

PREA Facility Audit Report: Final

Name of Facility: Lawrenceville Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 08/12/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Robert Manville	Date of Signature: 08/12/2022

AUDITOR INFORMATION	
Auditor name:	Manville, Robert
Email:	robertmanville9@gmail.com
Start Date of On-Site Audit:	07/20/2022
End Date of On-Site Audit:	07/22/2022

FACILITY INFORMATION	
Facility name:	Lawrenceville Correctional Center
Facility physical address:	1607 Planters Road , Lawrenceville, Virginia - 23868
Facility mailing address:	

Primary Contact	
Name:	Diana Whitfield
Email Address:	dwhitfield@geogroup.com
Telephone Number:	434-233-2150

Warden/Jail Administrator/Sheriff/Director	
Name:	Esker Tatum, Jr.
Email Address:	etatum@geogroup.com
Telephone Number:	4348489349 164201

Facility PREA Compliance Manager	
Name:	Diana Whitfield
Email Address:	dwhitfield@geogroup.com
Telephone Number:	O: 4348489349 164335
Name:	Belinda Bullock
Email Address:	bbullock@geogroup.com
Telephone Number:	O: 4348489349 164330

Facility Health Service Administrator On-site	
Name:	Sharon King
Email Address:	sharon.king@geogroup.com
Telephone Number:	4348489349 164346

Facility Characteristics	
Designed facility capacity:	1595
Current population of facility:	1449
Average daily population for the past 12 months:	1445
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	18-71
Facility security levels/inmate custody levels:	Medium
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	208
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	33
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	0

AGENCY INFORMATION	
Name of agency:	The GEO Group, Inc.
Governing authority or parent agency (if applicable):	
Physical Address:	4955 Technology Way, Boca Raton, Florida - 33431
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	Jose Gordo
Email Address:	jgordo@geogroup.com
Telephone Number:	5618930101

Agency-Wide PREA Coordinator Information			
Name:	John Hardwick	Email Address:	johardwick@geogroup.com

SUMMARY OF AUDIT FINDINGS	
<p>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.</p> <p>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.</p>	
Number of standards exceeded:	
5	<ul style="list-style-type: none"> • 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator • 115.16 - Inmates with disabilities and inmates who are limited English proficient • 115.17 - Hiring and promotion decisions • 115.33 - Inmate education • 115.88 - Data review for corrective action
Number of standards met:	
40	
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:	2022-07-20
2. End date of the onsite portion of the audit:	2022-07-22

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:	Virginia Alliance Against Sexual Abuse

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1595
15. Average daily population for the past 12 months:	1442
16. Number of inmate/resident/detainee housing units:	18
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:	1460
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:	7
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:	0
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:	2

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:	2
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:	3
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:	2
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:	0
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:	3
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:	0
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):	No text provided.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit

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:	268
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:	0
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:	33
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:	The facility is managing the roster and mandatory posts by the use of overtime, incentive pay and lay over staff. Lay over staff are compensated and are relieved by call in staff. The facility does not allow staff to work more than one additional overtime at the end of their shift except in cases of call ins and then only until a staff can be called in to cover the shift.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	26
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input type="checkbox"/> Age <input type="checkbox"/> Race <input 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 type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	I interviewed inmates from each of the housing units.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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):	Included in the random inmate were two inmates that had sent the auditor correspondences. One correspondence was about being able to view naked inmates from the bottom floor if you stand at one specific spot. The auditor went to the area and noted that the facility had lowered the curtain prior to the audit and was no longer an issue. The other correspondence was request for the auditor to help him transfer to another facility and was not PREA related.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	15
<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>	
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:	3

<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>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>Prior to selecting inmates to interview the mental health, medical director and PREA compliance manager and I discussed the target population and reviewed the Va. DOC inmate data based.</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>1</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>3</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>2</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>Prior to selecting inmates to interview the mental health, medical director and PREA compliance manager and I discussed the target population and reviewed the Va. DOC inmate data based. We also reviewed the resident that had made claims of being sexually abused at the facility from the investigative files.</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>3</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>Prior to selecting inmates to interview the mental health, medical director and PREA compliance manager and I discussed the target population and reviewed the Va. DOC resident data based. The auditor also interviewed the Lt. in charge of the restrictive housing unit.</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>No text provided.</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>21</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input 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>

73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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):	No text provided.
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):	14
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 checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

<p>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Agency contract administrator</p> <p><input type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</p> <p><input type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</p> <p><input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</p> <p><input checked="" type="checkbox"/> Medical staff</p> <p><input checked="" type="checkbox"/> Mental health staff</p> <p><input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</p> <p><input checked="" type="checkbox"/> Administrative (human resources) staff</p> <p><input checked="" type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</p> <p><input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations</p> <p><input type="checkbox"/> Investigative staff responsible for conducting criminal investigations</p> <p><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</p> <p><input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</p> <p><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</p> <p><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</p> <p><input checked="" type="checkbox"/> First responders, both security and non-security staff</p> <p><input checked="" type="checkbox"/> Intake staff</p> <p><input checked="" type="checkbox"/> Other</p>
<p>If "Other," provide additional specialized staff roles interviewed:</p>	<p>Va. DOC PREA Coordinator</p>
<p>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>a. Enter the total number of CONTRACTORS who were interviewed:</p>	<p>4</p>

<p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input checked="" type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input checked="" type="checkbox"/> Other</p>
<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>No text provided.</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>
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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>
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<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>
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<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>
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<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>
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<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>The LVCC includes an administration building, a vocational, education, and medical building, two gymnasiums, four recreation yards, a laundry, a kitchen, staff dining room, and two inmate dining halls. The maintenance building, warehouse, and commissary are located outside the secure perimeter. The Chaplain's Office is located near the gym. Inmates from</p>
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Lawrenceville do not go outside the secure perimeter. Six housing units each holding 256 inmates gives a total capacity of 1,536 inmates. Each housing unit has three pods. Cells are double occupancy. Each pod has two levels. Two pods have a capacity of 80 inmates each (160) and one pod a capacity of 96. The housing unit total capacity is 256 inmates. One housing unit is designated as a residential substance abuse therapeutic community. In addition, there is a Restrictive Housing Unit with 51 beds. Each housing unit has an elevated control room that enables the correctional officers to view the pods. The control room operates the exterior and interior doors. Each pod has four cameras and enable staff to view the entire unit. Each housing unit has a correctional officer in the control room and two officers in each pod. One Sergeant is assigned to each housing unit and moves throughout the building. Each housing unit has a barber shop. Each pod has six telephones, a microwave, an ice machine, and a washer and dryer. A unit manager and a counselor are assigned to each housing unit and have their offices in the housing unit. During the site review the locations of cameras and mirrors, room layout, restrooms and the placement of PREA posters and information was observed. Facility Notices in English and Spanish provided to the facility during the Pre-Onsite Audit Phase were found displayed in various locations throughout the facility. PREA reporting information and other PREA posted information is in both English and Spanish and posted in all housing units and in numerous locations throughout the facility. Reminders of opposite gender announcements are stenciled near the entries of housing units. The speed dial inmate telephone was tested in several living units. Inmates are not required to utilize a PIN to contact the Virginia Department of Corrections or the Victim Advocate. During the site review, the auditor spoke informally to inmates questioning them about their overall knowledge of the agency's zero-tolerance policy and methods of reporting available to them. Several inmates were able to show me how to utilize the telephone system. Most inmates were talkative and could articulate the agency policies about zero-tolerance. All showers have curtains for privacy. All toilets had partitions and walls in front of the toilet area. Inmate stated they are not seen by staff when showering or using the restroom. The inmates stated that staff announce their presence when entering their living unit and don't come in the area where they shower and use the toilet.

The intake Lt. and the intake counselor were able to explain the process of inmates arriving at the facility and the orientation and comprehensive education program inmates attend. The Counselor showed me the computerized screening instrument and explained the process of conducting the initial screening. The strip down room is private with a door leading to that area. Staff indicated that male staff and a male staff observer are present during all strip searches. The facility houses a general population, a mental health program, and a protective housing program.

The medical area consists of a medical infirmary and observation cells. There is a shower located in some rooms with curtains and privacy partitions for toilets. The medical examination rooms had a wraparound curtain to provide privacy for examinations.

Documentation Sampling

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

<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>
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<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>Inmate Files Reviewed: Twenty-six (26) inmate records were reviewed. These records included the following information. • Identification Number • Date of Birth • Date of Arrival • Date of Screening • Date of Follow-up Screening • Date of Initial PREA notification • Date of PREA orientation/education: Employee Background Checks: Twenty (20) background clearance files including ten (10) new hired staff, five (5) staff that had been promoted and five (5) employees that had over five years tenure at the facility. Five (5) background checks for contractors were reviewed. The volunteer/Contractor files were reviewed. All background checks had been completed for staff and contractors prior to contact with inmates or prior to promotion or over 5 years tenure at the facility: Employee Training Records: Reviewed twenty-five (25) employee training records. Included in the employee training records were random monitors (direct care staff), supervisors, Investigator, PREA Compliance manager. All training has been completed in the last 12 months: Interviews with random staff indicated they had received refresher training during the last six (6) months. The correctional staff indicated during the tour they are provided weekly briefings about PREA. This was confirmed by interviews with shift supervisors and daily briefing logs. Most staff interviewed stated they had received the questionnaire for their specific duties prior to the audit and were prepared for the audit. Investigations: There were a total of twenty-four (24) reported allegations of sexual abuse/sexual harassment. Three were for sexual abuse and twenty-one were for sexual harassment. All sexual abuse investigative files were reviewed. Ten sexual harassment investigations were reviewed. There were 14 sexual harassment allegations that were ongoing. Two of these were reviewed as they were in the initial stages of investigation. Unannounced Rounds: The logbooks and computerized unannounced rounds were reviewed in each housing unit and the control room.</p>
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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	1	1	1	1
Staff-on-inmate sexual abuse	2	0	2	0
Total	3	1	3	1

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	7	0	7	0
Staff-on-inmate sexual harassment	14	0	14	0
Total	21	0	21	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	1	0	0
Staff-on-inmate sexual abuse	0	1	0	1
Total	0	2	0	1

Sexual Harassment Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	4	0	0	0	0
Staff-on-inmate sexual harassment	10	0	0	0	0
Total	14	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	4	1	2	0
Staff-on-inmate sexual harassment	10	4	0	0
Total	14	5	2	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:	3
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)

Inmate-on-inmate sexual abuse investigation files

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
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<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal 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 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 checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input 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>2</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 checked="" type="radio"/> No</p> <p><input 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 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 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>10</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>4</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 checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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<p>110. Did your sample of INMATE-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 inmate-on-inmate sexual harassment investigation files)</p>
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Staff-on-inmate sexual harassment investigation files

<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>6</p>
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<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>
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<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>
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<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>While there were 14 ongoing sexual harassment investigation ongoing. The majority of these have been investigated and the facility is awaiting approval from Va. DOC and GEO cooperate office to close these files.</p>
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SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

<p>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.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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Non-certified Support Staff

<p>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.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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AUDITING ARRANGEMENTS AND COMPENSATION

<p>121. Who paid you to conduct this audit?</p>	<ul style="list-style-type: none"><input checked="" type="radio"/> The audited facility or its parent agency<input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)<input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)<input type="radio"/> Other
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Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	<p data-bbox="240 145 766 174">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="240 327 818 356">Lawrence Correctional Center (LVCC) organization chart</p> <p data-bbox="240 383 1137 412">GEO Policy 5.1.2-A Policy and Manual Sexual Abuse/Assault Prevention and Intervention</p> <p data-bbox="240 439 818 468">LVCCC Policy 17.003 PREA Prison Rape Elimination Act</p> <p data-bbox="240 495 510 524">GEO Organizational Chart</p> <p data-bbox="240 551 986 580">Virginia Department of Corrections PREA Regional Compliance Managers</p> <p data-bbox="240 647 1490 1072">115.11 (a): GEO Policy 5.1.2-A Policy and Manual Sexual Abuse/Assault Prevention and Intervention and LVCCC Policy 17.003 PREA Prison Rape Elimination Act in consultation with Virginia Department of Corrections promulgated policies for this standard. The policy/procedures mandate a zero tolerance toward all forms of sexual abuse and sexual harassment. The policy/procedures include procedures and expectations related to approaches to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy also included sanctions for staff and inmates found to have participated in prohibited behaviors. Staff members who are found to have perpetrated sexual abuse or sexual harassment are disciplined in accordance with Employee Discipline policy and Facility Rule of Conduct and subject to employment termination. Employees are subject to criminal prosecution. The policy includes a description of the agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates. inmates who are found to have perpetrated sexual abuse or sexual harassment are disciplined in accordance with sanctions outlined in the facility's detainee handbook. Virginia Department of Corrections has promulgated additional policies, procedures, codes, and memos to provide supplements for the agency or contracting agencies approaches to prevent, detect, respond, and investigate sexual abuse or sexual harassment.</p> <p data-bbox="240 1106 1490 1301">115.11 (b): GEO employs an upper-level, agency-wide PREA Coordinator at the corporate level. The agency's organizational chart depicts his position within the agency. The PREA Coordinator oversees the agency's efforts to comply with the PREA standards in all of GEO's facilities. GEO has a team of staff that support the PREA coordinator efforts in meeting all PREA standards. The administrative team meets on a regular basis to develop strategies to establish a culture that provides a safe environment for staff and inmates. The PREA Coordinator and the team are very knowledgeable about PREA and best practices to carry out the Agency's approach to prevent, detect, and respond to sexual abuse or sexual allegations.</p> <p data-bbox="240 1335 1477 1693">115.11 (c): GEO ensures that all its facilities have a PREA Compliance Manager with sufficient time and authority to coordinate the facilities PREA efforts. The facility's organizational chart illustrates the PREA Compliance Manager's position within the facility. LVCC provides support staff for assisting the PREA compliance manager with her task in carrying out the PREA mandates from GEO. The administrative team meets on a regular basis to develop strategies to establish a culture that provides a safe environment for staff and inmates. Throughout the tour, staff, and inmates knew the PREA compliance managers name and role at the facility. Both the GEO Group PREA Coordinator and Facility Compliance Manager advised they have sufficient time and authority to coordinate efforts to comply with PREA standards. The facility provides additional support for PREA related investigations, policy reviews, mock audits and training. According to interview with the facility director, the facility makes it a priority to cooperate PREA coordinator's office questions or concerns. VDOC employs regional PREA compliance managers that provide assistance with the local PREA compliance manager and oversee the implementation and monitoring for compliance with all PREA standards.</p> <p data-bbox="240 1727 1433 1816">Exceed compliance was determined by review of agency organization chart, agency, and facility policies, both staff and inmates training orientation power point presentations, posters, inmate manual and interviews with staff, contractors, volunteer, and inmates further provided exceed compliance with this standard.</p>

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="231 190 1508 257">Auditor Discussion</p> <p data-bbox="231 257 1508 324">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="231 324 1508 392">Virginia Department of Corrections and GEO Client Contract</p> <p data-bbox="231 392 1508 459">GEO policy 5.1.2-A</p> <p data-bbox="231 459 1508 526">Statement of Fact</p> <p data-bbox="231 526 1508 660">The facility does not contract with other entities to house inmates. A review of the documentation submitted substantiates that the Virginia Department of Corrections requires the entities which they contract for the confinement of inmates (privatized prisons or residential reentry centers or "halfway houses") to adopt and comply with the PREA standards.</p> <p data-bbox="231 660 1508 734">Compliance was determined by review of facility contract agreement and interviews with the GEO Group PREA Coordinator, Virginia Department of Correction's Coordinator and Agency Director.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 235">Auditor Discussion</p> <p data-bbox="240 271 1366 297">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="240 327 1137 353">GEO Policy 5.1.2-A Policy and Manual Sexual Abuse/Assault Prevention and Intervention</p> <p data-bbox="240 383 818 409">LVCCC Policy 17.003 PREA Prison Rape Elimination Act</p> <p data-bbox="240 439 588 465">PREA Annual Facility Assessment</p> <p data-bbox="240 495 376 521">Staff Rosters</p> <p data-bbox="240 551 783 577">Lawrenceville Correctional Center Facility Schematics</p> <p data-bbox="240 607 469 633">Unannounced Rounds</p> <p data-bbox="240 703 1493 1198">115.13 (a)(b): LVCCC Policy 17.003 requires the facility to review the staffing plans on an annual basis. Interviews with the facility Director and executive staff revealed compliance with the PREA, and that other safety and security issues are always a primary focus when they consider and reviewing their respective staffing plans. The facility has a Staffing Report that is developed for each pay period. The Prison provides the bimonthly reports that includes mandatory post and hold over staffing to meet the mandatory posts. This report also includes the number of positions authorized, the number filled, the number vacant, recruitment efforts and any staffing concerns during the pay period. The Facility Director meets weekly with his executive staff, including Chief of Security, Lieutenant, and the Human Resource Manager (HRM) to address staffing issues as they relate to the PREA and safety of staff and inmates. Virginia Department of Corrections requires the facility to review the staffing plans on an annual basis. Interviews with the facility Director and executive staff revealed compliance with the PREA, and that other safety and security issues are always a primary focus when they consider and reviewing their respective staffing plans. The facility has a Staffing Report that is developed for each pay period. The Prison provides the bimonthly reports that includes mandatory post and hold over staffing to meet the mandatory posts. This report also includes the number of positions authorized, the number filled, the number vacant, recruitment efforts and any staffing concerns during the pay period. The staffing plan is based on a population 1595 inmates.</p> <p data-bbox="240 1227 746 1254">The staffing plan is based on the following criteria:</p> <ul data-bbox="240 1261 1342 1592" style="list-style-type: none"> - Generally accepted detention and correctional practices. - Judicial findings of inadequacy. - Findings of inadequacy from Federal investigative agencies. - Findings of inadequacy from internal or external oversight bodies. - All components of the facility's physical plant. - The composition of the inmate population. - The number and placement of supervisory staff. - Institution programs occurring on a particular shift. - Applicable State or local laws, regulations, or standards. - The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and - Other relevant factors. <p data-bbox="240 1621 1466 1715">The institution has been provided with all necessary resources to support the programs and procedures to ensure compliance with the PREA standards. The audit included staff interviews, and rosters. Supervisory and Administrative staff members routinely make unannounced rounds. These rounds are documented in Unit Logs located in each housing unit.</p> <p data-bbox="240 1753 1466 1883">There have been no judicial findings of inadequacy from federal investigative agencies or findings of inadequacy from internal or external oversight bodies relevant to this standard. All essential posts are filled each shift and no essential posts are kept open for salary savings. When programs are offered, staffing is increased to provide additional supervision. There has been no deviation from the staffing plan based on interviews with facility director, PAQ and annual assessment.</p> <p data-bbox="240 1944 1493 2141">115.13 (c): GEO mandates that whenever necessary and no less than annually, the staffing plan is reviewed and documented during the Annual PREA Facility Assessment. This completed form is submitted to the Corporate PREA Coordinator and the Corporate Divisional Vice President for signature and approval of any recommendations made to the established staffing plan to include the deployment of video monitoring systems and other monitoring technologies or the allocations of additional resources to maintain compliance to the plan. In interview with GEO's PREA Coordinator, he reported being consulted regarding assessments or adjustments to the staffing plan through incident reviews of substantiated</p>

and unsubstantiated allegations and through the Annual PREA Facility Assessments he reviews and approves for each of the agency facilities annually. The latest staffing assessment was in December 2021.

115.13 (d): According to facility policy and practice requiring department heads, facility executive staff and intermediate and higher-level custody supervisors conduct and document unannounced rounds on all shifts within their respective areas to identify and deter employee sexual abuse and sexual harassment. Policy also mandates that other staff are prohibited from telling other staff when supervisors are making unannounced rounds. The review of Institution Duty Officer (IDO) unannounced PREA rounds logs confirmed that intermediate-level or higher-level supervisors, including shift supervisors and department heads, conduct and document such visits throughout the institution, during the day, at night and on the weekends. Additionally, the IDO was interviewed. IDO visits areas of the facility during days, evenings, and weekend. The IDO document the visits on logbooks located in housing unit control room. Staff members are prohibited from alerting other employees regarding unannounced rounds. Interviews with inmates and housing unit officers also confirmed that random, unannounced rounds are conducted by Institution Duty Officers daily, including nights and weekends. The administrative Lt. for each shift was interviewed. Each indicated that they visit each living unit a minimum of once per shift. The control room staff document these visits on the unit log. The auditor reviewed logbooks during the tour and found multiple signs in documentation on each shift. While touring the control room, the control room officers showed her computerized PREA rounds documentation. The facility provided a page on one of the logbooks that documented that a supervisor visited the unit on each shift.

Compliance was further determined by staff interviews conducted during the tour of all areas of the facility and interviews with the Chief of Security, Facility Director, PCM, Human Resource Manager and Correctional Staff; reviews of documented staffing rosters, daily supervisory checks, and facility workforce meeting records, pay period staffing reports and the examination of the video monitoring system. A comprehensive tour of the facilities was conducted during the audit that included looking for blind spots, reviewing camera coverage and available staff in areas that inmates are assigned. A detailed review of the cameras was conducted by the auditor during the onsite tour. It was determined that the additional cameras and mirrors have enhanced the facility and reduced the blind spots where possible.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following polices, directives and documentation was reviewed in formulating compliance with this standard:</p> <p>LVCC Policy 17.003</p> <p>LVCC Contract for Service</p> <p>LVCC Contract Amendment</p> <p>Statement of Fact</p> <p>The Lawrence Virginia Correctional Center does not house youthful inmates. Compliance was determined by review of Contract for Services, Policy and interviews with Intake staff and facility director.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>GEO Corporate Policy 5.1.2-A</p> <p>LVCC Policy 17.003</p> <p>Training records- Cross Gender Pat Searches & Searches of Transgender & Intersex</p> <p>Training Curriculum</p> <p>Strip Search Log</p> <p>Shift Logs- Announced female presence</p> <p>Statement of Fact</p> <p>PAQ</p> <p>115.15 (a): LVCC Policy 17.003 mandates that cross-gender strip or cross-gender body cavity searches are prohibited, except in exigent situations or when performed and documented by a medical practitioner. All staff confirmed they are not allowed to conduct cross-gender searches except in exigent circumstances. Staff were able to articulate what an exigent circumstance would entail.</p> <p>115.15 (b): The facility does not house female inmates.</p> <p>115.15 (c): The facility does not house female inmates. Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. The facility also maintains a log of all strip searches. This log indicates date, time, purpose and inmate's gender and gender of persons conducting the strip searches.</p> <p>115.15 (d): Policy LVCC Policy 17.003 and GEO Corporate Policy 5.1.2-A 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. The living area's showers have curtains that provides for inmate privacy while showering. Toilet areas have partitions with door to allow inmates to use the restroom without being viewed by staff. The medical area has a wraparound curtain for privacy during examinations. All toilets in the living units have partitions and a wall in front of the toilet to provide privacy. All other areas that were reviewed during the tour had partitioned or single toilets with a door to provide privacy. All residents stated they are able to shower, use the toilet and change clothes without being seen by staff members.</p> <p>The facility has implemented a policy that all opposite gender staff working the units will announce themselves prior to walking the range to allow inmates the opportunity to prepare themselves from a privacy perspective. Inmates interviewed acknowledged they were allowed to shower, dress and use the toilet without being viewed by staff of the opposite gender. Postings are located throughout the living units that female staff are assigned to work in housing units. The facility maintains a log for staff of the other gender to announce their presence when entering housing units.</p> <p>115.15 (e): GEO policy 5.1.2-A and facility policy 17.003 address searches of transgender and intersex inmates. Facilities shall not search or physically examine a transgender or intersex inmate solely to determine their genital status. If the genital status is unknown, it may be determined during private conversation with the individual, by reviewing medical records or by learning this information as part of a broader medical examination conducted in private by a medical practitioner. At the time of the onsite audit, there were two inmates who disclosed being transgender or intersex.</p> <p>115.15 (f): All staff at LVCC receive training on how to conduct cross-gender pat searches and searches of transgender and intersex inmates in a professional and respectful manner. Staff receive Limits to Cross Gender Viewing & Searches training. The lesson plan of this training was provided for review. Staff sign a PREA Basic Acknowledgement form acknowledging receipt and understand of the training received. Review of random staff training records and in interview with security staff, revealed staff are receiving this training at pre-service and annually. Interviews with staff confirmed that they were aware of the prohibition of visual body cavity or strip searches of the inmates of the opposite sex except in exigent circumstances.</p> <p>Based on the review of policies and notices regarding the presence of female staff in the units, observation of the showering/dressing areas and interviews with staff and inmates it has been determined that LVCC is in compliance with this standard.</p>

115.16	<p>Inmates with disabilities and inmates who are limited English proficient</p> <p>Auditor Overall Determination: Exceeds Standard</p> <p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>LVCC Policy 13.002 Orientation</p> <p>LVCC Policy 13.008 Translations of Records and Language Assistance for Inmates</p> <p>GEO Corporate Policy 5.1.2-A</p> <p>Statement of Fact</p> <p>PREA Brochures English/Spanish</p> <p>Language Line Solutions Reference Guide</p> <p>115.16 (a): GEO Policy 5.1.2-A Sexual Abuse/Assault Prevention and Intervention and LVCC Policy 17.003 mandates that the facility shall not discriminate against inmates with known disabilities and shall provide reasonable accommodations to ensure access to programs, activities, and services in accordance with the Americans with Disabilities Act and the provisions established in this Policy.</p> <p>Through policy and practice, the facility staff ensures that inmates with all disabilities listed in 115.16a have an equal opportunity to participate in and benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment. The facility has TTY machines for hard of hearing inmates. The inmates interviewed that were hard of hearing and low vision indicated the handbook is in large print and the hard of hearing has a hearing aid and is able to hear as long as people speak loud enough for him to hear. Both of these inmates had been in facilities for a long time and contributed their disabilities to old age. They did not think they had an ADA issue that has not been addressed by the facility of DOC.</p> <p>115.16 (b)(c): LVCC Policy 13.002 Orientation mandates that all inmates will have access to a PREA orientation. The ESL inmate interviewed stated he was instructed about PREA compliance and felt safe from sexual abuse. All PREA related information (written information), including postings, brochures and handouts are available in English, and Spanish. The two inmates that were interviewed indicated they received the orientation, screening and training using an interpreter and received written material during intake in Spanish. The facility has access to translation services and written access in other languages. Staff also may read information to inmates when necessary. Agency and facility policies prohibit inmates to be relied on as readers or any types of assistants, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety. The facility maintains a list of staff that are bilingual.</p> <p>Exceed compliance of this standard was confirmed by review of agency policy, contracting services for language interpretation services and interviews with PCM, Case Manager, Medical Administrator and ESL inmate.</p>
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115.17	Hiring and promotion decisions
	<p data-bbox="240 145 766 174">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="240 327 440 356">GEO Policy 5.1.2-A</p> <p data-bbox="240 383 448 412">LVCC Policy 17.003</p> <p data-bbox="240 439 453 468">New Hire Application</p> <p data-bbox="240 495 536 524">New Hire Background Check</p> <p data-bbox="240 551 526 580">New Hire Acceptance Letter</p> <p data-bbox="240 607 549 636">Contractor Background Check</p> <p data-bbox="240 663 619 692">5 year Background Check- Employee</p> <p data-bbox="240 719 625 748">5 year Background Check- Contractor</p> <p data-bbox="240 775 600 804">5 year PREA Disclosure-Contractor</p> <p data-bbox="240 831 496 860">Annual PREA Disclosure</p> <p data-bbox="240 887 413 916">Promotion Letter</p> <p data-bbox="240 943 526 972">Promotion PREA Disclosure</p> <p data-bbox="240 999 504 1028">PREA Background Check</p> <p data-bbox="240 1055 1195 1084">Random Background Checks for new hires, five-year tenured staff, promotions and contractors.</p> <p data-bbox="240 1111 293 1140">PAQ</p> <p data-bbox="240 1167 1485 1509">115.17 (a): GEO Policy 5.1.2-A and LVCC Policy 17.003 stipulates all employees, contractors and volunteers have had criminal background checks completed prior to being employed by LVCC. The facility does not hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor or volunteer that may have contact with inmates, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; 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, or if the person has been civilly or administratively adjudicated to have engaged in the activity. Incidents of sexual harassment are considered in determining whether to hire or promote anyone or to enlist the services of any contractor or volunteer who may have contact with inmates. Interview with the Human Resource Manager and review of random employee, contractor and volunteer files were used to verify compliance to this standard.</p> <p data-bbox="240 1536 1477 1666">115.17 (b): Prior to being promoted staff complete a promotion PREA disclosure form. GEO and the facility 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 inmates. Interview with the Human Resource Manager and review of the disclosure form confirmed this practice.</p> <p data-bbox="240 1693 1493 1924">115.17 (c): The agency requires that all applicants and employees who may have contact with inmates have a criminal background check. Criminal background checks for all potential employees are completed through the Virginia Department of Corrections background division and through a contract with Accurate background checks. For those considered for promotions or who transfer from another facility, an internal GEO PREA verification and a background check through the Accurate are completed. If an applicant answers on their application they are a prior institutional employee, information from prior institutional employers shall be requested. According to the PAQ in the past 12 months, there were 208 background checks completed.</p> <p data-bbox="240 1951 1493 2092">115.17 (d): The facility performs criminal background checks through the Virginia Department of Corrections before enlisting the services of any contractor or volunteer. In information provided on the Pre-Audit Questionnaire, in the past 12 months there were 20 criminal background checks conducted for contractors. The auditor reviewed 5 random contractors background and found all had background checks completed prior to employment.</p> <p data-bbox="240 2119 1425 2148">115.17 (e): A review of random staff and contractor with five years tenure verified that criminal background checks are</p>

conducted every five years for all employees and contractors.

115.17 (f): LVCC asks all applicants and employees who have contact with inmates directly about previous sexual misconduct. Applicants are asked these questions on the GEO application. Employees and contractors complete a PREA Disclosure and Authorization Form – Annual Performance Evaluation annually. For consideration for promotions or transfers, employees complete a PREA Disclosure and Authorization Form Promotions – PREA Related Positions and another background check is completed by VDOC, as well as a GEO internal PREA verification.

115.17 (g): Employees and contractors have a duty to disclose such misconduct referenced in this standard. Material omissions regarding this type of misconduct would be grounds for termination. The submission of false information by any applicant is grounds for not hiring the applicant.

115.17 (h): Unless prohibited by law, GEO will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom the individual has applied for work.

Exceed compliance was determined by pre audit documentation, the PAQ, interviews with the human resources director and review of random staff files including new hires, promotions and five-year tenure and five contractor files. All required information was noted utilizing the PREA Employee/Contractor worksheet.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>GEO Corporate Policy 5.1.2-A</p> <p>LVCC Policy 17.003</p> <p>Statement of Fact</p> <p>GEO Group Policy 5.1.2-A and LVCC Policy 17.003 mandates the company will consider the effect of new or upgraded design, acquisition, expansion, or modification of physical plant or monitoring technology might have on the facility's ability to protect inmates from sexual abuse. Based on statement of fact, there have been no additional modifications or expansions to LVCC during the last audit period. If new facilities are designed or there are modifications to existing facilities, the agency's PREA Coordinator works closely with the project development team to ensure the safety of inmates. The facility has upgraded and continues to upgrade the camera systems by replacing older cameras with new high definition and pivoting cameras. Compliance was determined by review of facility camera coverage and interviews with Agency Head Designee, GEO Group PREA coordinator, facility director and Major.</p>

115.21	Evidence protocol and forensic medical examinations
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 871 356">GEO Corporate Policy 5.1.2-E - PREA Investigation Procedure</p> <p data-bbox="242 383 448 412">LVCC Policy 17.003</p> <p data-bbox="242 439 547 468">Va. DOC Contract with ICADV</p> <p data-bbox="242 495 667 524">Victim Advocacy Posting English/ Spanish</p> <p data-bbox="242 551 437 580">SART Lesson Plan</p> <p data-bbox="242 607 293 636">SOF</p> <p data-bbox="242 663 293 692">PAQ</p> <p data-bbox="242 725 1485 1025">115.21 (a): GEO policy 5.1.2-E, and facility policy 17.003, outline the agency/facility's requirements as it applies to this standard. The policy addresses the requirements of the facility in response to reports of sexual abuse allegations. The LVCC has two investigative staff who initiate all PREA investigations and conduct administrative investigations regarding PREA allegations. The Virginia Department of Corrections (DOC), Special Investigations Unit conducts all criminal investigations at LVCC, including allegations of sexual abuse. The DOC investigators follow a uniform evidence protocol that maximizes the potential for usable physical evidence for criminal prosecutions. The protocols are consistent with the DOJ's Office on Violence Against Women most recent publication "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents." All the DOC investigators are sworn law enforcement officers in Virginia. Allegations involving staff at LVCC are also investigated by the GEO Office of Professional Responsibility (OPR).</p> <p data-bbox="242 1052 1485 1149">115.21 (b): The agency and the facility follow a protocol developmentally appropriate for youth where applicable and adapted from or otherwise based on the U.S. Department of Justice's office on Violence Against Women Publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents".</p> <p data-bbox="242 1176 1469 1341">115.21 (c): VDOC policy requires that all inmates in Central Virginia who are victims of sexual abuse are transported the South Hampton or Virginia Commonwealth University Medical Center for forensic exams. VDOC policy requires that all inmates in Central Virginia who are victims of sexual abuse are transported the South Hampton or Virginia Commonwealth University Medical Center for forensic exams. In information reported on the Pre-Audit Questionnaire, in the last 12 months there were no SANE exams performed. The facility has a MOU with South Hamton Medical Center.</p> <p data-bbox="242 1368 1481 1565">115.21 (d): The DOC also has a written Memorandum of Understanding with the Virginia Sexual and Domestic Violence Action Alliance, (i.e., Action Alliance). The auditor interviewed a staff member at Action Alliance who confirmed the agency has a contract with the DOC and that Action Alliance has received calls from LVCC. The MOU states, "The statewide hotline shall seek to link VDOC victims to accompaniment services through a trained victim advocate when victims request this service. This may include participation of advocates at forensic exams, during investigations and may also include follow up visits or communication.</p> <p data-bbox="242 1592 1458 1657">115.21 (e): The terms of the written contract with VDOC provides advocates to accompany and support the victim through the forensic medical exam process and the investigatory process and provide additional emotional support services.</p> <p data-bbox="242 1684 1390 1749">15.21 (f): The Virginia Department of Corrections Special Investigative Unit are trained investigators and follow the requirements of paragraphs (a) through (e) of this section.</p> <p data-bbox="242 1776 1485 1841">Compliance of this standard were confirmed by review of the policies, MOUs, Statement of Fact, PAQ, investigative files and interviews with Investigators, GEO PREA coordinator, Va. DOC PREA coordinator and facility director.</p>

115.22	Policies to ensure referrals of allegations for investigations
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 329 437 358">GEO policy 5.1.2-E</p> <p data-bbox="242 387 443 416">LVCC policy 17.003</p> <p data-bbox="242 445 568 474">LVCC PREA Case Tracking Log</p> <p data-bbox="242 504 413 533">Referral for OPR</p> <p data-bbox="242 562 445 591">Investigative Report</p> <p data-bbox="242 620 515 649">Referral to Outside Agency</p> <p data-bbox="242 678 569 707">GEO Corporate Website Posting</p> <p data-bbox="242 736 483 766">MOU Statement of Fact</p> <p data-bbox="242 795 293 824">PAQ</p> <p data-bbox="242 853 1474 1173">115.22 (a): GEO policy 5.1.2-E, and facility policy 17.003, outline the agency's policy and procedures for investigating and documenting incidents of sexual abuse and sexual harassment. The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. All allegations involving staff are referred to GEO's Office of Professional Responsibility (OPR). In the past 12 months there were 24 allegations of sexual abuse/sexual harassment received. LVCC policy 17.003 states, "As a member of the Sexual Assault Response Team (SART) the Facility Investigator will be responsible for collecting information and evidence as necessary and conducting appropriate referrals to local law enforcement agencies." The policy continues, "LVCC shall have a policy in place to ensure that all allegations of Sexual Abuse or Sexual Harassment are referred for investigation to a law enforcement agency with legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. These referrals will be documented and retained in accordance with VADOC and GEO records retention policies."</p> <p data-bbox="242 1202 1482 1397">115.22 (b): GEO policy ensures that allegations of sexual abuse or sexual harassment that appear to be criminal be referred for investigation to an agency that has the legal authority to conduct criminal investigations. Based on statement of fact by LVCC facility director, Virginia Department of Corrections Special Investigative unit are authorized to conduct criminal investigations. The agency policy regarding the administrative investigation of allegations of sexual abuse or sexual harassment and referrals for criminal investigations is published on the agency website and can be accessed at https://www.geogroup.com/PREA.</p> <p data-bbox="242 1426 1431 1487">115.22 (c): Information published on the GEO website describes the responsibilities of the agency and the investigating agency in the investigation of allegations of sexual abuse and sexual harassment.</p> <p data-bbox="242 1516 1431 1612">In the interview with one of the PREA investigators at LVCC, the investigator confirmed that the GEO and DOC policies regarding investigations are followed, and that all allegations of sexual abuse or sexual harassment are criminally or administratively investigated.</p>

115.31

Employee training

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

GEO Corporate Policy 5.1.2-A

LVCC Policy 17.003

VDOC E-Learning Acknowledgment

PREA Basic Training Acknowledgment (Pre-Service & In-Service

Cross Gender Pat Searches & Searches of Transgender & Intersex (Pre-Service & In-Service)

Acknowledgment of Receipt of Training & Brochures (Pre-Service & In-Service)

Annual In-Service Training Record

115.31 (a): All staff are provided training that includes all areas of PREA training and protocol for sexual abuse prevention, intervention, reporting, and protecting the inmates and preserving the possible crime scene. The facility receives training developed for Va. DOC and includes films, power point presentations, and lectures.

Training includes:

- Zero-tolerance policy for sexual abuse and sexual harassment
- How to fulfill staff responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures.
- Inmates' right to be free from sexual abuse and sexual harassment.
- Inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment.
- Dynamics of sexual abuse and sexual harassment in confinement.
- Common reactions of sexual abuse and sexual harassment victims.
- How to detect and respond to signs of threatened and actual sexual abuse.
- How to avoid inappropriate relationships with inmates.
- How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates.
- How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.
- How to conduct cross gender pat searches:

Newly hired employees receive training relative to PREA standards during their initial training in a classroom setting. Yearly training is conducted in classroom and computer-based training.

115.31 (b): LVCC Policy 17.003 recognizes that the facility houses male inmates. Policy mandates that the facility will be required to modify training to meet needs of a different population. Staff assigned to specialized Post such as transportation officers, supervisors, and investigators receive additional training.

115.31 (c): According to the computer database for training, all staff have received training in the last 12 months. Staff interviewed indicated they had received additional refresher training during the last six months. At LVCC staff received annual in-service training. According to the PAQ all staff received either initial or annual training in the last 12 months. Between trainings, the facility shift briefings and staff meetings, and employees receive emails regarding PREA updates and information. Third Party Reporting Posters are displayed in various locations throughout the facility.

115.31 (d): Upon completion of PREA pre-service and annual in-service training, staff sign a VA.DOC Acknowledgement of Receipt of Training and Brochures Sexual Assault Prevention form and a Pre-service Training Record and an In-service Training Record form acknowledging receipt and understanding of all training received, including PREA. They also sign a

PREA Basic Acknowledgment Training form upon completion of general PREA training and a Cross Gender Pat Searches & Searches of Transgender and Intersex acknowledgment form. Documentation of annual PREA training for employees is maintained in individual training records maintained by the Training Coordinator.

A review of the training curriculum, training sign-in sheets and other related documentation, as well as staff interviews, confirmed staff are required to acknowledge, in writing, not only that they received PREA training, but that they understood it. A review of documentation and staff interviews confirmed that the facility is compliant with this standard.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>GEO Corporate Policy 5.1.2-A</p> <p>LVCC Policy 17.003</p> <p>VA.DOC Volunteer Training</p> <p>Approved Volunteer Roster</p> <p>Documentation of Volunteer Training</p> <p>Acknowledgment of Receipt of Training and Brochures</p> <p>115.32 (a): LVCC Policy 17.003 mandates 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. The facility employees 33 contractors. These contractors attend basic PREA training with facility staff and specialized training for medical and mental health staff. The facility has 33 contractors that have received training in the last 12 months. Contractors and Volunteers are also provided a PREA pamphlet that outlines the expectations of volunteers and contractors to report any allegation of sexual abuse and how to avoid in appropriate relationships with inmates.</p> <p>115.32 (b)(c): All contractors receive the same PREA training as employees prior to assignment and sign a PREA Basic Acknowledgement Form and an VA.DOC Acknowledgement of Receipt of Training and Brochures Sexual Assault Prevention form.</p> <p>The VA.DOC volunteer training curriculum was provided for review. The training included 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. Volunteers receive this training annually and sign an VA.DOC Documentation of Volunteer Training Form. Volunteer training is maintained in the volunteer files, while contractor documentation of training is maintained by the training coordinator. At the present time the facility has begun to retrain volunteers and begun allowing volunteers to provide services at the facility. There was one volunteer that has begun services. In interviews with him, he indicated that he has provided services at the facility for many years and attends the training every year.</p> <p>A review of random contractor training files and volunteer files confirmed compliance with the standard. Interviews with one volunteer and five contractors further confirmed compliance with this standard. Further compliance was determined by interviews with the training coordinator and volunteer coordinator.</p>

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

GEO Corporate Policy 5.1.2-A

LVCC Policy 17.003

Inmate Handbook

Inmate PREA Brochure

Facility PREA Postings

Inmate Receipt of PREA Brochure

Inmate Receipt of PREA Comprehensive Education

Inmate Orientation PowerPoint

Inmate files reviewed

115.33 (a): GEO policy 5.1.2-A, facility policy 17.003 mandates all inmates receive information at time of intake and if transferred from another facility about the zero-tolerance policy and how to report incidents of sexual abuse or sexual harassment, their rights to be free from retaliation for reporting such incidents and are informed of the agency/facility policies and procedures for responding to such incidents. In interview with intake staff, on the day of arrival, inmates receive a VA.DOC Inmate Handbook, and a VA.DOC Sexual Assault Prevention and Reporting Inmate/Student Information Brochure and sign a Receipt for Adult Inmate Handbook and Adult Disciplinary Procedures form. This was observed by the auditor during the intake of inmates. Also, during the intake inmates were watching a PREA video that included the same information. The information can also be found on the inmates' tablets.

115.33 (b): Inmates receive comprehensive PREA education as part of the orientation process usually on the second day of their arrival, however by policy at a minimum within the first seven days of arrival to the facility. Inmates sign an Inmate Education Program acknowledgement form acknowledging receipt of PREA education. The curriculum provided to inmates was provided for review.

115.33 (c): The intake staff and PREA compliance manager stated that all inmates have received the training with the exception of the inmates that arrived during the audit. They had received the PREA intake orientation and were scheduled to receive the additional comprehensive training after I completed my onsite audit. According to the PAQ 461 inmates received the information at intake and 461 received the comprehensive PREA training.

115.33 (d): All PREA education provided to inmates is in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled or have limited reading skills. The Inmate Handbook, the VA.DOC brochure and all verbal information given is provided in both English and Spanish. A contract with the Language Training Center, Inc. provides translation of any other languages. The facility has a TTY for deaf or hard of hearing inmates as well as tablets for visual transmittal of PREA information. The inmate that was interviewed utilizing the disability protocol stated he received the orientation and comprehensive training through a staff interpreter.

115.33 (e): The facility maintains documentation of inmates' participation in PREA education. In review of 26 random inmate files, all files were complete with proper documentation of receipt of written PREA education material.

115.33 (f): Throughout the facility were posters including Sexual Assault Prevention and Reporting Posters; GEO Zero Tolerance Posters, End the Silence Posters, and ICADV. These posters were informative and included telephone numbers and addresses. Also Notice of Audit was posted throughout the facility.

The auditor interviewed 40 inmates. All the inmates said they were told about PREA at Intake. Within a week a more formal PREA training is presented, during which time the PREA video, PREA: What you need to know is shown. Several inmates said staff discussed PREA and answered questions. The video is available in English and Spanish. The inmates said they are given a DOC brochure that explains PREA. The Inmate Handbook informs inmates about preventing sexual abuse and sexual harassment and how to report it if it does happen. The handbook also describes the PREA Grievance Procedure. PREA posters and signs, in English and Spanish, are placed throughout the facility. Some of the inmates said the facility counselors do a good job of keeping them informed of the latest information on PREA. The auditor examined 26 inmates' files and found written acknowledgement and documentation, in each file, that the inmate had received the PREA education.

The auditor reviewed the comprehensive Trainer Outline that was developed by DOC. "DOC Preventing Sexual Abuse & Sexual Assault (Training for those incarcerated in the Virginia Department of Corrections)" included all of the requirements of this standard.

Based on review of the training curriculum, interviews with residents and staff it was determined that the facility exceeded the standards for training inmates.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation was reviewed in formulating compliance with this standard:</p> <p>GEO Corporate Policy 5.1.2-A</p> <p>LVCC Policy 17.0013</p> <p>Specialized Investigators</p> <p>General PREA Training</p> <p>Specialized Investigators Certificate of Completion of Specialized Training</p> <p>PREA Training Acknowledgment</p> <p>Current Investigators</p> <p>Specialized Investigators Training Curriculum</p> <p>115.34 (a): GEO Corporate Policy 5.1.2-A and LVCC Policy 17.003 mandates that in addition to the general training provided to all employees pursuant to §115.31, the agency ensures that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings.</p> <p>115.34 (b): The facility Investigators have completed investigating sexual abuse in a confinement setting and additional online training on investigating sexual abuse. Training includes Investigating Sexual Abuse through GEO training staff. The training curriculum was reviewed and included interviewing sexual abuse victims, proper use of the 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.</p> <p>115.34 (d): The facility has two trained investigators. The agency maintains documentation that investigators have received specialized training on conducting sexual abuse investigations in confinement settings. Upon completion of the training, investigators receive a certificate of completion. In review of investigators' training files, investigators have completed this specialized training, as well as general training provided to all employees and documentation is maintained by the facility. In interview of the facility investigators, they confirmed receiving specialized training and general PREA education provided to all employees and were able to confirm the topics included in the specialized training they received.</p> <p>Compliance was determined by review of the training curriculum, investigator training records, investigators certificate of completion, investigative reports, and interviews with PREA Coordinator, Agency Head, investigators, and facility director.</p>

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>GEO Corporate Policy 5.1.2-A</p> <p>LVCC Policy 17.003</p> <p>Medical Specialized Training Curriculum</p> <p>Medical Staff Roster</p> <p>PREA Training Certification- Nurse</p> <p>VA.DOC Mandatory Pre-Service PREA Questions</p> <p>VA.DOC Acknowledgment of Receipt of Training</p> <p>115.35 (a): The GEO PREA Director shared the GEO Specialized Medical and Mental Health PREA Training PowerPoint curriculum. This training program was written by the GEO PREA Director in cooperation with the National Commission on Correctional Health Care and the PRC. The medical and mental health staff take this class online. A written exam follows the online training. The LVCC PCM provided the auditor with the roster of all the medical and mental health staff who took the exam and confirmed the staff passed the exam. Interviews with the medical and mental health staff confirmed they were very knowledgeable about how to detect the signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to a victim of sexual abuse and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. The medical and mental health staff are also very knowledgeable.</p> <p>115.35 (b): The medical and mental health staff do not conduct forensic examinations.</p> <p>115.35 (c): Staff received a certification on completion for specialized training. They sign an acknowledge to training for the generalized PREA training. Both documents were provided in the pre audit documentation and verified through interviews with contracting nurse.</p> <p>115.35 (d): All medical staff assigned to the facility attend the same training as required to attend all training found in standard 111:31 staff training.</p> <p>Compliance was determined by review of the training curriculum, copy of certificate and acknowledgement statement and interviews with the nurse.</p>

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

GEO Corporate Policy 5.1.2-A

LVCC Policy 17.003

Va. DOC Screening Instrument

Va. DOC Rescreening Instrument

Inmate File Reviews

115.41 (a): GEO policy and facility policy 17.003, requires all inmates are assessed for their risk of being sexually abused or sexually abusive towards others within 24 hours of arrival or transferred to the facility. On information provided on the Pre-Audit Questionnaire, in the past 12 months, 461 inmates assigned to the LVCC were assessed for their risk of victimization or abusiveness upon arrival. This includes inmates that transferred to the facility. All inmates at LVCC were assessed during intake and upon transfer by designated counselor for their risk of being sexually abused by another inmate in a VADOC/GEO facility or being sexually abusive towards another inmate in a VADOC/GEO facility.

115.41 (b): Intake screening takes place within 24 hours of inmates' arrival to the facility. The process that is utilized includes part of the initial intake. Once the inmate is searched, they receive PREA pamphlets and handbook. During that time the case manager or staff assigned to conduct the screening review the inmates file and meets with the inmates. During this meeting staff introduce PREA to the inmate and explains the purpose of the screening with the inmates. The inmate is then asked to sign to acknowledge they have received the screening. If the inmate has past history of victimization or predator behavior the screening staff completes a referral that is sent to the medical staff to refer to the mental health staff to set up an interview with the inmate. Medical is available during the screening process conducting a medical review and suicide screening.

115.41 (c): Intake risk assessments are conducted by a Program Facilitator using VA.DOC's Intake screening instrument, an objective screening tool. All screening are documented on the VACORIS system. The tool is then forwarded to the Classification Supervisor and the PREA Compliance Manager for review and recording in VACORIS. The system provides an update of any inmate that has been at the facility for 25 days and not received a PREA reassessment.

115.41 (d)(e): The screening includes the screener's thorough review of any available records available to assist with determining the detainee's risk assessment. The Intake Sexual Violence Assessment Tool was reviewed.

It contains:

- Whether the inmate has a mental, physical, or developmental disability?
- The age of the inmate?
- The physical build of the inmate?
- Whether the inmate has previously been incarcerated?
- Whether the inmates' criminal history is exclusively nonviolent?
- Whether the inmate has prior convictions for sex offenses against an adult or child?
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming?
- Whether the inmate has previously experienced sexual victimization?
- The inmate's own perception of vulnerability?
- Perpetrators of sexual abuse during incarceration?
- Prior conviction of violent offenses?
- History of Assaultive Conduct in DOC in the past 5 years?
- Institutional conduct of history for sexual behavior?

115.41 (f): Within a set time period, not to exceed 30 days of inmates' arrival to the facility, inmates are reassessed by their assigned Case Manager for their risk for victimization and abusiveness using the Follow-up, Annual & Reassessment Sexual Violence Assessment Tool. In information provided on the Pre-Audit Questionnaire, 461 inmates entering the facility were reassessed within 30 days of arrival.

115.41 (g): An inmate's risk level will also be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information.

115.41 (h): Policy mandates that inmates are not be disciplined for refusing to answer any questions or for not disclosing complete information. Interviews with screening staff confirmed they would not discipline or coerce an inmate to answer Screening questions.

115.41 (i): Only the facility director, PREA Compliance Manager, Program Facilitator, Case Managers and Classification staff have access to screening information.

Compliance was determined by interview with Case Managers and the PREA Compliance Manager and in review of random inmate records the screening process is in place. In interview with inmates, they confirmed they were screened upon arrival to the facility and remembered being asked PREA questions again by their Case Manager.

115.42	Use of screening information
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 547 356">GEO Corporate Policy 5.1.2-A</p> <p data-bbox="242 383 446 412">LVCC Policy 17.003</p> <p data-bbox="242 439 461 468">Risk Assessment Log</p> <p data-bbox="242 495 354 524">LGBTI Log</p> <p data-bbox="242 551 513 580">PREA Bed Locations Form</p> <p data-bbox="242 607 544 636">Transgender Care Committee</p> <p data-bbox="242 663 707 692">PREA Reassessment of Transgender Inmates</p> <p data-bbox="242 725 1477 956">115.42 (a): GEO policy 5.1.2-A, explains the use of PREA screening information. The agency uses the information from the risk screening form to make housing, bed, work, education and program assignments with the goal of separating inmates at high risk of being sexually victimized from inmates with those at high risk of being sexually abusive. The facility maintains a Bed Location chart that determines the at-risk inmates and possible predator inmates. The case manager supervisor and PREA compliance managers explained that prior to assigning an inmate to a bed the intake staff Sergeant reviews the open beds to determine the rooms that house at risk and possible predator inmates. This same information is utilized in programming and work assignments for inmates.</p> <p data-bbox="242 987 1493 1115">115.42 (b): Individualized determinations are made about how to ensure the safety of each inmate. Inmates who score at risk of victimization or abusiveness are referred for further evaluation with the Mental Health provider. Inmates have an option of refusing these services. Those identified to be at risk are tracked on a Current Inmates Likely PREA Victims/Predators report maintained current on a shared drive in the VACORIS system.</p> <p data-bbox="242 1146 1469 1440">115.42 (c): GEO policy and LVCC Policy 17.003 mandates that making housing and programming assignments for transgender or intersex inmates, the facility will consider on a case-by-case basis whether the placement would present management or security problems. Inmates who self-disclose being gay, bisexual, transgender or intersex are tracked on a LGBTI List that is maintained by the PREA Compliance Manager. Transgender and intersex inmates are housed after meeting with the Transgender Care Committee (TCC). The PREA Compliance Manager, Chief of Security, Classification Supervisor and Health Services Administrator make up the TCC. The TCC would meet with the inmate, complete a GEO Statement of Search/Shower/Pronoun Preference Form and documents the meeting on the Transgender Care Committee Summary. At the time of the on-site audit visit, there were two inmates who self-disclosed being transgender or intersex assigned to the facility.</p> <p data-bbox="242 1471 1493 1632">115.42 (d) – (f) A transgender or intersex inmate’s housing and program assignments will be reassessed every six months to review any threats to safety experienced by the inmate. Transgender and intersex inmates’ placement and programming are reviewed as needed, but at least every six months. A transgender or intersex inmates’ own views of their safety is taken into consideration. When the TCC meets with transgender or intersex inmates meet with the TCC they are given an opportunity to express their views.</p> <p data-bbox="242 1664 1469 1724">Transgender and intersex inmates are offered the opportunity to shower separately from other inmates as indicated in their Statement of Search/Shower/Pronoun Preference Form.</p> <p data-bbox="242 1756 1485 1848">GEO does not place lesbian, gay, bisexual, transgender or intersex inmates in dedicated units or wings solely based on such identification. In interview with the one inmate who self-disclosed being gay, he did not feel he was housed any differently because of his sexual orientation.</p> <p data-bbox="242 1879 1490 1971">There were four inmates who indicated they were gay. Three of the four indicated he felt safe at the facility. Three inmates that claimed past victimization were interviewed. Each indicated they were offered an opportunity to talk to a mental health professional. Two declined and one indicated he was interview by mental health staff and chose not to continue the sessions.</p> <p data-bbox="242 2002 1445 2063">Compliance was determined by review of policy and forms and interviews with the PREA coordinator, PREA compliance manager, agency head, case manager supervisor, and facility director.</p>

115.43	Protective Custody
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1353 300">The following policies, directives and documentation was reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 547 356">GEO Corporate Policy 5.1.2-A</p> <p data-bbox="242 383 446 412">LVCC Policy 17.003</p> <p data-bbox="242 439 424 468">Statement of Fact</p> <p data-bbox="242 495 293 524">PAQ</p> <p data-bbox="242 557 1481 651">115.43 (a): The procedure prohibits the placement of inmates at high risk for victimization in segregated housing unless an assessment of all available alternatives has been made and there is no available means of separation from the likely abuser (for no longer than 72 hours).</p> <p data-bbox="242 680 1481 741">115.43 (b): Inmates placed in segregated housing for this purpose have access to programs, privileges, education and work opportunities to the extent possible. The facility will document and justify any restrictions imposed.</p> <p data-bbox="242 770 1481 965">115.43 (c): Based on interviews, when there is a situation of an inmate alleging risk of victimization and needing to be separated from the alleged abuser, segregation would be utilized as a last alternative. If this placement was necessary, staff stated that the inmate would have access to the appropriate privileges and the justification for the placement would be documented. The inmate's placement would be reviewed by the Institution Classification Team every 30 days. Based on interview with the facility administrator, any inmate that is housed in restrictive housing units more than thirty days would be transferred to another facility.</p> <p data-bbox="242 994 1406 1055">115.43 (d): If involuntary segregated housing assignment is made, the facility will document the basis for the facility's concern for the inmate's safety and the reason no alternate means of separation can be arranged.</p> <p data-bbox="242 1084 1493 1249">115.43 (e): In cases where involuntary segregated housing is used for longer than the initial 30 days, the facility will review the status every 30 days to determine if ongoing involuntary housing is needed. According to information provided on the Pre-Audit Questionnaire and in interview with the facility director and security staff who supervise inmates in RHU, in the past 12 months there has not been a time that an inmate found at high risk of victimization or an inmate who alleged sexual abuse was placed in involuntary segregated housing.</p> <p data-bbox="242 1279 1406 1308">Compliance with this standard was determined through review of procedures, observation during tour and interviews.</p>

115.51	Inmate reporting
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 1169 356">The handbook and PREA Posters specifically provide the following ways for inmate to report:</p> <p data-bbox="242 383 655 412">The following are internal reporting ways:</p> <ul data-bbox="242 439 829 869" style="list-style-type: none"> • Grievance System • Telling the Case Manager • Chaplain • Reporting to any staff member either verbally or in writing • Va. DOC Hotline #55 • Writing an inmate request • Action Alliance • Writing an anonymous note <p data-bbox="242 898 1474 994">Inmates interviewed knew of the multiple way to report. Most stated they would tell a staff member they trusted. The auditor called the Alliance Center and spoke with a representative of that organization. The staff confirmed that the center accepts hotline calls and forwards them to the Va. DOC PREA coordinator.</p> <p data-bbox="242 1023 1493 1120">115.51 (b): The facility also provides multiple external ways for inmates to report allegations to a public or private agency that is not part of GEO or LVCC. Inmates are informed on posted information they call #55 which will be answered by a third-party entity.</p> <p data-bbox="242 1149 1449 1245">115.51 (c): Staff interviewed were aware of the requirement to accept reports made verbally, anonymously and from third parties. All staff interviewed indicated they would document verbal reports immediately and notify the shift supervisor by phone or in person.</p> <p data-bbox="242 1274 1485 1536">115.51 (d): Staff have access to private reporting by calling the Employee Hotline (866-568-5425) or the Corporate PREA Coordinator (561-999-5827). Information for inmate and staff reporting was found on the GEO website (https://www.geogroup.com/PREA). Third Party Reporting posters and the Employee Handbook informs employees of their responsibility of reporting sexual abuse and sexual harassment and their reporting options. Staff carry with them a Sexual Abuse First Responder Card, which has the employee hotline number and the website address for anonymous reporting. Staff interviewed knew how to privately report sexual abuse and sexual harassment of inmates. Most of the staff were not aware of the number on the card and the facility agreed to explain the reporting in the next 6 shift briefings. On August 2, the PREA compliance manager indicated they had made that announcement.</p> <p data-bbox="242 1565 1469 1628">Compliance was determined by testing the telephone system, reviewing policies and procedure, posters, and the resident handbook. Compliance was also determined by interviews with residents, staff, shift supervisors, PCM, and facility director.</p>

115.52	Exhaustion of administrative remedies
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 547 356">GEO Corporate Policy 5.1.2-A</p> <p data-bbox="242 383 446 412">LVCC Policy 17.003</p> <p data-bbox="242 439 699 468">LVCC Policy 12.06 Inmate Grievance System</p> <p data-bbox="242 495 873 524">Va. Department of Corrections Policy 866.1 Inmate Grievances</p> <p data-bbox="242 551 293 580">PAQ</p> <p data-bbox="242 607 539 636">Inmate Orientation Handbook</p> <p data-bbox="242 663 571 692">PREA Brochure English/Spanish</p> <p data-bbox="242 719 387 748">PREA Posters</p> <p data-bbox="242 775 1477 947">115.52 (a) Va. Department of Corrections and LVCC grievance system provides a procedure in place for inmates to submit grievances regarding sexual abuse and the agency has procedures for dealing with these grievances. Posters located throughout the facility advise resident that they may file a grievance. The resident handbook explains the process for filing a grievance. Any grievance that alleges sexual abuse, sexual harassment, retaliation for reporting an allegation or for cooperating in an investigation will be immediately forwarded to Va.DOC SIU Investigators.</p> <p data-bbox="242 974 1489 1205">115.52 (b): There is no time limit when an inmate can submit a grievance regarding sexual abuse. GEO does not impose a time limit to any portion of a grievance that does not allege an incident of sexual abuse. Inmates are not required to use any informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse. Agency policy does not restrict GEO's ability to defend against a lawsuit filed by an inmate on the ground that the applicable statute of limitations has expired. The PREA Compliance Manager receives all copies of grievances related to sexual abuse or sexual harassment for monitoring purposes. In interview with the PREA Compliance Manager and information provided on the Pre- Audit Questionnaire, in the past 12 months there were 0 PREA related grievances filed.</p> <p data-bbox="242 1232 1469 1330">115.52 (c): Policy provides that inmates have a right to submit grievances alleging sexual abuse to someone other than the staff member who is the subject of the complaint and the grievance will not be referred to the subject of the complaint. If a third-party files a grievance on an inmate's behalf, the alleged victim must agree to have the grievance filed on his behalf.</p> <p data-bbox="242 1357 1485 1456">115.52 (d): A final decision shall be issued on the merits of any portion of the grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Computation of the 90-day time period shall not include time consumed by individuals in the facility in preparing any administrative appeal.</p> <p data-bbox="242 1482 1474 1682">115.52 (e): Third parties such as fellow inmates, family members, attorneys or outside advocates may assist inmate in filing requests for administrative remedies relating to allegations of sexual abuse and may file on behalf of inmate. The alleged victim must agree to have the request filed on his or her behalf; however, he/she is not required to personally pursue any subsequent steps in the administrative remedy process. If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision. In interview with the PREA Compliance Manager and on information provided in the Pre-Audit Questionnaire, in the past 12 months, there were no grievances filed by a third party.</p> <p data-bbox="242 1709 1485 1908">115.52 (f): Policy provides inmate may file an emergency grievance if he/she is subject to substantial risk of imminent sexual abuse. After receiving an emergency grievance of this nature, the facility director or designee will ensure that immediate corrective action is taken to protect the alleged victim. An initial response to the emergency grievance to the individual is required within 48 hours and a final decision will be provided within five calendar days. In interview with the PREA Compliance Manager and on information provided on the Pre-Audit Questionnaire, in the past 12 months, there were no emergency grievances alleging sexual abuse filed.</p> <p data-bbox="242 1935 1420 1995">115.52 (g): A inmate can be disciplined for filing a grievance related to alleged sexual abuse if it is determined that the inmate filed the grievance in bad faith. There were no inmates disciplined for filing a grievance in bad faith.</p> <p data-bbox="242 2022 1436 2083">Compliance was determined by review of the policies, grievance, and by interviews with GEO PREA coordinator, PREA compliance managers, and facility director.</p>

115.53	Inmate access to outside confidential support services
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 678 356">Acknowledgement of Receipt of Orientation</p> <p data-bbox="242 383 491 412">Inmate PREA Handbook</p> <p data-bbox="242 439 547 468">GEO Corporate Policy 5.1.2-A</p> <p data-bbox="242 495 678 524">Va. Department of Corrections Policy 038.3</p> <p data-bbox="242 551 671 580">Acknowledgement of Receipt of Handbook</p> <p data-bbox="242 607 1155 636">Va. DCO MOU with Virginia Sexual and Domestic Violence Action Alliance (Action Alliance)</p> <p data-bbox="242 663 783 692">Victim Advocacy PREA posters (English and Spanish)</p> <p data-bbox="242 719 1477 920">115.53 (a): Va. DOC Policy 038.3 addresses the agency/facility's policies on providing inmates with access to outside victim advocates for emotional support services related to sexual abuse. The facility enables reasonable communication between the inmates and these agencies in a confidential manner. The inmates are informed by the facility and according to interviews with the Action Alliance staff of the extent to which communications will be monitored. According to the PREA compliance manager and Action Alliance the facility would monitor only to the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.</p> <p data-bbox="242 947 1485 1379">The Virginia DOC contracts with the Virginia Sexual and Domestic Violence Action Alliance, also known as "Action Alliance," to provide inmates with access to outside victim advocates for emotional support services related to sexual abuse. Inmates may also report allegations of sexual abuse or sexual harassment to Action Alliance. The contract also states that Action Alliance will seek to link a DOC sexual abuse victim with a trained advocate who will accompany the victim to forensic exams, investigation interviews, and any follow-up visits that may be required. The auditor reviewed the contract. The auditor is very aware of the work done by Action Alliance to help victims of sexual abuse and domestic violence. The staff and volunteers of Action Alliance are very well trained on PREA. Prior to the on-site audit, the auditor called Action Alliance and inquired about calls that agency had received from LVCC. The agency reported they had received 30 calls from LVCC over the previous two years. The auditor also called JDI who reported they had received one call from LVCC. Signs are posted throughout the facility that inform inmates how they can contact Action Alliance by phone or mail. Inmates can call #55 and select the option for Action Alliance. The Action Alliance post office box address is also on the posters. Not all inmates the auditor interviewed were aware of "Action Alliance" by name, but all were aware of the posters that say how they can report an allegation or call for emotional support.</p> <p data-bbox="242 1406 1469 1503">115.53 (b): Inmate's PREA Handbook provides a phone number and address of the speed dial number and address of the Action Alliance in the inmate handbook and poster located throughout the facility. The auditor called the speed dial number and spoke with a counselor with the Action Alliance.</p> <p data-bbox="242 1529 1481 1693">115.253 (c): The facility has a MOU with Action Alliance to provide victim advocacy services and follow up services following a sexual abuse if requested. Interviews with the center indicated they are certified through Virginia Coalition Against Sexual Violence. The center indicated that inmates that call or write their office are provided with victim advocacy and emotional support services during the call. The center will make arrangement through the Facility to provide emotional support by telephone in a private office.</p> <p data-bbox="242 1720 1449 1785">Compliance was determined by review of handbook, posters located throughout the center and interviews with the Action Alliance regional director and interview with Virginia Department of Corrections PREA coordinator.</p>

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>GEO Corporate Policy 5.1.2-A</p> <p>LVCC Policy 17.003</p> <p>Va. DOC website</p> <p>GEO website</p> <p>Third Party reporting posters</p> <p>115.54 (a): Reporting Posters are visible in the visitation room, lobby and is found in the inmate handbook. GEO provides Reporting system on GEO Website http://www.geogroup.com/PREA (Social Responsibility-PREA Certification Section) provides information on ways for third party reporting including anonymous reporting The Virginia Department of Corrections public web site provides contact information on how to report sexual abuse and sexual harassment on behalf of an inmate. The auditor reviewed both the GEO Web site and the Virginia DOC Web site. Both Web sites gave specific instructions as to how anyone with information can report an allegation of sexual abuse or sexual harassment. Phone numbers, mailing addresses, and email addresses are listed. Individuals can also report an allegation electronically by completing the form on the Web site. The auditor found the process to be user friendly. Signs are posted throughout the facility informing people how they can make third-party reports. Interviews with inmates confirmed they were aware of the third-party reporting process.</p> <p>Compliance was determined by review of the postings, reviewing the websites and interviews with PREA coordinator, PREA compliance manager of facility director.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>Va. DOC MOU with Sexual and Domestic Violence Action Alliance</p> <p>Staff training</p> <p>Specialized medical training.</p> <p>Mandatory reporting Survey of Vulnerable Persons</p> <p>PREA Lesson Plan</p> <p>Statement of Fact</p> <p>Staff Report</p> <p>Virginia DOC PREA Policy</p> <p>LVCC Policy 17. 003</p> <p>GEO Corporate Policy 5.1.2-A</p> <p>115.61 (a): LVCC Policy 17. 003 mandates staff, volunteers and contractors must take all allegations of sexual abuse and sexual harassment seriously and are required to report immediately any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment and any retaliation against inmate or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This information is to be reported the Shift Supervisor, the PREA Compliance Manager, or facility executive staff. In interview with random staff, volunteer, and contractors, they knew their reporting duties. Staff receive training on reporting. GEO and Va. DOC have implemented a specialized training program for medical and mental health professionals that includes duties to report, State's vulnerable persons reporting duties and confidential reporting duties. The facility provided a statement of fact that there have been no allegations by vulnerable persons in the last 12 months.</p> <p>115.61 (b): Policy and training mandates that apart from reporting to designated supervisors, staff are not to reveal any information related to a sexual abuse report to anyone. Staff, volunteers and contractors interviewed knew this information is to be kept confidential and knew whom to report allegations.</p> <p>115.61 (c)(d): Medical attend specialized training which includes reporting sexual abuse and to inform inmate of their duty to report and the limitations of confidentiality at the initiation of services. The training also provides reporting of a vulnerable adult under a State or local vulnerable persons statute, under applicable mandatory reporting laws. The facility does not house inmates under the age of 18. Medical and mental health staff interviewed confirmed this practice and specialized training.</p> <p>The Nurse indicated that the inmate signs a statement that includes her limitation of confidentiality.</p> <p>115.61 (e): In interview with the facility director and his executive team, the LVCC reports all allegations of sexual abuse and sexual harassment, including third party and anonymous reports to the facility investigators, GEO PREA coordinator or regional supervisor. There are staff reporting posters located throughout the facility. Staff carry a PREA card with this information for easy reference in making reports.</p> <p>According to statement of fact there have been no reports from third parties, contractors or volunteers in the last 12 months. Interviews with the Agency PREA coordinator and agency head confirmed that GEO mandates staff, volunteers, and contracts report all sections of this standard.</p> <p>Compliance was determined by review of the policies, training curriculum and interviews with random staff, medical staff, and facility director.</p>

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 318">Auditor Discussion</p> <p data-bbox="229 318 1509 380">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="229 380 1509 443">GEO Corporate Policy 5.1.2-A</p> <p data-bbox="229 443 1509 506">LVCC Policy 17. 003</p> <p data-bbox="229 506 1509 568">Va. DOC PREA lesson plan</p> <p data-bbox="229 568 1509 631">Statement of Fact</p> <p data-bbox="229 631 1509 739">115.62 (a): LVCC Policy 17. 003 mandates when the facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the alleged victim. All allegations of sexual abuse are to be handled in a confidential manner and conversations with the victim sensitive, supportive, and nonjudgmental.</p> <p data-bbox="229 739 1509 990">The PAQ indicated in the past 12 months there were no times it was necessary for the facility to take immediate action regarding an inmate being in substantial risk of sexual abuse. The facility director stated that if it was suspected an inmate was at substantial risk of sexual abuse, he would immediately separate the inmate abuser or victim and investigate. Staff interviewed was aware of their responsibilities if they felt an inmate was at risk for sexual abuse. Random staff and shift supervisor indicated the inmate that was in imminent danger would be separated from the possible accuser. The facility director indicted this decision to transfer the victim or abuser would be made in concert with Virginia Department of Corrections. There has been no incident when an inmate was moved to another facility for a separation of victim or abuser.</p> <p data-bbox="229 990 1509 1131">Compliance was determined by review of policy and interviews with the GEO agency head, PREA coordinator, facility director, random staff and RHU Lt.</p>

115.63	<p>Reporting to other confinement facilities</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>GEO Corporate Policy 5.1.2-A</p> <p>LVCC Policy 17. 003</p> <p>Email documentation</p> <p>Notification of allegation received from a sending facility</p> <p>Notification of an allegation sent to a receiving facility</p> <p>PAQ</p> <p>115.63 (a)-(c): GEO Corporate Policy 5.1.2-A mandates on receiving an allegation that an inmate was sexually abused while confined at another facility, the incident will be reported to the PREA Compliance Manager. The Facility director will notify the agency or facility head where the abuse is alleged to have happened. but no later than 72 hours of receiving the allegation. The PREA Compliance Manager will maintain documentation that notification was made and include all actions taken regarding the incident. Copies of this documentation will be forwarded to the Va.DOC SIU office and GEO PREA Coordinator.</p> <p>115.63 (d): Interview with the facility director and PREA compliance manager they indicated along with notification to the sending facility director the facility director will notify Viginia Department of Corrections special investigative unit and will document notification of an allegation of sexual abuse or sexual harassment and offer to provide whatever services needed by the facility investigator during the investigative process.</p> <p>According to the PAQ and statement of fact there have been no allegations of inmate being sexually abused while confined at another facility and no allegations that inmates was sexually abused at LVCC.</p> <p>Compliance was determined by review of the policy and interviews with intake staff, PREA compliance manager, agency head, PREA coordinator and facility director.</p>
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>GEO Corporate Policy 5.1.2-A</p> <p>LVCC Policy 17. 003</p> <p>PREA First Responder Card</p> <p>Staff Training</p> <p>Volunteer Training</p> <p>Contractor Training</p> <p>PAQ</p> <p>Statement of Fact</p> <p>115.64 (a): LVCC Policy 17. 003 and staff training requires that correction staff that are the first responders of a sexual assault shall:</p> <ul style="list-style-type: none"> · Separate the alleged victim and abuser, · Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence, · 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. · Notify the shift supervisor by telephone or in person and tell only those staff need to know in assisting you in carrying out these responsibilities. <p>Staff are issued a card that includes steps to take as first responders. All random staff were able to articulate their responsibilities and have received training on preserving and protecting the crime scene.</p> <p>115.64 (b): Staff training requires that non correctional staff that are first responders are required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.</p> <p>All non-contact staff that were interviewed knew their duties and reported they received the training during yearly in-service and on reminder training that is sent out by the PREA compliance manager from time to time.</p> <p>Compliance was determined by review of the policies and training and by interviewing non-contact staff during the onsite audit. As an auditor I randomly tour the administrative, classification area and educational areas and ask staff if I could ask them a question. After reminding them that they don't have to answer the questions I ask them, "what would you do if an inmate came to you and said it was sexual assaulted". All staff were able to articulate they would follow the above requirements.</p>

115.65	Coordinated response
	<p data-bbox="242 145 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 453 239">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 329 549 358">GEO Corporate Policy 5.1.2-A</p> <p data-bbox="242 387 453 416">LVCC Policy 17. 003</p> <p data-bbox="242 445 426 474">Staff PREA Cards</p> <p data-bbox="242 504 1469 629">115.65 (a): GEO Corporate Policy 5.1.2-A mandates that facilities have a coordinated response plan. LVCC Coordinated Response Plan provides written guidance to staff and administration regarding actions to take and notifications to be made. A PREA Incident Checklist for Incidents of Sexual Abuse and Harassment is completed to ensure that all steps of the plan are carried out and proper notifications are made. The Coordinated Response Plan includes:</p> <p data-bbox="242 658 691 687">Action required after report of sexual abuse:</p> <p data-bbox="242 716 397 745">Initial response</p> <p data-bbox="242 775 557 804">Shift supervisors Responsibility</p> <p data-bbox="242 833 451 862">Facility Crime Scene</p> <p data-bbox="242 891 764 920">Notification required when a sexual abuse is alleged</p> <p data-bbox="242 949 427 978">Evidence Protocol</p> <p data-bbox="242 1008 432 1037">Medical Response</p> <p data-bbox="242 1066 491 1095">Mental Health Response</p> <p data-bbox="242 1124 533 1153">Investigative Responsibilities</p> <p data-bbox="242 1182 759 1211">Responsibilities when sexual harassment is alleged</p> <p data-bbox="242 1240 708 1270">Responsibilities when sexual activity is alleged</p> <p data-bbox="242 1299 1465 1352">Each of the above responses includes but not limited to staff, contractors, victim advocates, Va.DOC SIU, and GEO PREA coordinator</p> <p data-bbox="242 1382 1465 1480">A PREA Incident Checklist for Incidents of Sexual Abuse and Harassment is completed to ensure that all steps of the plan are carried out and proper notifications are made. The Chief of Security, Lieutenants, the PREA Compliance Manager, the Lead Investigator, and members of the administrative staff are responsible to ensure compliance to the plan.</p> <p data-bbox="242 1509 1481 1570">Staff interviewed confirmed that they are knowledgeable of the plan and the necessary actions to be taken in response to an allegation of sexual abuse.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>GEO Corporate Policy 5.1.2-A</p> <p>Statement of Fact</p> <p>GEO and or the facility did not enter into a collective bargaining agreement or other agreements that would limit the agency's ability to remove an alleged staff sexual abuser from contact with any inmate pending the outcome of an investigation. Per the statement of fact, LVCC does not participate in collective bargaining agreements. Compliance was determined by review of policies and interviews with agency designee and facility director.</p>

115.67	Agency protection against retaliation
	<p data-bbox="240 143 740 172">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 268 1366 297">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="240 327 547 356">GEO Corporate Policy 5.1.2-A</p> <p data-bbox="240 385 453 414">LVCC Policy 17. 003</p> <p data-bbox="240 443 533 472">Documentation of Monitoring</p> <p data-bbox="240 501 564 530">Protection from Retaliation Logs</p> <p data-bbox="240 560 424 589">Statement of Fact</p> <p data-bbox="240 618 1490 741">115.67 (a): LVCC has as policy to protect inmates who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmate or staff. The policy provides procedures to protect individual in Va. DOC facilities. LVCC designated the PCM and Classification Supervisor as responsible for monitoring retaliation (PCM monitors staff, Classification staff monitors inmates).</p> <p data-bbox="240 770 1434 931">15.67 (b): The procedure states the agency has 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 inmate or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. If any other individual who cooperates with an investigation expresses a fear of retaliation, appropriate measures to protect that individual against retaliation are put in place.</p> <p data-bbox="240 960 1490 1122">115.67 (c): Inmates who allege sexual abuse will be monitored by the PREA Compliance Manager who will meet weekly with the alleged victim beginning the week following the incident and continue monitoring for at least 90 days or longer if there is a continuing need. The Human Resource Manager will monitor conduct and treatment of employees who reported staff misconduct or employee witness who cooperate with these investigations every 30 days for 90 days. Retaliation monitoring of inmate is documented on the Va.DOC database.</p> <p data-bbox="240 1151 1469 1247">115.67 (d): Procedure also requires Monitoring of inmate includes periodic status checks. The PREA compliance manager was interviewed and indicated she would review the monitoring logs on the database on an ongoing basis and randomly will see the inmate during tour to check on his/her status.</p> <p data-bbox="240 1276 1457 1373">115.67 (e): Retaliation monitoring may be terminated if it is determined that the allegation was unfounded. The Retaliation monitor indicated while the official monitoring will end, the facility would continue to check on the inmate for retaliation for making a report.</p> <p data-bbox="240 1402 1452 1462">In interview with Retaliation Monitor, the PREA Compliance Manager and the Human Resource Manager and information provided on the Pre-Audit Questionnaire, in the past 12 months there were no incidents of retaliation that occurred.</p> <p data-bbox="240 1491 1391 1552">Compliance was determined by review of the monitoring logs, agency policy and procedures, investigative files and interviews with the retaliation monitor, agency head, and facility director.</p>

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>LVCC Policy 17. 003</p> <p>GEO Corporate Policy 5.1.2-A</p> <p>Completed PREA Victim Housing Preference form</p> <p>Statement of Fact</p> <p>PAQ</p> <p>115.68 (a): GEO Corporate Policy 5.1.2-A and LVCC Policy 17. 003 requires involuntary segregated housing may be used only after an assessment of available housing alternatives has shown there is no other means of protecting the detainee. 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. The facility has not utilized involuntary restrictive housing for a PREA related incident for protection of inmates for sexual abuse in the last 12 months. This was verified by statement of fact, PAQ, and interview Restrictive Housing Unit LT.</p> <p>Compliance was determined by review of the PAQ and interviews with Restrictive Housing Unit LT and facility director.</p>

115.71	Criminal and administrative agency investigations
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 799 356">GEO Corporate Policy 5.1.2-E Investigative Procedures</p> <p data-bbox="242 383 451 412">LVCC Policy 17. 003</p> <p data-bbox="242 439 539 468">PREA Allegation Tracking log</p> <p data-bbox="242 495 603 524">Administrative Investigative Reports</p> <p data-bbox="242 551 293 580">PAQ</p> <p data-bbox="242 613 1485 808">115.71 (a): GEO Corporate Policy 5.1.2-E Investigative Procedures and LVCC Policy 17. 003 requires an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment at the LVCC, promptly, thoroughly, and objectively, including third party and anonymous reports. The VA DOC Special Investigations Unit (SIU) would lead the investigation and handle the criminal investigation and work with the Commonwealth's Attorney. The SIU and the County Commonwealth's Attorney would decide if there was sufficient evidence to move forward with prosecution. Administrative investigations may be handled internally after review by the VA DOC Special Investigations Unit.</p> <p data-bbox="242 837 1485 965">115.71 (b): The facility has two trained investigators and facility investigators have completed specialized training in the investigation of sexual abuse allegations. The facility provided documentation of completion of specialized investigative training completed by facility investigators. The investigators were interviewed and were extremely knowledgeable regarding how to conduct an investigation in a confinement setting.</p> <p data-bbox="242 994 1493 1122">115.71 (c): It is the responsibility of VA DOC Special Investigations Unit with the assistance of the facility investigators to gather and preserve circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Investigator will interview alleged victims, suspected perpetrators and witnesses and review prior reports of sexual abuse involving the suspected perpetrator.</p> <p data-bbox="242 1151 1453 1211">115.71 (d): When the quality of evidence supports criminal prosecution, VA DOC Special Investigations Unit may conduct compelled interviews only after consulting with prosecutors.</p> <p data-bbox="242 1240 1469 1339">115.71 (e): The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as an inmate or staff. An inmate who alleges sexual abuse is not required to submit to a polygraph examination.</p> <p data-bbox="242 1368 1437 1429">115.71 (f): Administrative investigation are documented in a written report that includes a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.</p> <p data-bbox="242 1458 1481 1556">115.71 (g): A criminal investigation shall be documented in a written report that contains a thorough description of physical, testimonial and documentary evidence. The facility shall request a copy of completed investigative reports from the VA DOC Special Investigations Unit. Allegations will be tracked on the GEO PREA Tracking Log.</p> <p data-bbox="242 1585 1481 1713">115.71 (h): Substantiated allegations of conduct that appears to be criminal shall be referred for criminal prosecution. On information reported on the Pre-Audit Questionnaire and in interview with facility investigators, since the last PREA audit there were no allegations of sexual abuse referred for prosecution. Criminal investigations are conducted by the VA DOC Special Investigations Unit. If an allegation involves staff, notification is made to GEO's Office of Professional Responsibility.</p> <p data-bbox="242 1742 1485 1803">115.71 (i): The agency will retain all written reports as long as the alleged abuser is incarcerated or employed by the agency, plus five years.</p> <p data-bbox="242 1832 1490 1892">115.71 (j): The departure of an alleged abuser or victim from employment or control of the facility or agency, shall not provide a basis for terminating an investigation</p> <p data-bbox="242 1921 1469 2085">115.71 (l): When outside agencies investigate sexual abuse allegations, the facility will cooperate with investigators and will try to remain informed about the progress of the investigation. In interview with the PREA Coordinator, she reported that facilities are required to check in with outside investigators at a minimum of every 30 days and document that contact was made to ensure that requirements such as retaliation monitoring and notices of outcome of investigations are completed as required.</p> <p data-bbox="242 2114 1426 2143">GEO has developed a template for monthly request from Law Enforcement that are conducting investigations to obtain</p>

information on the investigations and to provide assistance as requested.

In interview with facility investigators, they were knowledgeable of their responsibilities and knew when to refer allegations that appear to be criminal for criminal investigation.

Compliance was determined by review of the agency policy and procedures, training curriculum, PAQ, investigative reports and interviews with facility investigator, agency head designee, PREA coordinator and facility director.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="231 190 1508 257">Auditor Discussion</p> <p data-bbox="231 257 1508 324">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="231 324 1508 392">GEO Corporate Policy 5.1.2-E Investigative Procedures</p> <p data-bbox="231 392 1508 459">LVCC Policy 17. 003</p> <p data-bbox="231 459 1508 526">Investigator training curriculum</p> <p data-bbox="231 526 1508 616">115.72 (a): Based on GEO Corporate Policy 5.1.2-E Investigative Procedures and LVCC Policy 17. 003 and Investigator training the facility shall impose no standard higher than the preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. In interview with facility investigators confirmed this practice.</p> <p data-bbox="231 616 1508 725">Compliance was determined by review of policy, training curriculum, and interview with trained investigators.</p>

115.73	Reporting to inmates
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 547 356">GEO Corporate Policy 5.1.2-E</p> <p data-bbox="242 383 451 412">LVCC Policy 17. 003</p> <p data-bbox="242 439 564 468">Administrative Investigative files</p> <p data-bbox="242 495 293 524">PAQ</p> <p data-bbox="242 551 600 580">Notice of Outcome of Investigations</p> <p data-bbox="242 607 1493 808">115.73 (a): GEO Corporate Policy 5.1.2-E Investigative Procedures and LVCC Policy 17. 003 indicate that following an investigation of sexual abuse of an inmate, the inmate shall be informed in writing as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. The SIU or facility investigator is responsible for preparing the Notification of Outcome of Allegation form and presenting it to the alleged victim for his signature. The inmate receives the original notification and a copy of the form, and a copy is maintained in the investigative file, the investigative database and a copy is forwarded to the PREA Coordinator office.</p> <p data-bbox="242 835 1461 965">115.73 (b): According to policy and PREA compliance manager if the facility did not conduct the investigation, the facility shall request the relevant information from the investigative agency in order to inform the inmate. In interview with facility investigators, VA DOC Special Investigations Unit send the results of the investigation to the facility and the facility notifies the inmate of the investigation.</p> <p data-bbox="242 992 1493 1223">115.73 (c): Per the procedures, every allegation is investigated, and every investigated allegation outcome is reported to the inmate with a finding as to whether it was substantiated, unsubstantiated or unfounded. If the allegation is against a staff member, the facility shall inform the inmate whenever the staff member is no longer posted within the inmate's unit, no longer employed at the facility, has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; if the inmate allegation is against an inmate, the facility shall inform the inmate whenever the alleged abuser has been indicted on a charge related to sexual abuse within the facility, or has been convicted on a charge related to sexual abuse within the facility.</p> <p data-bbox="242 1249 1493 1346">115.73 (d): Policy and procedure requires following an inmate's allegation that he has been sexually abused by another inmate, the agency will inform the alleged victim if the alleged abuser has been indicated on a charge related to sexual abuse within the facility or if the alleged abuser has been convicted on a charge related to sexual abuse within the facility.</p> <p data-bbox="242 1373 1493 1435">115.73 (e): All Notification of Outcome of Allegation or attempted notifications are documented and filed in the corresponding investigative file. There were 8 notifications in the last 12 months.</p> <p data-bbox="242 1462 1414 1525">Compliance was confirmed by review of policies, investigative worksheets, interviews with inmates, review a notice to inmates and the PAQ.</p>

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	<p data-bbox="231 197 1508 257">Auditor Discussion</p> <p data-bbox="231 257 1508 313">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="231 313 1508 369">GEO policy 5.1.2-E</p> <p data-bbox="231 369 1508 425">LVCC policy 17.003</p> <p data-bbox="231 425 1508 481">Staff Training</p> <p data-bbox="231 481 1508 537">GEO Employee Handbook</p> <p data-bbox="231 537 1508 593">Reports to Law Enforcement SOF</p> <p data-bbox="231 593 1508 683">115.76 (a): GEO policy 5.1.2-E and LVCC policy 17.003 establishes the standard that employees shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse policy.</p> <p data-bbox="231 683 1508 772">115.76 (b): Based on policy termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p data-bbox="231 772 1508 929">115.76 (c): Based on policy and facility director and human resources staff disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the act committed, the staff member's disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p data-bbox="231 929 1508 1019">115.76 (d): All terminations for violations of the agency's policies on sexual abuse and sexual harassment, or resignations, shall be reported to law enforcement and licensing agencies unless the activity was clearly not criminal.</p> <p data-bbox="231 1019 1508 1189">In interview with the facility director and in information provided on the Pre-Audit Questionnaire, in the past 12 months, one staff member was terminated or received adverse action regarding a PREA violation. There were no substantiated cases of staff-on-inmate sexual abuse. Staff training includes personnel policies involving violation of PREA standards or having any sexual activity with inmate.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 318">The following policies, directives and documentation was reviewed in determining compliance with this standard:</p> <p data-bbox="229 318 1509 358">LVCC policy 17.003</p> <p data-bbox="229 358 1509 398">GEO policy 5.1.2-E</p> <p data-bbox="229 398 1509 439">GEO policy 5.1.2-A</p> <p data-bbox="229 439 1509 710">Any contractor or volunteer who engages in sexual abuse/sexual harassment would be prohibited from contact with inmates and would be reported to the appropriate investigator and law enforcement or relevant professional licensing/certifying bodies unless the activity was clearly not criminal in nature. In cases that were not criminal in nature, the facility would take appropriate remedial measures and consider whether to prohibit further contact with inmates. During the previous year, there was no incident where a contractor or volunteer was accused of, suspected, or found guilty of sexual abuse or sexual harassment at LVCC.</p>

115.78	Disciplinary sanctions for inmates
	<p data-bbox="242 145 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 445 356">LVCC policy 17.003</p> <p data-bbox="242 383 440 412">GEO policy 5.1.2-A</p> <p data-bbox="242 439 612 468">Va.DOC Op. 861.1 Inmate Discipline</p> <p data-bbox="242 495 424 524">Statement of Fact</p> <p data-bbox="242 551 424 580">Inmate Handbook</p> <p data-bbox="242 607 620 636">Posters located throughout the facility</p> <p data-bbox="242 663 1430 797">115.278 (a): According to Va.DOC Op. 861.1 Inmate Discipline, if an inmate is found guilty of engaging in sexual abuse involving another inmate, either through administrative or criminal investigations, the inmate will be subject to formal disciplinary sanctions. The inmate handbook outlines violations an inmate will be disciplined for and the sanctions to be imposed.</p> <p data-bbox="242 824 1418 889">115.278 (b): Sanctions will be 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.</p> <p data-bbox="242 916 1469 981">115.278 (c): Based on Inmate Discipline the disciplinary process may consider whether an individual's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.</p> <p data-bbox="242 1008 1481 1140">115.278 (d): If the facility offers counseling or other interventions designed to address the reasons or motivations for the abuse, the facility shall consider requiring the offending individual to participate. The Virginia Department of Corrections will determine if the inmate will be required to participate in counseling or other interventions designed to address the reasons or motivations for the abuse.</p> <p data-bbox="242 1167 1481 1232">115.278 (e): Disciplining an inmate for sexual contact with an employee is prohibited unless it is found that the employee did not consent to the contact.</p> <p data-bbox="242 1258 1461 1352">115.278 (f): A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p data-bbox="242 1379 1465 1512">115.278 (g): The agency prohibits all sexual activity between inmates. Facilities may not deem that sexual activity between inmate is sexual abuse unless it is determined that the activity was coerced. In information provided on the Pre-Audit Questionnaire and in interview with the facility director, in the past 12 months there were no disciplinary sanctions imposed for inmates violating the sexual abuse policies.</p> <p data-bbox="242 1538 1469 1603">Compliance was determined by review of the policy, review of an incident report and interviews with the investigator, PREA compliance manager and facility director.</p>

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>LVCC policy 17.003</p> <p>GEO policy 5.1.2-A</p> <p>Email from Intake staff notifying a Mental Health referral</p> <p>Mental Health evaluation notes</p> <p>Classification Assessment</p> <p>115.81 (a): If during initial PREA screening, the inmate reports prior sexual victimization, whether in an institutional setting or in the community, staff will ensure the inmate will be referred to mental health for further evaluation within 14 days. In review of the 30-day follow-up assessments the inmate discloses prior victimization not reported during initial screening, the PREA Compliance Manager will refer the inmate to mental health for further evaluation. Medical and the Mental Health Provider, according to their professional judgement, determine the nature and scope of these services. In information reported on the Pre-Audit Questionnaire, 100% of the inmates assigned to the facility in the past 12 months who disclosed prior victimization were offered a follow-up meeting with the Mental Health Provider.</p> <p>115.81 (b): Any inmate who reports during initial PREA screening or in follow-up screenings he has previously perpetrated sexual abuse in an institutional setting or in the community will be offered a follow meeting with medical or mental health within 14 days of the screening. There was no inmate that claims he perpetrated a sexual abuse.</p> <p>115.81 (d): Information related to sexual victimization or abusiveness in an institutional setting is limited only to medical and mental health practitioners and other employees as necessary to inform treatment plans, security and management decisions or otherwise federal, state or local law.</p> <p>115.81 (e): Medical and mental health providers obtain consent from inmate before reporting information about prior sexual victimization that did not occur in an institutional setting. Inmates have a right to refuse these services.</p> <p>Based on interview with medical provider that coordinates for mental health services inmates who report prior sexual victimization and those who disclose previously perpetrating sexual abuse are being referred for evaluation and consent forms or refusals are being obtained. The mental health staff are available during the intake process and conduct suicide screening and interviews with transgender inmates. In interview with the mental health provider, typically the mental health staff will interview inmates with history of victimization during their intake process. However, the facility is required to forward a referral in order to comply with the Va.DOC database.</p> <p>Compliance with this standard was based on policies, mental health referrals, interview with the medical administrator, intake staff and PREA compliance manager.</p>

115.82	<p>Access to emergency medical and mental health services</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>GEO policy 5.1.2-A</p> <p>LVCC policy 17.003</p> <p>Medical Records</p> <p>Investigation referrals</p> <p>Coordinated Response Plan</p> <p>Statement of Fact</p> <p>115.82 (a): LVCC policy 17.003 and the coordinated response plan provide a procedure for Victims of sexual abuse to receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Medical and mental health providers, according to their professional judgement, determine the nature and scope of these services.</p> <p>115.282 (b): All staff first responders are trained to take preliminary steps to protect the victim. Security staff first responders are to take preliminary steps to protect the victim and notify facility medical and mental health staff immediately. The Mental Health Provider would request an inmate sign a Consent to Evaluate form to prior seeking their consent to conduct a mental health evaluation of an alleged victim of sexual abuse.</p> <p>115.82 (c): Inmate victims are offered prophylaxis for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate. Medical staff indicated that is part of the SANE process and she would follow up when the inmate returns to the facility.</p> <p>115.82 (d): Based on review of policy and in interviews with PREA compliance manager all services are provided without financial cost to the victim, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Compliance was determined by review of the coordinated response plan. Compliance was also determined by interviews with nurse, first responders, random staff, PREA compliance manager and facility director. The facility provides a statement of fact that there has been no sexual assault requiring a SANE during the last twelve months.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 453 237">Auditor Discussion</p> <p data-bbox="242 273 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 331 443 358">LVCC policy 17.003</p> <p data-bbox="242 389 437 416">GEO policy 5.1.2-A</p> <p data-bbox="242 448 424 474">Inmate Handbook</p> <p data-bbox="242 506 1468 564">115.283 (a): The facility offers ongoing medical and mental health care to all residents who have been victimized by sexual abuse.</p> <p data-bbox="242 595 1474 685">115.283 (b): According LVCC policy 17.003 treatment services would include the evaluation and treatment would include follow-up services, treatment plans and referrals for continued care upon transfer or release. According to the mental health and medical administrator, medical and mental health care provided is consistent with the community level of care.</p> <p data-bbox="242 716 1474 775">115.283 (d): The facility does not house females at this time. Per interview with the medical staff if a transgender male were to be assigned to the facility, the facility would provide the appropriate pregnancy services as required by the standard.</p> <p data-bbox="242 806 1487 896">115.283 (e): The facility does not house females at this time. Per interview with the medical staff if a transgender male were to be assigned to the facility, if pregnancy results from vaginal penetration, will receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.</p> <p data-bbox="242 927 1433 985">115.283 (f): Inmate victims of sexual abuse while incarcerated will be offered tests for sexually transmitted infections as medically appropriate.</p> <p data-bbox="242 1016 1445 1075">115.283 (g): All services will be provided without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p data-bbox="242 1106 1452 1164">115.283 (h): The facility attempts to conduct a mental health evaluation of all known abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate.</p> <p data-bbox="242 1196 1433 1254">On information provided by the PREA Compliance Manager, in the past 12 months, there were no inmate who required ongoing medical or mental health treatment due to being victimized by sexual abuse.</p> <p data-bbox="242 1285 1426 1312">Compliance was determined by review of the GEO and LVCC Policies, interviews with medical and mental health staff.</p>

115.86	Sexual abuse incident reviews
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 443 356">GEO policy 5.1.2-E</p> <p data-bbox="242 383 443 412">LVCC policy 17.003</p> <p data-bbox="242 439 592 468">Administrative Investigative Report</p> <p data-bbox="242 495 472 524">Report of Investigation</p> <p data-bbox="242 551 443 580">After Action Review</p> <p data-bbox="242 607 296 636">PAQ</p> <p data-bbox="242 669 1493 797">115.86 (a-b): LVCC policy 17.003 requires facility to conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation in which the allegation has been determined to be substantiated or unsubstantiated within 30 days of the conclusion of the investigation. During the last 12 months that were 10 closed investigations of allegations of sexual abuse or sexual harassment.</p> <p data-bbox="242 826 1153 855">An after-action report was completed on all substantiated or unsubstantiated investigations.</p> <p data-bbox="242 884 1484 978">115.86 (c): The Incident Review Committee consists of the facility director, chief of security, PREA compliance manager, lead Investigator, unit manager, classification supervisor and the nurse, and the PREA coordinator may attend via telephone or in person.</p> <p data-bbox="242 1008 1457 1135">115.86 (d): The team considers whether the incident was motivated by race, ethnicity, gender identity, perceived status or gang affiliation. The team examines the area where the incident was alleged to have occurred and assesses whether physical barriers in the area may have contributed to the abuse, whether monitoring technology should be deployed or augmented and whether the staffing levels at the time of the incident were adequate.</p> <p data-bbox="242 1164 1442 1193">115.86 (e): The facility will implement the recommendations for improvement or documents the reasons for not doing so.</p> <p data-bbox="242 1223 1479 1285">When interviewed, the members of the incident review team knew their responsibilities as they relate to the review of sexual abuse incidents. The facility does after action reports on sexual harassment when substantiated.</p> <p data-bbox="242 1314 1418 1377">Compliance was determined by agency and facility policies, GEO investigative data base which mandates after action reports on all allegations of sexual abuse or sexual harassment except when they are unfounded.</p>

115.87	Data collection
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 552 356">GEO Corporate Annual Report</p> <p data-bbox="242 383 488 412">Va. DOC Annual Report</p> <p data-bbox="242 439 443 468">PREA Tracking Log</p> <p data-bbox="242 495 547 524">GEO Corporate Policy 5.1.2-A</p> <p data-bbox="242 551 445 580">LVCC policy 17.003</p> <p data-bbox="242 607 1481 775">115.87 (a): LVCC policy 17.003 and GEO policy 5.1.2-A mandates that all facilities under the GEO umbrella collects uniform data for every allegation of sexual abuse at all facilities under their control. GEO requires facilities to utilize a standardized instrument that includes clearly defined definitions. The incident-based data collected shall include, at 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.</p> <p data-bbox="242 801 1474 969">115.87 (b): The PREA Compliance Manager ensures that the data is compiled and forwarded to the PREA Coordinator monthly on the Monthly PREA Incident Tracking Log. In addition to submitting the Monthly PREA Incident Tracking Log, the PREA Compliance Manager ensures that a PREA Survey is created, updated, and submitted for review and approval in the PREA Portal for every allegation of sexual abuse, sexual harassment and sexual activity. At least annually, the PREA Coordinator aggregates this data.</p> <p data-bbox="242 996 1425 1059">115.287 (c): The data collected, will be at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Bureau of Justice Statistics (BJS).</p> <p data-bbox="242 1086 1445 1149">115.287 (d): The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p data-bbox="242 1176 1485 1238">115.287 (e): This provision of this standard is not applicable to this facility. The agency does not contract for the confinement of inmates.</p> <p data-bbox="242 1265 1445 1328">115.287 (f): Upon request, GEO shall provide such data from the previous calendar year to the Department of Justice no later than June 30.</p> <p data-bbox="242 1355 1469 1458">The facility provided a copy of the monthly log and annual log for review. The log contained all elements required by policy. The review of the log and interview with PREA compliance manager and PREA coordinator confirmed compliance with this standard.</p>

115.88	Data review for corrective action
	<p data-bbox="242 145 766 174">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="242 208 454 237">Auditor Discussion</p> <p data-bbox="242 271 1364 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 327 550 356">GEO Corporate Annual Report</p> <p data-bbox="242 383 486 412">Va. DOC Annual Report</p> <p data-bbox="242 439 438 468">PREA Tracking Log</p> <p data-bbox="242 495 550 524">GEO Corporate Policy 5.1.2-A</p> <p data-bbox="242 551 438 580">LVCC policy 17.003</p> <p data-bbox="242 607 1364 636">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="242 663 662 692">GEO Corporate PREA Procedure 5.1.2-A</p> <p data-bbox="242 719 566 748">GEO Annual PREA Data Report</p> <p data-bbox="242 775 486 804">Va. DOC Annual Report</p> <p data-bbox="242 831 1460 972">115.288 (a): GEO reviews all of the data collected from all of its facilities and aggregates that data annually to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies, practices and training by identifying problem areas, taking corrective action on an ongoing basis and preparing an annual report of its findings. This information is provided in the annual report.</p> <p data-bbox="242 999 1460 1095">115.288 (b): The PREA Coordinator reviews the data collected and the annual report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse.</p> <p data-bbox="242 1122 1476 1218">115.288 (c): The PREA Coordinator forwards the annual report to the Senior Vice President of GEO Care and to the Senior Vice President Secure Services and International Operations for their signatures and approval. The report is made public on the GEO website at https://www.geogroup.com/prea.</p> <p data-bbox="242 1245 1460 1308">115.288 (d): Before making aggregated sexual abuse data public, all personal identifiers are redacted as stated on the last page of GEO's annual report.</p> <p data-bbox="242 1335 1476 1476">Exceed compliance of this standards was determined by reviewing annual reports for LVCC and GEO, review the facility policy and interviews with the PREA coordinator and PREA compliance manager. The GEO annual report provides more information than is required and at the same time provides the person reviewing the report a detailed look at PREA in action in GEO facilities</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>GEO Corporate PREA Procedure 5.1.2-A</p> <p>GEO Annual PREA Data Report</p> <p>Va. DOC Annual PREA Data Report</p> <p>115.289 (a): GEO policy 5.1.2-A ensures that data collected are securely retained for at least 10 years according to GEO policy 1.1.7-A</p> <p>115.289 (b): GEO makes all aggregated sexual abuse data from all its facilities public annually on their website at https://www.geogroup.com/prea. A review of the website confirmed that the agency has PREA reports from 2017 until 2021 uploaded in the above website.</p> <p>115.289 (c): Before making aggregated sexual abuse data public, GEO removes all personal identifiers.</p> <p>115.289 (d): Corporate Policy: 5.1.2-A Sexually Abusive Behavior Prevention and Intervention Program (PREA) for Adult Prison and Jail and Adult Community Confinement Facilities ensures that data collected are securely retained for at least 10 years.</p> <p>Compliance was determined by review of three (3) annual reports, corporate policy and interview with the Agency PREA Coordinator.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 208 451 237">Auditor Discussion</p> <p data-bbox="244 271 1366 300">The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p data-bbox="244 327 446 356">GEO policy 5.1.2-C</p> <p data-bbox="244 383 456 412">PREA Audit Postings</p> <p data-bbox="244 439 1493 602">115.401 (a): GEO policy 5.1.2-C require during the three-year period starting on August 20, 2013, and each three-year period thereafter, GEO's Contract Compliance Department ensures that a PREA auditor who has been certified through the Department of Justice audits each facility at least once. The initial PREA audit of Lawrenceville Virginia Correctional Center was conducted February 2016 by a DOJ certified PREA auditor. The second audit was conducted in November 2019 by a DOJ Certified auditor. This is the third audit of this facility and is being conducted by a certified PREA auditor.</p> <p data-bbox="244 629 1422 658">This auditor's recertification was effective January 1, 2022. This is the third certification or recertification of this auditor.</p> <p data-bbox="244 685 1477 848">115.401 (b): According to GEO's PREA Coordinator and the annual PREA report, during the three-year period beginning on August 20, 2013, GEO ensured that each of its facilities were audited at least once and continues to ensure that its facilities are audited every three years. During the last cycle many audits were scheduled, rescheduled, and postponed due to the pandemic. However, each facility was audited during the last 3-year cycle. This is the third year of this cycle. According to GEO coordinator all facilities are scheduled to be audited during this cycle.</p> <p data-bbox="244 875 1485 943">115.401 (h): During the audit, I was allowed access to all areas of Facility. I was allowed to visit areas throughout the facility during the official tour and additional visits to different areas of the facility while interviewing and observing camera locations.</p> <p data-bbox="244 969 1418 1037">115.401 (i): I requested personnel files, inmate files, training records, investigation files, logbooks, and pertinent forms utilized to carry out the requirement of the audit process. Each document was provided in a timely basis.</p> <p data-bbox="244 1064 1474 1160">115.401 (m): I interviewed random staff on duty for the for the first 24 hours of the audit and random sample of inmates during the onsite audit. No inmate declined to be interviewed and the facility did not prohibit me from interviewing detainees selected for interview.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.403 (f): Per agency policy and standard requirements, GEO ensures me that this final report will be published on their website at (https://www.geogroup.com/prea) to be available to the public. The reports from February 2016 and November 2019 audits were located on the GEO website and reviewed by the auditor.

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

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 consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
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)?	na

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 with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to 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.)	na
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.)	yes
	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.)	yes
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 Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

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

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

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

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

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, 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, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of 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 abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of 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 response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate 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 sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial 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 abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who 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 evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
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.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
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.)	na
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.)	yes
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 to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted 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.)	no
	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.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes