations, 45 met the standards, and no standards were documented as does not meet or as not applicable. The auditor reviewed the report on the facility website during the preaudit phase.

Conclusion: Based on the evidence provided by the facility, the Southside Regional Jail meets compliance with the provisions of this standard, and no further action is required.

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

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

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

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

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

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

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

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

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

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(f)		
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes