

PREA Facility Audit Report: Final

Name of Facility: Roanoke City Adult Detention Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 08/12/2026

Auditor Certification

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



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



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



Auditor Full Name as Signed: Lori M. Fadorick

Date of Signature: 08/12/2026

AUDITOR INFORMATION

Auditor name: Fadorick, Lori

Email: lfadorick@gmail.com

Start Date of On-Site Audit: 06/22/2026

End Date of On-Site Audit: 06/23/2026

FACILITY INFORMATION

Facility name: Roanoke City Adult Detention Center

Facility physical address: 324 Campbell Avenue Southwest, Roanoke, Virginia - 24016

Facility mailing address:

Primary Contact

Name:	Sgt.Timothy J Tompkins
Email Address:	timothy.tompkins@roanokeva.gov
Telephone Number:	540-853-1760

Warden/Jail Administrator/Sheriff/Director	
Name:	Sheriff Antonio D. Hash
Email Address:	Antonio.Hash@roanokeva.gov
Telephone Number:	540-853-1717

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

Facility Health Service Administrator On-site	
Name:	Nick Moldovan
Email Address:	nmoldovan@mediko.com
Telephone Number:	540-853-5610

Facility Characteristics	
Designed facility capacity:	834
Current population of facility:	345
Average daily population for the past 12 months:	364
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys

Age range of population:	18-85
Facility security levels/inmate custody levels:	Low/Min (Level 8) - High/Max (Level 1)
Does the facility hold youthful inmates?	Yes
Number of staff currently employed at the facility who may have contact with inmates:	239
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	44
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	80

AGENCY INFORMATION

Name of agency:	Roanoke City Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	340 Campbell Avenue SW , Roanoke , Virginia - 24016
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information

Name:	Timothy Tompkins	Email Address:	timothy.tompkins@roanokeva.gov
--------------	------------------	-----------------------	--------------------------------

Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

3

- 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
- 115.17 - Hiring and promotion decisions
- 115.81 - Medical and mental health screenings; history of sexual abuse

Number of standards met:

42

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

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

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2026-06-22
2. End date of the onsite portion of the audit:	2026-06-23

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	☒ Yes ☐ No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Sexual Assault Response and Awareness (SARA)

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	834
15. Average daily population for the past 12 months:	364
16. Number of inmate/resident/detainee housing units:	36
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☒ Yes ☐ No ☐ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	344
24. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	0
25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	4
26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	3
27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	1
28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	4
29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	9

30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	5
31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	2
32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	2
33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	10
34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	Of the 344 inmates, there were 46 females and 27 federal inmates
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	239

37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	80
38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	44
39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	None
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	13
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☐ Age ☐ Race ☐ Ethnicity (e.g., Hispanic, Non-Hispanic) ☒ Length of time in the facility ☒ Housing assignment ☒ Gender ☐ Other ☐ None

42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Inmates were selected from all housing locations through bed number
43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No
44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	The auditor selected 3 random females and 10 random males.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	13
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".	
46. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/detainees. ☐ The inmates/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/detainees).	Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/detainees), in addition to reviewing population reports.
47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2
49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1
50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	2

51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	3
53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☐ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☒ The inmates/residents/detainees in this targeted category declined to be interviewed.
54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	2
55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	5

56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	There were two inmates that refused to be interviewed. Inmates were selected from another specialized category. There were no barriers to completing the interviews.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	12

59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☐ Length of tenure in the facility ☒ Shift assignment ☒ Work assignment ☒ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☒ Yes ☐ No
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Staff were selected from various shifts and work locations. There were no barriers to completing the interviews.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	18
63. Were you able to interview the Agency Head?	☒ Yes ☐ No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	☒ Yes ☐ No

65. Were you able to interview the PREA Coordinator?	☒ Yes ☐ No
66. Were you able to interview the PREA Compliance Manager?	☐ Yes ☐ No ☒ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	☒ Other
If "Other," provide additional specialized staff roles interviewed:	Training, Disciplinary
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☒ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☐ Religious ☐ Other
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of CONTRACTORS who were interviewed:	3
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☒ Medical/dental ☒ Food service ☐ Maintenance/construction ☐ Other

70. Provide any additional comments regarding selecting or interviewing specialized staff.	The Auditor interviewed a variety of facility staff to determine compliance with the standards. Specialized staff were selected based on their position and job duties in the facility. Some staff were interviewed using more than one interview protocol, and some staff were interviewed to gain a better understanding of the facility operations and their role in PREA compliance.
SITE REVIEW AND DOCUMENTATION SAMPLING	
Site Review	
PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.	
71. Did you have access to all areas of the facility?	☒ Yes ☐ No
Was the site review an active, inquiring process that included the following:	
72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	☒ Yes ☐ No
73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	☒ Yes ☐ No

74. Informal conversations with inmates/ residents/detainees during the site review (encouraged, not required)?	☒ Yes ☐ No
75. Informal conversations with staff during the site review (encouraged, not required)?	☒ Yes ☐ No

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

The Auditor had full, unimpeded access to all areas of the facility. During the review of the physical plant, the Auditor observed the facility layout, staff supervision of offenders, security rounds, interaction between staff and offenders, shower and toilet areas, placement of PREA posters, observation of availability of PREA information located adjacent to and in the inmate housing areas, observation of communication in general population housing areas, as well as special housing cells, search procedures, and availability and access of medical and mental health services. The Auditor observed and made note of the video monitoring system and camera placement throughout the facility, including reviewing the monitors in the control room. Facility staff allowed the Auditor full access to all areas. The tour included the administrative area, visitation, classrooms, recreation yards, library, medical, kitchen, intake, and offender housing units. During the tour, the Auditor was observing for blind spots, opposite gender announcements, the overall level of supervision and staff/inmate interactions. Observations were made of PREA posters and other PREA related materials prominently displayed throughout the facility. The Auditor observed staff performing security rounds, commissary operations, food service operations, offenders working in various areas and staff making opposite gender announcements. Medical personnel were observed conducting treatments with offenders. The Auditor observed offenders inside and outside of housing units. All offender restrooms and shower areas were observed to ensure offenders could utilize the restroom, change clothing and shower without staff of the opposite gender observing the offenders fully naked.

Documentation Sampling

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

77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	☒ Yes ☐ No
78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	The Auditor conducted a document review of employee and inmate files, and a spot check of documents that were previously provided to the auditor along with the PAQ. The Auditor reviewed a random sampling of personnel files to determine compliance related to standards on hiring and promotion and background check procedures for officers and contract staff. The Auditor reviewed the annual PREA training rosters maintained by the training staff and cross referenced the staff files with the training rosters to ensure training was verified. The training coordinator explained the process for relaying the mandated PREA information to new hires, as well as the procedure for annual refresher training. Random offender case files were reviewed to evaluate intake procedures, including screening and subsequent housing decisions, and verify offender PREA education. In addition, the intake and receiving procedures were observed and intake screenings are conducted in private. The Auditor requested additional supporting documentation to include: training records for randomly chosen staff, randomly chosen inmate medical records, randomly chosen inmate classification records, volunteer records, contractor records, and staff personnel files including PREA disclosure forms for hiring and promotions if applicable.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	2	0	2	0
Staff-on-inmate sexual abuse	6	1	6	0
Total	8	1	8	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	6	0	6	0
Staff-on-inmate sexual harassment	3	0	3	0
Total	9	0	9	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	1	1	0
Staff-on-inmate sexual abuse	0	4	2	1
Total	0	5	3	1

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	1	3	2
Staff-on-inmate sexual harassment	0	3	1	0
Total	0	4	4	2

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

6

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	2
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	4
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	6
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	3
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

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

3

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

☐ Yes

☒ No

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

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

☒ Yes

☐ No

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

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

None

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

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

☐ Yes

☒ No

Non-certified Support Staff

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

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

108. Who paid you to conduct this audit?

☐ The audited facility or its parent agency

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

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

☐ Other

Identify the name of the third-party auditing entity

CCS

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. RCSO Organizational Chart 4. Interviews with Staff including the following: a. PREA Coordinator b. Sheriff 5. Interviews with Inmates 6. Observations during on-site review Findings: The Auditor reviewed the RCSO Policy. The Department has a comprehensive PREA policy which clearly mandates a zero-tolerance policy on all forms of sexual abuse and harassment. The language in the policy provides definitions of prohibited behaviors in accordance with the standard and includes notice of sanctions for those

who have been found to have participated in prohibited behaviors. The definitions contained in the policy are consistent and in compliance with PREA definitions. The policy details the agency overall approach to preventing, detecting and responding to sexual abuse and harassment.

Policy 3.33 states, "It is the policy of the Roanoke City Sheriff's Office to provide humane conditions of confinement for residents in the Roanoke City Adult Detention Center to include a program of sexual abuse prevention and intervention. The procedures set forth herein establish that the Sheriff's Office mandates a zero-tolerance policy towards any type of sexual misconduct, sexual contact, sexual abuse and sexual harassment toward any resident(s). This Office will investigate any allegations and suspicions of sexual abuse and sexual harassment, up to and including prosecution under the Code of Virginia."

There are informational posters prominent in all areas and interactions and interviews with both offenders and staff indicate they are aware of this information. The zero-tolerance mandate is reflected in both the staff and offender interviews.

The RCSO has designated an upper-level staff member as the PREA Coordinator. His position is PREA Manager, which is a dedicated position for the Sheriff's Department. The position reports to the Professional Standards Lieutenant. A review of the organizational chart reflects this position in organizational structure. The PREA Manager reports that he has sufficient time and by virtue of his position, the authority to develop, implement and oversee the facility's efforts to comply with PREA standards. There appears to be an open line of communication between all levels of staff at the facility. The PREA Manager is involved in the implementation efforts, as well as handling and reviewing individual offender issues at the facility level. The auditor found the PREA Manager to be very detail oriented and efficient. He ensures that all facets of the RCSO PREA Program are completed per policy and the PREA standards.

Interviews with facility staff indicated that they were trained in and understood the zero-tolerance policy established by the RCSO. They understand their role with regard to prevention, detection and response procedures.

In addition to the designated PREA Coordinator, RCSO has assigned the Professional Standards department to assist, if needed, in ensuring PREA compliance efforts at the facility.

In a targeted interview with the Sheriff, he stated that every allegation is investigated and he is kept in the loop on the progress of each allegation. All allegations are investigated thoroughly, and each one is looked at on a case-by-case basis on its own merits. The Sheriff feels as if the PREA Manager is very diligent in his duties and ensures the agency is meeting and exceeding best practices as far as the PREA standards.

The Roanoke City Sheriff's Department has position solely dedicated to PREA compliance efforts at the facility.

	After a review, the Auditor determined the facility exceeds the requirements of the standard. Corrective Action: None
--	---

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. Memo 3. Interviews with Staff including the following: a. PREA Coordinator b. Sheriff Findings: Per memo from the Sheriff, the RCSO does not currently have any agreement to contract for the confinement of inmates at Roanoke City Jail. The jail has not engaged in any such agreement during the audit period. This standard is not applicable at this time for the Roanoke City Jail. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 2.16, 3.01, 3.02, 3.26 3. Staffing Formula for RCSO 4. PREA Annual Evaluation Meeting 5. Average Daily Population Report 6. Quarterly staffing memo

- 7. Unannounced rounds
- 8. Observations during on-site review

Interviews with the following:

- PREA Coordinator
- Sheriff
- Random Staff
- Supervisors Responsible for Conducting Unannounced Rounds

Observation of the following:

- Observation of unannounced rounds by supervisors as well as auditors during the site review
- Observation of supervisors documenting rounds in the daily logbooks on the duty post during the site review

Findings:

The RCSO has a comprehensive staffing plan that addresses all required elements of the standard. Related policies are written in accordance with the standard. The staffing plan addresses staffing in each area, staffing ratios, programming, facility layout, composition of the inmate population, video monitoring and other relevant factors. The most recent review of the staffing analysis was completed on December 29, 2025. The facility staffing requirements are based upon a multi-faceted formula to determine the number of staff needed for essential positions.

Policy 2.16 states, "Detention Center Security Division: The Security Division consists of several sections, including assigned Shifts/Watches and Daylight Security, which includes the Classification section.

1. Shifts/Watches

20 Personnel on duty 6:30 a.m.-6:30 p.m. shift

20 Personnel on duty during 6:30 p.m.-6:30 a.m. shift

The minimum of 20 personnel includes at least two supervisors. If the Watch Commander or Assistant Watch Commander is absent, a Corporal or Master Deputy shall serve in a supervisory role.

2. Classification

2 Personnel on duty during operational hours.

The staffing requirements listed above shall be adhered to unless circumstances dictate otherwise. In addition, if staffing levels fall below the minimum requirements, the Security Division Commander shall be notified immediately.

Support Services Division: The Support Services Division consists of several different sections which include Administrative staff, Educational/Library, Programs, Recreation, Maintenance, Property/Laundry, Kitchen, Outside Work Crews, Commissary, Records, LIDS and Medical.

1. Records Section

3 Personnel on duty during operational hours

2. Daylight Support

8 Personnel on duty during operational hours.

3. Property/Laundry

3 Personnel on duty during operational hours.

The staffing requirements listed above shall be adhered to unless circumstances dictate otherwise. In addition, if staffing levels fall below the minimum requirements, the Support Services Division Commander shall be notified immediately.

Law Enforcement Division: The Law Enforcement Division consists of several sections, including

Civil Process Section, School Resource Section, Training Section, and Community Engagement.

1. Civil Process Section

6 Deputies on duty at all times

2 Deputies may be on annual leave of absence, in training, or absent from work for other reasons, at any one time.

2. School Resource Section

6 Deputies on duty at all times

3 Deputies may be on annual leave of absence, in training, or absent from work for other reasons, at any one time.

The staffing requirements listed above shall be adhered to unless circumstances dictate otherwise. In addition, if staffing levels fall below the minimum requirements, the Law Enforcement Division Commander shall be notified immediately."

The staffing plan does require any deviations be documented and justified. Notations and daily deviations from the regular staffing plan are notated by the supervisor and reported to the relevant Division Commander. As notated by staffing memos, there have been instances where staffing fell below the required amount, therefore deviations to the staffing plan were noted. Per policy 2.16, "In circumstances where the staffing plan is not complied with, it shall be documented and justify all deviations from the plan." Per the PAQ, and memo from the Chief Deputy, in CY25, there were 9 instances where staffing fell below the required amount. A memo was written for each instance. The auditor was provided and reviewed these memos.

At the time of the Annual Staffing Review, RCSO had 17 positions vacant. Per the staffing plan, these positions have primarily not been filled due to high turnover rate, retirements, and lack of qualified applicants. The facility utilizes voluntary overtime to fill vacancies by academy training, FMLA and other scheduled leave, military, sick days and hospital transports and admissions. If there were circumstances where the staffing plan is not complied with, the facility would document and justify all deviations in accordance with the standard. Per the PAQ, the most common reasons for deviating from the staffing plan in the last 12 months are: Call outs, Administrative Leave, Military Leave, Funeral Leave, and Resignations.

The average daily population since the last PREA Audit is 346. The staffing plan is predicated on a population of 800. The auditor reviewed the facility's current staffing plan as well as the most recent staffing plan review. In that review, they have documented that they have considered all the elements from standard 115.13 (a) (1-15) as part of the review. During targeted interviews with facility administration, the auditor verified that the Sheriff reviews the annual staffing plan. Administrative staff indicated that the Security Division Commander monitors staffing and any post

closures. If there were an instance where the facility did not comply with their staffing plan, that instance would be notated on the supervisor log and reported through the Division Commanders, including the reason for the shortage and the actions taken.

According to staff and the PAQ, there were instances where they were out of compliance with the staffing plan during the audit period. The Sheriff stated that they do consider the use of CCTV in considering the staffing plan. They regularly do camera reviews and assess areas that need additional coverage. Camera surveillance is maintained throughout the facility in the inmate living areas, corridors, hallways and work and program areas. Upgrades within the audit cycle include

- o Video Security System and Technology Management
- o Radio inventory, repair, and support are now handled by the IT Division.
- o Multi-Factor Authentication (YubiKey) on all CJIS Workstations.
- o All Sheriff's Office PCs were replaced and upgraded to Windows 11.
- o ITC Encoder Removal: Fully transitioned to IP-based video security.
- o Custom reporting tools developed to meet HB 1250 requirements.
- o OPENFOX system was updated with a new licensing process.
- o The Jail Management System (JMS) was upgraded to version 24.
- o Early Intervention System was developed in house.
- o HIM AI: Developed an in-house ticketing system.
- o Magistrate Office and Main Lobby Redesign completed.
- o Network Security Enhancements including new access points and protocols.

Staffing is unofficially reviewed every few weeks by the Watch Commanders and is officially reviewed and documented annually. They use voluntary overtime to fill shortages and sometimes must initiate mandatory overtime while the academy is in session. But all posts are covered to maintain required minimum staffing.

Per the staffing plan and a review of rosters, the facility operates on 12-hour shifts, with a day shift starting at 0630 and night shift starting 1830, providing overlapping, 24-hour coverage of the facility. Each shift at the Roanoke City Adult Detention Center has one Watch Commander who holds the rank of Lieutenant, and two Sergeants, who supervise Deputies as well as two Master Deputies that provide field training and serve as assistant Watch Commanders as part of coverage requirements and career progression planning. The Lieutenant and Sergeants on day and night shifts routinely make unscheduled and unannounced rounds throughout the facility to ensure the safety and security of the facility. Portable radio's enable timely staff communications, facilitate services, and enhance security for staff and residents.

Per the staffing plan, camera surveillance is maintained in corridors, hallways and resident living areas by the main control room, all cameras are recorded. All information recorded is stored for a minimum of sixty days. The control room has communication with each of the floor control rooms and each security deputy is issued a mobile radio that has a "man down system." The "man down system" is an emergency system utilized by the floor deputies that is activated automatically, and in some cases manually, which alerts the control room of an immediate emergency requiring assistance for additional personnel. Lighting is sufficient throughout the facility, facilitating effective staff observation and video camera surveillance.

The auditor reviewed the most recent annual review, and the facility's review was in compliance with the elements of 115.13(a). In addition, during the on-site review, the auditor reviewed the deployment of CCTV monitoring. The facility has a camera surveillance system comprised of multiple monitors located in the control room.

These screens are monitored by staff at all times. The most recent review of the staffing plan indicated the video monitoring system and placement of cameras were reviewed. There are cameras covering all areas of the facility. The cameras are accessible from multiple locations in the facility.

In accordance with the provisions of the staffing plan, RSCO, in collaboration with the PREA Coordinator, reviewed the staffing plan to see whether adjustments are needed to: (a) the staffing plan, (b) the deployment of monitoring technology, or (c) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan. This was documented by memo from the Chief Deputy on December 29, 2022.

The staffing plan appears satisfactory in the agency's efforts to provide protection against sexual abuse and harassment. The Auditor observed cameras in all areas of the facility. There appeared to be open communication between staff and inmates. The Auditor observed formal and informal interactions between staff and inmates.

In the PAQ, the agency reports that they conduct unannounced rounds on all shifts. A review of the RSCO policies indicated that policy requires that supervisors will conduct and document unannounced rounds each shift, and that there is a prohibition against staff alerting other staff of the rounds. During the pre-audit phase, the facility provided the auditor a sample of documentation of unannounced rounds for each shift. The auditor reviewed duty post logs, as well as supervisor rounds. This documentation sampling verified that unannounced rounds were conducted during all shifts. During the on-site portion of the audit, the auditor reviewed logbooks that verified that unannounced rounds were recorded daily and documented by the supervisors. It is clear through observation that supervisors and administrators are conducting unannounced rounds. Interviews with supervisors, as well as line staff indicate that the rounds are unannounced and random.

A targeted interview with the Sheriff revealed that as with other facilities, they are short-staffed. The Sheriff feels as if the camera coverage they currently have is sufficient and they are used in the overall management plan for the facility. He stated they continually do camera reviews and would assess any additional needs on a regular basis. Goals listed for 2026 include:

- Identify funding strategies to add additional cameras in each housing unit on the second, third and fourth floors of the Detention Center. (Ongoing)
- Identify funding strategies to add additional cameras in housing cells not currently covered by video surveillance. (Ongoing)
- Identify funding strategies to enhance communications by refurbishing and replacing communication equipment.
- Continue PREA training and education to new staff, volunteers and contractors coming onboard.
- Continue annual PREA refresher training for current staff.

	• Send additional staff members to PREA and/or specialized investigation training to include Master Deputies for career advancement. • Recruit and fill staff vacancies. The Sheriff stated that they ensure that all posts are covered and staff work voluntary overtime if needed to supplement the shift strength. After a review, the Auditor determined that the facility meets the requirements of the standard. Corrective Action: None
--	--

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 2.32, 3.05 3. Review of population report on the day of the audit as well as population reports from the previous 12 months 4. Interviews with Staff 5. Memo Interviews with the following: • PREA Coordinator Observation of the following: • Site Review Findings: The RCSO policy is consistent with the standard and states that an adjudicated offender shall not be placed in a housing unit in which they will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. A youthful inmate has the option to be housed in medical for males and 2AW-01 and 2AW-02 for females or other areas deemed appropriate by administration that offers the separation from adult offenders. Policy requires that in areas outside of housing units, deputies shall either: a. Maintain sight and sound separation between adjudicated offenders and adult inmates, or b. Provide direct staff supervision when adjudicated offenders and adult inmates have sight, sound, or physical contact.

	c. Staff shall make best efforts to avoid placing adjudicated offenders in isolation to comply with PREA Standard 115.13. Absent exigent circumstances, deputies shall not deny adjudicated offenders daily large-muscle exercise and any legally required special education services to comply with this provision. Adjudicated offenders shall also have access to other programs and work opportunities to the extent possible. The PAQ, documentation submitted and interviews with staff confirm that there have been no youthful offenders housed at the RCSO within the audit period. Per the annual facility evaluation, any youthful offender would be held in the medical observation unit on the 4th floor. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33, 2.15, 3.05 3. Jail Academy Schedule 4. Lesson Plan for Searches 5. Memos 6. Training Rosters 7. Duty Post Logs Interviews with the following: • Training staff • Random Staff • Medical Staff • Random Inmates Observation of the following: • Observation of inmate housing area • Observation of CCTV coverage of housing areas and individual protective cells • Observation of staff announcing the presence of opposite gender staff during site review Findings:

The RCSO policies prohibit cross-gender strip searches and cross-gender visual body cavity searches absent exigent circumstances. The RCSO does not conduct cross-gender body cavity searches except when performed by medical practitioners. Policy states that Roanoke City Sheriff's Office staff shall not conduct cross-gender frisk, or pat-down, searches on female residents, absent exigent circumstances. If cross-gender, frisk, pat down, or visual body cavity searches, are conducted, they must be documented. RCSO policy also states that all residents shall be afforded privacy when these searches are performed and such searches shall be performed in concealed areas where the search cannot be observed by persons not physically conducting the search. This does not exclude the presence of as many sworn deputies as deemed necessary to perform the search in a safe manner. All strip searches shall be performed by persons of the same sex as the person being searched. Cross-gender strip searches shall not be conducted absent exigent circumstances. If due to exigent circumstances and cross-gender strip searches must be conducted, these must be documented.

Interviews with facility staff, including medical personnel indicate operational practice is consistent with this policy. The facility reports in the PAQ and verified through staff interviews that no cross-gender strip searches or visual body cavity exams have occurred. The auditor observed the areas where strip searches occur. There are separate areas for searches of male and female inmates. The auditor found both the female and male strip search areas to be adequate in providing privacy from viewing by opposite gender staff or incidental viewing by anyone not performing the strip search.

The RCSO holds both male and female offenders.

RCSO policy states that inmates are able to shower, change clothes and perform bodily functions without nonmedical staff of the opposite gender viewing their breasts, buttocks or genitalia, except in exigent circumstances or incidental to routine cell checks. The toilet and shower areas are adequately private. A review of CCTV coverage in common areas, bathroom areas and individual protective cells revealed that the cameras were pointed away from toilet areas or covered.

The RCSO policy states that staff of the opposite gender shall announce their presence when entering an inmate housing unit in accordance with the standard. There are announcements made regularly and this is logged in the logbook. Random inmate interviews of both males and females indicated that there is not an issue with them being able to change clothes, shower or perform bodily functions without opposite gender officers seeing them. Offenders stated that announcements are being made when opposite gender staff enter the housing units. Staff interviews also indicate the offenders' privacy from being viewed by opposite gender staff is protected. Curtains and partitions afford offenders appropriate privacy while still affording staff the ability to appropriately monitor safety and security. Cameras are placed appropriately so that shower and toilet areas are not in direct view. The auditor observed all areas in the offender housing units where inmates may be in a state of undress and concluded that these areas are sufficiently private to prevent viewing by opposite gender staff.

	The auditor interviewed 6 female and 20 male inmates. All 6 females and 18 of the males stated that opposite gender staff routinely and regularly make announcements when going into an opposite gender housing unit. The facility also logs the cross-gender announcements and this is indicated on a designated spot on the duty post logs. The auditor was provided multiple examples during the pre-audit phase, as well as reviewed examples during the onsite review. During the pre-audit portion of the audit, the auditor reviewed the training presentation that is provided to all employees regarding how to conduct cross-gender pat down searches. According to the PAQ, 100% of all employees hired in the last 12 months received the required training. The facility also provided training rosters for facility staff. During the on-site document review of employee files, the auditor verified the documents in the employee files provided during the pre-audit phase. RCSO policies require all staff to be trained on how to conduct searches. Staff indicated that they are trained to do cross-gender searches at the academy and have regular refresher training. The facility provided the auditor with a print out of all completed in-service for the previous year (2025) and thus far for the current year. During the random staff interviews, all employees interviewed recalled being provided training on how to perform cross-gender pat down searches. Interviews indicate that the officers understand how to conduct cross-gender searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.28, 5.01 3. Forms and pamphlets 4. Deaf Handout 5. Review of PREA training curriculum with section on effective communications 6. Employee training rosters for the past 12 months 7. PREA Training Video in English and Spanish and with subtitles 8. Agreement with commercial interpreter service (Volatia) 9. UbiDuo 3 Guide

Interviews with the following:

- PREA Coordinator
- Random Staff
- Classification Staff
- Intake Staff
- Inmates who have limited English proficiency and other disabilities

Observation of the following:

- Observation of Interpretive Service access posters in classification as well as booking area

Findings:

The RCSO, in accordance with policy takes appropriate steps to ensure that offenders with disabilities, including those who are deaf, blind or have intellectual limitations have an equal opportunity to participate and benefit from all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and harassment. RCSO policy is written in accordance with the standard and indicates that adequate and proper communication is a vital element present during the initial booking process and health appraisal to ensure proper documentation of the inmate's health problems or needs and to continue treatment for pre-existing medical conditions which have occurred prior to or during the inmate's incarceration in jail. Communication is also an important element to ensure proper classification of the inmate and that the inmate is properly advised of the programs and services offered by the jail. Appropriate steps shall be taken with these inmates/detainees to have an equal opportunity in or benefit from Sheriff's Office efforts to prevent, detect, and respond to sexual abuse and sexual harassment. In addition, written material shall be provided in formats or through methods that ensure effective communication with inmates/detainees with disabilities, including intellectual disabilities, limited reading skills, or who are blind or have low vision, or are considered hearing impaired.

Interviews with the PREA Coordinator and Intake staff indicate that RCSO ensures that any offenders with significant disabilities that required any special accommodations would be identified at intake and addressed accordingly. Staff would ensure the offender was able to fully participate and benefit from all aspects of the facility's efforts to prevent and/or respond to sexual abuse and harassment. Staff are typically aware if they are receiving an inmate with special needs and will make accommodations as necessary, including notification to other staff.

Interviews with staff, including supervisory staff and intake officers confirm that they have a process in place to ensure that all inmates, regardless of disability would have equal access to PREA information. Auditors observed PREA informational posters throughout the facility, in visible locations in both English and Spanish. Spanish is the prevalent non-English language in the area. During interviews with staff responsible for intake and classification, they ensured that inmates with disabilities were provided access to the PREA program. Staff indicated that these situations would be handled on a case-by-case basis.

Staff are generally aware of the availability of interpretive services for LEP inmates. The facility has the PREA brochure in both English and Spanish.

Offenders who are limited English proficient have access all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and harassment, including providing interpreters. The Auditor determined through staff interviews that the RCSO has interpreters available for limited English proficient offenders through the use of a telephone-based interpreter service, Volatia. The facility provided numerous examples where interpreting services were used for LEP inmates in a variety of capacities, indicating that staff are aware of how to access this service and ensure that LEP inmates are able to fully participate in the PREA Program at the Roanoke City Jail. The auditor reviewed the current contract renewal with Volatia.

During the on-site portion of the audit, the Auditor was able to speak with two inmates identified as blind or low-vision, one inmate identified as cognitively disabled, and one inmate identified as limited English proficient. During the targeted interviews, the inmates were able to answer the auditor's questions and were aware of PREA. The use of the interpretive service was used for the LEP inmate as he could speak English, but not well. The auditor verified with the inmate his knowledge of the availability of interpreter services should he need them.

The facility offers the PREA Education video with closed-captioning. Staff can also communicate with hearing impaired or deaf inmates through written communication. Per RCSO policy, the department has one TDD unit available to enable the hearing-impaired inmate to complete telephone calls during the booking process and at other times during their incarceration. Additionally, the RCSO will provide a qualified interpreter for hearing impaired inmates as soon as feasibly possible after incarceration in jail to interpret during the receiving screening, health evaluations, and classification process.

The facility also has an UbiDuo device, which is a speech generated device which generates speech from typed text, which gives someone with a severe speech impairment the ability to communicate.

The auditor interviewed inmates identified in the following categories: Limited English Proficient (Spanish), Hard of Hearing, Vision Impaired, Cognitively Impaired, and Physically Disabled. All inmates were interviewed without any special accommodations. And all inmates stated that they had been given information on PREA and were aware of how to report instances of sexual abuse or sexual harassment.

RCSO has not had an incident where staff had to utilize any special accommodations for communication to address a PREA issue.

The RCSO prohibits the use of inmate interpreters except in instances where a significant delay could compromise the offender's safety. Interviews with staff indicate that offenders are not and would not be used as interpreters. During the random staff interviews, no staff member said it was appropriate to use an inmate interpreter when responding to allegations of inmate sexual abuse. According to the

	targeted interview with the PCM and a memo in the file, as well as the PAQ, there were no instances of the use of an inmate interpreter even in exigent circumstances. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO 1.07, 1.08 3. Hiring Background Packet 4. Background Check on All Employees 5. Review of recently promoted employee files from the past 12 months 6. Reviews of randomly selected employee files 7. Review of randomly selected volunteer files 8. Background Information on Contract Employees hired within the last 12 months 9. Interviews with PREA Coordinator, Investigator and Human Resources Findings: The RCSO does not hire any staff that has engaged in sexual abuse or harassment as stipulated in the standard. The language in the policy is written consistently with that in the standard. Roanoke City Sheriff's Office policy states the following: The Sheriff's Office shall consider any incidents of sexual harassment in determining whether to hire anyone, or to enlist the services of any contractor, who may have contact with inmates. The Sheriff's Office shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who has any previous history related to sexual abuse, harassment or misconduct in a confinement setting. Therefore, the following procedures shall be followed: a. If applicant has previous contact with inmates, they shall not be considered if the applicant has; 1. Engaged in sexual abuse or sexual harassment in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. 2. 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; 3. Been civilly or administratively adjudicated to have engaged in the activity

described in (a)(2) of this section.

b. If applicant has previous contact with inmates, they shall be asked directly about previous misconduct in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of the reviews of current employees. Employees shall have a continuing affirmative duty to disclose any such misconduct. Material omissions regarding such misconduct shall be grounds for termination.

The facility uses a checklist that is very comprehensive and includes the following:

Criminal History

Wanted Check

Fingerprints

MH Record

Sex Offender Registry Check

Court Check

LE Agency Check

Interpol Check

Campus Police Records Check

Prior Law Enforcement Check

Prior History of Sexual Harassment/Sexual Abuse

Consistent with Federal, State, and local law, the Sheriff's Office shall 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. Also, unless prohibited by law, the agency shall 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.

The Auditor reviewed the background packet and interview questions used by the RCSO and found that they are asking these questions during the interview process to determine if they are hiring anyone who has engaged in prohibited conduct. Staff indicated that the background investigator thoroughly vets any prospective employee and asks directly about previous misconduct as required by the standard. The document review on-site and interviews with the PREA Coordinator, Background Investigator, Sheriff and Human Resources Manager confirmed that they have complied with this policy and no employee with such a history has been hired during the audit period.

The policy indicates that the RCSO will consider any instances of sexual harassment in determining whether to hire or promote anyone, or enlist the services of contractors who may have contact with inmates. Targeted interviews with the Background Investigator and Human Resources indicated that instances of sexual harassment would be a factor when making decisions about hiring and promotion. Every employee and contractor undergoes a background check and is not offered employment if there is disqualifying information discovered.

There is a written policy that requires inquiry into a promotional candidate's history of

sexual abuse or harassment. Documentation reviewed supports compliance with the standard in accordance with agency policy. During the on-site portion of the audit, the Auditor reviewed files of employees that were hired in the last 12 months. All the employees' files contained background checks and pre-employment questionnaires where employees were asked the questions regarding past conduct and their answers were verified by a background investigation. The auditor also reviewed files of employees who were promoted in the last 12 months. The acknowledgement was completed for employees who had participated in the promotional process. Human Resources stated that employees are asked this information multiple times during the background process.

The PAQ indicates there have been 61 staff hired in the past 12 months who have had background investigations.

RCSO policy requires inquiry into the background of potential contract employees regarding previous incidents of sexual assault or harassment. Consistent with agency policy, all employees and contractors must have a criminal background records check prior to employment. Staff at the RCSO complete criminal background checks for all prospective applicants and contractors, prior to being offered employment. Staff verified this information in interviews discussing the background process. The Human Resource Manager and Background Investigator stated that the process is essentially the same for contract employees with respect to background checks and ensuring compliance with the standard. In addition, the RCSO uses a checklist for the background process, which verifies all steps have been completed, including the criminal history check.

Per the PAQ, in the past 12 months, the number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates: 3

The facility indicated criminal background record checks were conducted on 107 contract staff who might have contact with inmates – Medical 96 and Food Service 11. The auditor reviewed documentation of background checks for contract staff.

The Background Investigator stated that if a prospective applicant previously worked at another correctional facility, they make every effort to contact the facility for information on the employee's work history and any potential issues, including allegations of sexual assault or harassment, including resignation during a pending investigation. The auditor reviewed employee files for applicants who had previously worked in correctional facilities and found documentation that these checks are being done.

In accordance with the standard, RCSO policy requires background checks be conducted on facility staff and contract staff a minimum of every five years. RCSO does annual background checks through NCIC, exceeding the requirement of the standard. Documentation of background checks was provided by the facility and reviewed by the auditor. This was last completed for all facility staff (deputies, civilians and contract staff) in December 2025. Targeted interviews with facility administrators revealed that an employee engaging in any type of misconduct such

	as listed in the standard would not be retained. The RCSO asks applicants and contractors directly about misconduct as described in the standard on the personal history statement during the application process. These forms are maintained in their respective personnel files. The Auditor reviewed random files and verified these forms are being completed. Interviews with staff indicated that the forms are being completed as required by the standard and agency policy. RCSO policy stipulates a continuing affirmative duty to disclose any PREA related misconduct. All current and new staff are trained on the PREA policy, as well as annual refresher training. Training records verifying that employees acknowledge that they have read and understand the policy were reviewed by the auditor. In accordance with the standard, policy stipulates that material omissions regarding such conduct, or the provision of materially false information shall be grounds for termination. Interviews with staff verified that the RCSO would terminate employees for engaging in inappropriate behavior with inmates, upon learning of such misconduct. RCSO policy indicates that the facility shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer and a signed release of information. Staff indicated they would share information upon request from another facility regarding a former employee. The RCSO uses a disclosure/acknowledgement that asks the required questions of applicants to determine prior prohibited conduct. The hiring process includes requiring the investigator to make his/her 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. After a review, the Auditor determined the facility exceeds the requirements of the standard. Corrective Action: None
--	---

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO 3.02 3. Schematic of facility 4. Interviews with staff

5. Observation of camera placement and footage
6. Camera Listing
7. Staffing Evaluation 2025
8. Interviews with Sheriff, PREA Coordinator

Findings:

The facility has not acquired a new facility or made a substantial expansion to existing facilities since the last PREA audit.

Per policy 3.02, "When reviewing the facility for construction or remodeling for adequate space, the ability to protect inmates from sexual abuse will also be considered for modification purposes. If necessary, when installing or updating the monitoring technology, it shall be considered how such technology may enhance the ability to protect inmates from sexual abuse."

While the staff feel that the camera coverage is very good, they constantly do camera reviews and would update as needed. Staff indicated they are very aware of where blind spots are located and pay extra attention to these areas. Staff review the cameras regularly to ensure proper operation and will ensure any maintenance required. The RCSO has replaced a number of cameras, as well as added cameras. The new cameras are all for improved video monitoring and assist with population management, including protecting inmates from sexual abuse.

Camera surveillance is maintained throughout the facility in the inmate living areas, corridors, hallways and work and program areas. Upgrades within the audit cycle include

- o Video Security System and Technology Management
- o Radio inventory, repair, and support are now handled by the IT Division.
- o Multi-Factor Authentication (YubiKey) on all CJIS Workstations.
- o All Sheriff's Office PCs were replaced and upgraded to Windows 11.
- o ITC Encoder Removal: Fully transitioned to IP-based video security.
- o Custom reporting tools developed to meet HB 1250 requirements.
- o OPENFOX system was updated with a new licensing process.
- o The Jail Management System (JMS) was upgraded to version 24.
- o Early Intervention System was developed in house.
- o HIM AI: Developed an in-house ticketing system.
- o Magistrate Office and Main Lobby Redesign completed.
- o Network Security Enhancements including new access points and protocols.

Per interviews with the Sheriff and PREA Coordinator, when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, RCSO considers how such technology may enhance RCSO's ability to protect inmates from sexual abuse. The auditor reviewed camera placement during the on-site review, as well as camera monitors and views of areas in the facility, and a listing of all cameras.

After a review, the Auditor determined the facility meets the requirements of the standard.

	Corrective Action: None
--	-------------------------

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33, 6.08 3. Roanoke City Police Evidence Protocol OD 83.1.1, 55.1.2, 42.1.4, 84.1.1 4. Sexual Assault Investigation Checklist 5. Memo re designated hospital 6. MOU with SARA 7. LOU with RPD 8. Facility staff qualifications 9. Review of incident logs Interviews with the following: • PREA Coordinator • Investigator • Sheriff • Medical personnel Findings: The Roanoke City Sheriff's Office policy states that all credible allegations of forcible sexual assault will be reported to the Sex Offenses Unit of the Roanoke City Police Department as soon as possible in order to preserve physical evidence. All allegations referred to the Roanoke City Police Department will be thoroughly and promptly investigated per the RPD Operational Directive for Sexual Assault Investigations. The RCSO is responsible for only administrative investigations. The facility follows a uniform protocol for investigating allegations of sexual abuse that maximizes the possibility of collecting usable evidence and trains facility staff who may be first responders in this protocol. Interviews with staff indicate that they are trained and familiar with what to do if they are the first responder to a sexual assault. The Roanoke City Police Department would be contacted to investigate incidents that occur that are criminal in nature, including those related to PREA violations. The RPD will conduct sexual abuse investigations in accordance with PREA standards and follow the nationally accepted protocols for Sexual Assault Medical Forensic Exams published by the USDOJ. According to interviews with random staff, there are multiple investigators trained to conduct sexual assault investigations. In addition, the PREA Coordinator would be notified. The facility provided a copy of the evidence guide for review. A targeted interview with the investigator indicated that in the

instance of an allegation referred to the police department, the facility would conduct a simultaneous investigation and maintain communication.

The RCSO does not normally hold youthful offenders. According to multiple staff, it has been quite a while since the Sheriff's office has had anyone under 18 being held in the jail. Population reports reviewed by the auditor support this information. The evidence protocol used by the RPD is developmentally appropriate for youth.

RCSO policy stipulates that all victims of sexual abuse shall be offered a forensic medical exam, without financial cost to the victim. These exams would be performed off-site at the Hospital. An inmate at RCSO needing these services would be transferred to the Carilion Roanoke Memorial Hospital. Policy states that upon receipt of a complaint of forcible sexual assault for which there may be physical evidence, all victims of sexual abuse shall be offered and may be transported to a hospital where a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) is available to conduct a physical examination/forensic examination, without financial cost in cooperation with the Roanoke City Police Department or as necessary to preserve physical evidence, where evidentiary and medically appropriate. If a SAFE/SANE cannot be made available, the examination can be performed by other qualified medical practitioners. All efforts to provide SAFE/SANE shall be documented.

Examinations will be conducted by qualified SANE/SAFE experts in accordance with the guidelines of the National Protocol for Sexual Assault Medical Forensic Examinations from the Department of Justice. Persons performing these exams will be Registered Nurses licensed by their respective State Board of Nursing and possess training and/or certification in the Sexual Assault Nurse Examination or a Physician with training specific to the sexual assault medical forensic examination. The availability of these services was confirmed by the Auditor with the Medical staff, as well as the hospital. They indicated that the hospital had a SANE/SAFE nurse available 24 hours per day and 7 days per week and there would be no charge to the victim for this exam.

The RCSO reported on the PAQ and memo there has been no allegation or incidents of sexual abuse requiring a forensic exam be conducted. This was confirmed onsite by staff interviews and reviewing the investigative logs.

RCSO policy indicates they will make a victim advocate from a rape crisis center available to an inmate victim of sexual assault upon request. The RCSO has an MOU with Sexual Assault Response and Awareness (SARA), the local rape crisis center, to provide services to the facility. They are available to serve as a victim advocate to victims of sexual assault at the RCSO. The MOU was renewed in March 2023, was provided to the Auditor for review, and is still in effect per the terms of the MOU. As stipulated in the MOU, SARA is available to provide an advocate to accompany and support the victim through the forensic exam process, if requested and shall provide any needed or requested emotional support or crisis intervention services. RCSO policy stipulates these services are available. The auditor verified the availability of these services with the PREA Coordinator and SARA. Staff at SARA stated that all the advocates are PREA trained. The MOU is a renewal of a previous one.

	If there were an occasion that a victim advocate from SARA was not available to provide victim advocate services, the facility would provide a qualified staff member from a community-based organization or a qualified agency staff member. The facility provided licensure and qualifications for two staff members that can provide these services if needed and requested. The RCSO coordinates with the Roanoke City Police and refer all suspected criminal PREA allegations to them, receiving guidance from them to ensure all allegations are handled appropriately. The RCSO has a Letter of Understanding (LOU) with the Roanoke City Police Department signed on January 30, 2024. Per the PAQ and PREA Coordinator, Roanoke City Police Department is the primary criminal investigator. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33, 6.08 3. Monthly PREA Report 4. Review all investigative files for allegations of sexual abuse or harassment for the past 12 months 5. Website Interviews with the following: • PREA Coordinator • Sheriff • Investigative Staff • Random Inmates Findings: The RCSO policy is written in accordance with the standard and requires that an investigation is completed for all allegations of sexual abuse and harassment. Policy also dictates that allegations are referred for a criminal investigation, if warranted. The PREA Coordinator, supervisors and Investigators work very closely together to ensure that all allegations of sexual abuse and harassment are investigated promptly and thoroughly. If an offender alleges a sexual assault or sexual harassment has taken place, the staff member to whom the allegation was reported will notify the

supervisor, who will take the initial report and refer it to one of the investigators for further action. Most all the supervisors are investigators; however, it is typically the shift Lieutenant who will complete the investigation. The Investigator coordinates with the PREA Coordinator to determine the course of action. The Roanoke City Police Department conducts all criminal investigations for the RCSO and will be notified by the facility if there are suspected potential criminal charges. The RCSO policy is posted on the website under the PREA section.

Targeted interviews with Investigators, PREA Coordinator and Sheriff verified that all allegations of sexual abuse or harassment are investigated promptly and thoroughly.

They described the process for investigations, which is a collaborative approach.

According to the interviews, once an allegation is received, it is referred for investigation based upon the type of allegation. In the case of a sexual abuse allegation, the first responders and supervisory personnel would initially take action to separate the alleged victim and perpetrator and takes steps to preserve any evidence. The on-duty supervisor would brief the PREA Coordinator and depending on the situation, initiate a call to the Roanoke City Police Department to begin a criminal investigation. Essentially, all reports of sexual abuse or harassment are evaluated by the first responders and supervisors in coordination with the PREA Coordinator and a determination is made whether to initiate a criminal investigation.

If there is no exigency and no evidence that a crime has occurred, the facility initiates an administrative investigation. The incident is investigated and if during the investigation, it is determined that there is evidence to support a crime was committed, the PREA Coordinator will consult with the Roanoke City Police Department as necessary. If there is no evidence that a crime was committed, then the investigation is completed as an administrative investigation by the facility investigator.

Interviews with staff indicate they are aware of their responsibility to investigate every allegation, refer the allegation if it involves criminal behavior and notify the PREA Coordinator of all allegations.

Per the PAQ:

In the past 12 months, the number of allegations of sexual abuse and sexual harassment that were received: 18

In the past 12 months, the number of allegations resulting in an administrative investigation: 18

In the past 12 months, the number of allegations referred for criminal investigation: 1

The PAQ indicates that 16 investigations are complete, 1 is still in the process of administrative investigation, and 1 is still in process of referral for possible criminal prosecution.

A review of the investigative files indicate that the allegations were promptly and thoroughly investigated. There has been one allegation in the past 12 months that warranted referral for criminal investigation to the Virginia State Police. The RCSO has a Letter of Understanding (LOU) with the Roanoke City Police Department signed on

	January 30, 2024. Roanoke City Police Department is the primary criminal investigator. RCSO policy requires that all sexual assault allegations that involve evidence of criminal behavior be referred for criminal prosecution. Documentation of such is contained in the investigative reports, which the Auditor reviewed. The auditor reviewed the RCSO website, and the agency policy is posted and publicly available at https://www.roanokecitysheriffsoffice.com/prison-rape-elimination-act-prea. During an interview with an investigator, he verified that investigations that revealed criminal behavior would be referred to the Roanoke City Police and subsequently to the Commonwealth Attorney for prosecution. The Sheriff and PREA Coordinator confirmed this information. The auditor reviewed documentation of allegations being referred to the Commonwealth Attorney's office for criminal prosecution. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.31 Employee training	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 2.22, 1.09, 3.33 3. Annual Training 4. New Hire PREA Training 5. PREA Lesson Plans and Curriculums 6. Review of Training Files 7. Interviews with Random Staff, PREA Coordinator, Training Coordinator Findings: The RCSO policy is written in accordance with the standard and mandates training for all Sheriff's Office staff on required topics and elements of the standard. Policy requires that all employees, contractors, and volunteers who have contact with inmates receive training. According to the policy, mental health and medical personnel receive specialized training. The training is tailored for both male and female inmates, as the facility holds both. The facility provides PREA training annually to each employee to ensure they remain

	up to date on the RCSO policies and procedures regarding sexual abuse and harassment. Each employee completes this training annually as part of the required In-Service Training that is done through Relias. Each module has a quiz that is completed by the employee to demonstrate comprehension and understanding of the material. The Auditor reviewed the training curriculums and verified they included all information and each element required by the standard. The Auditor reviewed the training rosters to verify and ensure all employees are receiving the training. During the pre-audit period the Auditor reviewed the training documentation submitted by the facility. In addition, during the on-site portion of the audit, the auditor verified the training of staff, which includes contractors, by reviewing training logs for all employees who had received training for the previous and current year. The computerized rosters for training are maintained by the Training Coordinator to verify the training hours. New staff are given PREA training during their orientation, before assuming their duties and sign a verification acknowledging they have received the information. During interviews with the PREA Coordinator and Training staff, they confirmed that no employee is permitted to have contact with inmates prior to receiving PREA training during orientation. The auditor reviewed the New Employee Orientation (NEO) schedule and found that PREA overview is done in the morning of the first day. The Auditor reviewed the following curriculums and rosters: PREA Intro and Overview, PREA Dynamics of Sexual Abuse in Corrections, Working With Gender Minorities, Safe Management LGBTQ Populations, PREA Reporting Obligations, PREA Investigations – After an Allegation, Managing Inmates at Risk of Sexual Abuse, PREA – What it Means for You and Your Agency, Cross Gender Training. Based upon the documentation provided by the training coordinator, all active employees at RCSO have completed the required training. The Auditor conducted formal and informal interviews with random and specialized staff. All staff interviewed indicated that they had received training and were able to articulate information from the training. During the staff interviews, all the random employees recalled having annual PREA training. Staff appear to understand their responsibilities regarding the standards. The staff are appropriately trained, and all documentation is maintained accordingly. PREA training is conducted on an annual basis during in-service, versus every two years as required by the standard. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33, 5.02, 2.22 3. Annual Training 4. New Contractor PREA Training 5. Review of Training Files 6. Volunteer Orientation Schedule 7. Contractor/Volunteer Agreement 8. Orientation Outline 9. Acknowledgement Forms Interviews with the following: • PREA Coordinator • Contract Staff • Training Coordinator Findings: The RCSO policy is written in accordance with the standard and mandates training for all Sheriff's Office staff on required topics and elements of the standard. The policy requires that all staff receive training regarding PREA. This training is required to be completed in person prior to contact with any inmates. The training is tailored to both male and female inmates at RCSO, as the facility holds both. The facility provides PREA training annually to each contract employee to ensure they remain up to date on the RCSO policies and procedures regarding sexual abuse and harassment. Contract staff complete the training and sign an Acknowledgment indicating their receipt of and understanding of the PREA training. In addition, contract and volunteer staff sign a Volunteer/Contractor Agreement which includes information related to PREA, and the consequences of failing to comply with the rules and regulations of the Sheriff's Office. The Auditor reviewed the training curriculum and verified it included all information required by the standard. The Auditor reviewed the training rosters, as well as random training files to verify and ensure all contracted employees are receiving the training. New contractors and volunteers are given PREA training during their orientation before assuming their duties and sign a verification acknowledging they have received the information. During the document review, the auditor was able to verify that the contractors who had been trained were required to sign an acknowledgement that they had received and understood the PREA training. The auditor reviewed the files of newly hired contract employees and verified that the signed training acknowledgement form is retained in their files. In addition, during targeted interviews with Human Resource staff, they verified that training acknowledgements were retained in the files.

	The Auditor conducted formal and informal interviews with contracted staff. During targeted interviews with contract staff members, each of the interviewees told the auditor that they recalled having the PREA training and knew of the RCSO's zero-tolerance policy against sexual abuse and harassment. In addition, they could articulate what to do if an inmate reported to them. When asked what would be the consequence if they violated the PREA policy, they stated they would be removed from the facility. The contract staff were knowledgeable regarding the PREA information they had received. Staff appear to understand their responsibilities regarding the standards. The RCSO is providing training in accordance with the standard and the documentation is maintained accordingly. The auditor interviewed one volunteer during the on-site review of RCSO. The volunteer verified that they had received PREA training and was able to articulate their knowledge of the agency's zero tolerance policy and what to do if an inmate reported an allegation to them. The auditor reviewed the training curriculum for volunteers and found that the information provided meets the requirements of the standard. The auditor reviewed acknowledgement forms signed by volunteers verifying receipt and understanding of PREA training. The facility reports on the PAQ that there are 128 volunteers and contractors (Trinity Food Service-3, Volunteers-80, Mediko-35, City Contractors-10), who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Volunteers and contractors all receive PREA training as required by the standard and RCO policy. Documentation of the training is maintained by the facility. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33, 3.05, 5.03 3. Review of inmate training materials 4. Review of inmate training documentation 5. Inmate Handbook 6. Sampling of inmate files comparing intake date, the date of initial screenings, and the date of comprehensive screening

7. Inmate Education and acknowledgement

Interviews with the following:

- PREA Coordinator
- Random Inmates
- Intake Staff

Observations of the Following:

- PREA informational Posters throughout the facility in inmate housing and common areas
- Inmate Intake Process

Findings:

The RCSO policy is written in accordance with the standard. In accordance with policy, during the booking process, all inmates will be informed of the Sheriff's Office, zero-tolerance policy regarding inmate sexual abuse, sexual harassment and non-coercive sexual contact between inmates. This information in the form of a wallet sized card, along with the inmate handbook, tablet and kiosk information and informal posters, provides offenders with information regarding sexual abuse and assault, the agency's zero tolerance policy and how to report incidents of sexual abuse or harassment.

The RCSO PAQ reported that during the last year 5967 offenders were committed to the facility and given PREA information at the time of intake, in accordance with the standard. Targeted interviews with multiple staff indicated that this information is communicated to the offenders verbally and in writing upon arrival at the facility.

Per policy 3.33, "During the classification process all residents will be provided with a resident handbook, which includes information regarding the prevention and intervention of sexual abuse and sexual harassment, suggestions for self-protection from sexual abuse and sexual harassment, procedures for reporting sexual abuse and sexual harassment, and provisions for medical treatment and counseling of victims of sexual abuse and sexual harassment."

Offenders will receive a PREA card upon intake which contains information about the zero-tolerance policy and reporting information.

According to the PAQ, 958 inmates were at the facility for 30 days or more and given the comprehensive PREA education. However, most all inmates received at the RCSO receive the comprehensive education as this is done during their Classification process through video.

Per policy 5.03, "During the classification process orientation will be provided for all new residents, during which they will receive a handbook (or receive information about how to access the resident handbook via a tablet) with information on rules of resident conduct and sanctions for offenses; sexual abuse/assault; the detention center's services, programs and work opportunities; unusual occurrences; visitation; mail procedures; commissary; use of a telephone; personal hygiene; obtaining

medical/dental care; use of resident request forms; daily routine schedule; grievance procedures; options for possible detention center release; and the detention center's search policy. Residents will also view a Prison Rape Elimination (PREA) Resident Educational Video that explains the zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Following orientation, the resident must sign and date a "Resident Orientation Form". Hearing impaired residents will be provided with the appropriate interpreters as specified in S.O.I.# 3.28 - Special Services for the Hearing Impaired."

The auditor observed PREA signage in all facility locations, and notification of the agency's zero tolerance policy. Staff told the auditor that they explained the agency's zero tolerance policy regarding sexual abuse and harassment, and they explain to the newly committed inmates that they could report any instances of abuse or harassment to staff and use the inmate telephone system to report abuse to the listed hotline.

Interviews with intake staff verified that inmates are given PREA orientation, including those transferred from another facility. Further questioning revealed that inmates who were LEP would be provided the orientation using a language telephone interpreter service or a Spanish speaking staff would be utilized, if available. For offenders that are visually impaired, a staff member would read the information to the offender. The video also has printed subtitles for the hearing impaired. Staff would assist any other disabled or impaired inmates that needed assistance, such as intellectually limited inmates. Information in multiple formats was available throughout the facility. Targeted interviews with staff indicated that the facility will make needed accommodations for identified inmates with disabilities. The Auditor observed PREA informational posters in all offender housing areas, intake, and public areas. The PREA Coordinator reviews all intakes from the previous day and will identify and address any inmate special needs with respect to participating in the PREA Program and ensuring access to all information.

Inmate interviews revealed that most inmates remembered receiving information about the agency's zero tolerance policy and how to make a report of sexual abuse. All inmates interviewed stated they are aware of PREA and how to report, including options for reporting verbally, in writing, anonymously and through a third-party.

The comprehensive education is accomplished through the use of the PREA education video. The video is shown by the property officer while they are being changed out. This is documented on the PREA assessment, which is kept in the inmate record to verify receipt of the training. In addition, this information is contained in the inmate handbook which is given to each inmate and acknowledged in writing. Offender interviews indicated that they were receiving the training.

The auditor reviewed a sampling of 26 random inmate files. Of the 26 files reviewed, documentation showed that all of them had received the comprehensive education well within the 30-day timeframe, most of them occurring the next day.

The file contained documentation of the initial inmate PREA orientation and receipt of the information at the time of admission, as well as the comprehensive education.

	This verified what the interviews revealed, what was required by policy and what was reported in the submitted PAQ. Interviews with staff and offenders verified that offenders are receiving the initial and comprehensive training as required. All current offenders have received PREA training. Offender interviews indicate that the majority remember receiving information upon arrival and viewing the orientation video. They have an awareness of PREA information and how to report. As required by the standard, policy provides for education in formats accessible to all inmates. There are Spanish versions of all materials. For offenders that are visually impaired, a staff member would read the information to the offender. As indicated in agency policy, all other special needs would be handled in coordination with the PREA Coordinator on a case-by-case basis. There have been no instances of the need to accommodate special needs inmates during this audit period. Information in multiple formats was available throughout the facility. The Auditor observed PREA informational posters in all offender housing areas, intake, and medical. The inmate handbook is available and provided to all offenders. Inmates receive PREA information immediately upon arrival. The PREA information and education is available in Spanish, with the capability of translating to other languages as needed. All other special need are addressed as needed by the PREA Coordinator. After a review, the Auditor determined that the facility meets the requirements of the standard. Corrective Action: None
--	---

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Review of Training Materials 4. Review of Training Documentation 5. Review Training Curriculum for Specialized Training 6. Review of Training Certificates for Investigators 7. Interviews with PREA Coordinator & Investigative Staff Findings: Agency policy is written in accordance with the standard. Policy 3.33 states that,

	“Investigations of sexual misconduct, sexual contact, sexual abuse, and sexual harassment shall be conducted by an investigator who has experience and training in sexual abuse investigations and appropriate and effective interview techniques. These techniques include interviewing for sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.” RCSO investigators conduct administrative investigations. The Auditor verified the training for the facility investigators. The training is accomplished through the online NIC Course, “Investigating Sexual Abuse in a Confinement Setting.” The training included all mandated aspects of the standard, including Miranda and Garrity, evidence collection in a correctional setting, as well as the required evidentiary standards for administrative findings. During a targeted interview with one of designated investigators for the facility, he was able to articulate the aspects of the training received. He appeared knowledgeable in the training he had received, as well as conducting sexual assault investigations. He indicated that, if in the course of the investigation, it appeared that the conduct was criminal in nature and there could be criminal charges involved, they would call the Roanoke City Police Department or State Police and consult with the Commonwealth Attorney regarding any potential charges. The Auditor was provided and reviewed a master list of trained investigators for the RCSO. There are 38 trained investigators listed for RCSO. The Auditor reviewed the training records for the facility investigators and verified that they had received the specialized training. While most all supervisors have been trained as Investigators for PREA allegations, typically there are 3-4, including the PREA Coordinator that complete most of the investigations. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Review of Training Materials 4. Review of Training Documentation

	5. Interviews with Training Coordinator and Medical Staff Findings: RCSO policy requires that all staff members receive PREA training in accordance with standard 115.31. Further, the policy requires that all part- and full-time mental health and medical staff members receive additional specialized training. The policy requires that the mental health and medical staff receive additional specialized training on how to detect and assess signs of sexual abuse and harassment, how to preserve physical evidence, how to respond effectively to victims of sexual abuse and harassment and to whom to report allegations or suspicions of sexual abuse or harassment. The RCSO employs contract medical and mental health providers. All the medical and mental health staff received the specialized training as evidenced by documentation provided by the training staff and reviewed by the auditor. During the on-site portion of the audit, the auditor reviewed the training logs provided by the staff and verified that all of the current employees had received the required training. During targeted interviews with the HSA and other medical and mental health staff, they stated they received PREA training upon orientation. In addition to the annual PREA training required by the RCSO, all medical and mental health staff complete additional training related to healthcare and PREA, which is done annually through Mediko, the contract medical provider. Per the PAQ, there are 35 medical and mental health care practitioners who work regularly at this facility who received the training required by RCSO policy. A targeted interview with the training coordinator verified that every employee is required to participate in PREA training in accordance with 115.31 and that training is documented. In addition, medical and mental health staff receive specialized training annually through Relias that covers all aspects of the standard. The auditor verified this training had been completed. The staff of the RCSO does not perform forensic medical examinations for victims of sexual assault. Forensic medical exams are conducted at the local hospital. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination:

1. RCSO Completed PAQ
2. RCSO Policy 3.05, 3.33, 5.03
3. Review of Risk Assessments
4. 30 Day Reassessment Logs
5. Sampling of Random Inmate Files

Interviews with the following:

- PREA Coordinator
- Random Inmates
- Classification Staff

Observations of the Following:

- Inmate Intake Process

Findings:

According to RCSO Policy, all inmates shall be assessed upon their admission to the facility and reassessed no later than 30 days after admission to the facility. The policy is written in accordance with the standard. Policy 3.33 states, "During the booking process, deputies will identify and monitor arrestees who are at risk for sexually assaultive behavior and those who have been identified as being at risk of sexual victimization. Any arrestee identified during the booking process as being at risk for sexually assaultive behavior and/or sexual victimization will be housed individually while awaiting classification into the detention center."

During the site review, the auditor was unable to follow an inmate through the admission and classification process. During the site review, the auditor spoke with multiple staff who explained the initial intake process. Upon arrival at the facility, inmates are informed of their right to be free from sexual abuse and harassment as well as the agency's zero-tolerance for sexual abuse and harassment and how to report instances of sexual abuse or harassment. Interviews with the PREA Coordinator and Classification staff verified that within 72 hours of admission, all inmates are screened for risk of sexual abuse victimization and the potential for predatory behavior. This is completed by the Booking Deputy upon arrival at the facility. During interviews with random inmates, most remember their initial screening and remember being asked some PREA related questions during their admission.

All inmates are assessed during an intake screening for risk of being sexually abused by other inmates or sexually abusive toward other inmates. Intake screenings take place within 72 hours of arrival at RCSO. The facility uses an objective screening instrument. The intake screening considers, 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; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender

nonconforming; (8) Whether the inmate has previously experienced sexual victimization; and (9) The inmate's own perception of vulnerability.

The RCSO does not routinely hold offenders solely for civil immigration purposes. However, the RCSO will make appropriate notifications to ICE, the US Marshals and/or Homeland Security as warranted. Inmates detained solely for immigration purposes will be given relevant consular information.

The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to RCSO, in assessing inmates for risk of being sexually abusive. According to the PAQ and RCSO Policy, the PREA screening instrument shall include 10 individual elements. Upon review of the screening instrument, the auditor determined that the screening instrument included all of the required elements.

According to the PAQ, 100% of the 3019 inmates entering the facility (either through intake of transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility.

An inmate's risk level is reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. The PREA Coordinator stated that a reassessment is completed any time there is an incident and/or based on a referral from a staff member. Interviews with Classification staff also indicated that an inmate's risk level is reassessed based upon a request, referral or incident of sexual assault. The auditor reviewed examples of risk assessments completed as a result of a PREA allegation.

Inmates are asked their sexual orientation in addition to the reviewing staff's perception. Within 30 days from the inmate's arrival at RCSO, the Classification staff reassesses all inmate's risk of victimization or abusiveness based upon any additional, relevant information received by RCSO since the intake screening. This is done in conjunction with the Classification completed 24-48 hours after intake.

Inmates are not disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked.

According to the PAQ, 100% of the 958 inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake.

RCSO has implemented appropriate controls on the dissemination within RCSO 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. All files are controlled by supervisory personnel and maintained in each inmate's electronic Classification file.

	The Auditor interviewed staff who complete the screenings. The staff indicated that the risk screening is completed within 72 hours. The screenings are completed in the electronic records system. There is limited access to the PREA risk assessment. This screening is used for housing and program decisions and referrals. The auditor reviewed this information and verified it is maintained electronically with limited access. The auditor was provided a copy of and reviewed the screening form. Targeted interviews with staff, as well as the PREA Coordinator verified that risk assessments are performed within 72 hours of intake. The questions are asked and the answers are recorded by the staff on the risk assessment form. There are areas on the form that allows for the inclusion of additional details related to the question, if additional data needs to be documented. The auditor reviewed 26 inmate files and looked at their intake records and risk screenings in order to compare the admission date and the date of admission screening. All of the randomly selected files had received risk screenings within 72 hours of intake. The Classification staff and PREA Coordinator confirmed that 30-day reassessments are being completed on inmates, including a face-to-face meeting with the inmates. The auditor reviewed inmate files of initial PREA risk assessments. The auditor also reviewed the 26 inmate files to determine if 30-day re-assessments had been completed. The 30-day re-assessment was completed within 30 days for all files reviewed. According to the PREA Coordinator, he collects all the Intake screenings on a daily basis and reviews them to ensure a screening was completed for all intakes. He meets with Classification daily to discuss any issues and/or special needs. Classification will complete the re-assessment when meeting with the inmate for their Classification. RCSO policy stipulates that no inmate shall be disciplined for refusing to answer or disclose information in response the risk assessment questions. According to targeted interviews with the staff, there have been no instances of inmates being disciplined for refusing to answer screening questions. The Auditor reviewed inmate files and determined that the initial risk assessments are being completed within 72 hours as required and the 30-day reassessments are being completed on a consistent basis. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective action: None
--	--

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Relied upon to make Compliance Determination:

1. RCSO Completed PAQ
2. RCSO Policy 5.03
3. Review of Screenings

Interviews with the following:

- PREA Coordinator
- Supervisors Responsible for Conducting Unannounced Rounds
- Classification Staff

Observation of the following:

- Site review of inmate housing units

Findings:

The RCSO policy requires that screening information from the PREA risk assessment is used in making housing, bed work, education, and programming assignments. The Classification staff is responsible for accurately using a Risk Assessment Tool to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

Policy 3.33 states, “a) All residents identified as being high risk for sexually assaultive behavior or being high risk for sexual victimization will be referred to the medical section for a Mental Health Assessment.

b) When making housing assignments for residents, Classification Deputies will take into consideration the results of the intake sexual abuse and sexual harassment screening process.

(c) After a classification file review has been completed, if a resident is determined to be a sexual aggressor (see definition), consideration shall be given to place the resident in administrative restrictive housing. Any use of administrative restrictive housing due to a resident being a sexual aggressor shall be pursuant to S.O.I 3.12 – Resident Restrictive Housing.

2. Classification Deputies will identify and monitor residents who are at risk for sexually assaultive behavior and those residents who have been identified as being at risk of sexual victimization by using a Risk Assessment Tool. Classification Deputies will review the housing and disciplinary history of the identified residents at a minimum of every 30 days.”

The Booking Deputy completes a risk assessment screening upon the inmate’s arrival to the facility. Classification staff use this information to make recommendations on housing, bed, work, program assignments and referrals with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

When an inmate is determined to be high risk for victimization or high risk for

	abusiveness, it is the responsibility of the staff member conducting the screening to enter the results into the PREA Risk Assessment and inform the PREA Coordinator. An inmate that is determined to be at high risk for victimization will be initially kept in a separate cell until the PREA Coordinator and Classification Staff review the screening. The inmate will not be placed in the same cell or general area as an inmate that has been determined to be high risk for abusiveness. When housing inmates, Classification staff use the risk assessment with the goal being to keep inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. It is the responsibility of the Classification staff to check each inmate being placed in a job that has been determined as an area where there should not be victims and abusers working together unless under direct supervision. All program, education and work areas are staffed at all times when in operation. All areas/rooms in the kitchen are monitored by camera. Work supervisors would be notified of any potential conflicts. PREA risk assessments are checked to ensure no potential conflicts exist. Lesbian, gay, bisexual, transgender, or intersex inmates shall not be housed in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement in a dedicated facility, unit, or wing is established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting the inmate. During the site tour, the auditor reviewed all inmate housing units. LGBTI offenders are not placed in dedicated housing areas. Interviews with staff confirm this practice would not occur. The auditor conducted informal discussions with inmates during the site review and no inmate mentioned being housed according to their sexual preference or identity. The auditor conducted targeted interviews with staff. The auditor was informed that inmates' housing was based upon objective finding and LGBTI inmates were not placed in dedicated units. Targeted interviews with LGBTI inmates verified that the RCSO does not place inmates in dedicated housing units. A review of the roster indicated that identified LGBTI inmates are located in different units, buildings, wings, and bed areas throughout the facility. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination:

1. RCSO Completed PAQ
2. RCSO Policy 5.03, 3.33
3. Memo from PREA Coordinator

Interviews with the following:

- PREA Coordinator
- Supervisors and Staff Responsible for Supervising Inmates in Restrictive Housing

Findings:

In accordance with agency policy, RCSO does not place inmates who are at high risk for sexual victimization in restrictive housing unless alternatives have been considered and are not available. Agency policies are written in accordance with the standard and cover all mandated stipulations. Policy states inmates who are at a high risk for sexual victimization, or have alleged sexual abuse or misconduct against another inmate may not be placed in involuntary segregation unless an assessment of all available alternative means have been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If such an assessment cannot be conducted immediately, the inmate may be held in involuntary segregated housing for less than 24 hours while assessment is completed. These inmates placed in segregated housing due to their sexual victimization shall still retain access to programs, privileges, education, and work opportunities to the extent possible. If these are restricted, it shall be documented: (1) the opportunities that have been limited; (2) the duration of the limitations and (3) the reasons for such limitations.

The inmates assigned to involuntary segregation due to being a high risk for sexual victimization shall only be housed in involuntary segregation until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. If no other alternative arrangement can be made, it shall be documented: (1) The basis for the concern for the inmate's safety; and (2) The reason why no alternative means of separation can be arranged. Every 30 days, a review of the housing assignment shall be afforded to determine if there is a continuing need for separation from the general population.

According to the PAQ, there have not been any instances where inmates at risk for sexual victimization were placed in restrictive housing for the purpose of separating them from potential abusers. According to targeted interviews with staff who supervise inmates in restrictive housing, they are not aware of a case where an inmate was placed in restrictive housing as a result of being a high risk for sexual victimization. Staff indicated that an inmate identified as high risk would be moved to another housing location and not placed in segregation unless it was a temporary placement to keep the inmate safe until the investigation was complete, or unless the inmate requested it. A targeted interview with the PREA Coordinator also verified that no inmates during the audit period have been placed in restrictive housing involuntarily in order to separate them from potential abusers. Staff indicated that there was sufficient space and housing units to find a suitable place for an otherwise

	orderly inmate. The agency policy states that if inmates were placed in restrictive housing for involuntary protective purposes, they would be permitted programs and privileges, work and educational programs and any restrictions would be limited. Further, the policy stipulates that such an involuntary housing assignment would not normally exceed 30 day and such a placement would be documented and include the justification for such placement and why no alternative can be arranged. According to the policy, if an inmate is confined involuntarily under these circumstances, the facility shall review the continuing need for placement. Staff are aware of their responsibilities with regard to this standard, including the need for a review every 30 day. There have been no instances that required action with regard to this standard. During the on-site portion of the audit, the auditor reviewed all of the restrictive housing areas and had informal discussions with both inmates and staff. As verified by targeted interviews with staff, the auditor did not identify any inmates who were involuntarily housed in restrictive solely for protective purposes for being a high-risk victim or having made an allegation. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33, 2.37, 8.12 3. Posters and other available information 4. Inmate Handbook 5. Inmate Orientation 6. Site Review 7. SARA MOU 8. RCSO Website 9. Hotline Information Interviews with the following: • PREA Coordinator • Intake Staff

- Sheriff
- Random Staff
- Random Inmates

Observation of the following:

- Observation of informal interactions between staff and inmates
- Observation of inmates using the telephone system
- Observation of Information Posters inside the housing units, adjacent to telephone and in the booking area

Findings:

The RCSO policy designates multiple mechanisms for the internal reporting of sexual abuse and harassment, retaliation by other inmates or staff for reporting, as well as mechanisms for reporting conditions that may have contributed to the alleged abuse.

Policy is written in accordance with the standard. Policy states inmates and staff may confidentially disclose incidents of sexual misconduct, sexual contact, sexual abuse and sexual harassment to any Sheriff's Office employee, either verbally or in writing. All incidents of sexual misconduct, sexual contact, sexual abuse, and sexual harassment that are reported, either in writing or verbal, must be documented. This process allows for confidential reporting by inmates 24 hours per day, 7 days per week. Such reports will be handled immediately by the Chief Correctional Officer or Shift Commander during non-business hours. Inmates can also dial "7732" from the phones, during normal phone hours, located in the pods to report to an outside agency an allegation of sexual misconduct, sexual contact, sexual abuse, and sexual harassment. This service is answered by Roanoke City Police Department's Crime Line operators. The operator is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates may also have a third party report an allegation of sexual misconduct, sexual contact, sexual abuse, and sexual harassment through the Roanoke City Sheriff's Office's website. However, if an inmate declines a third party's request processed on his or her behalf, it shall be documented that this was the inmate's decision.

The auditor reviewed the inmate handbook and found that inmates are informed that they may report instances of abuse or harassment by reporting to staff members, both verbally and in writing, as well as by using the inmate telephone system to make a report to the PREA hotline. There are multiple internal ways for offenders to privately report PREA related incidents, including verbally to any staff member, a written note submitted to staff, through the tablets/kiosk, anonymous reports within or external to the Sheriff's Office, and third-party reports. This information is received by offenders at intake, contained in the inmate handbook, on the tablets and kiosks, and on informational posters in all offender housing areas, intake and various other locations throughout the facility. Operational practice at RCSO is consistent with the RCSO policy.

During random staff interviews, staff stated that inmates could make a PREA report to any staff member, write a note, have a friend or family member report for them, or

call the hotline. During the site review, the auditor observed reporting information adjacent to all inmate telephones. Inmate interviews revealed that the inmates are aware of the reporting methods available to them, including verbal reports, written reports, and third-party reports. Inmate interviews also revealed that inmates are aware that they can make a report outside the Sheriff's Office and can remain anonymous if they choose.

The RCSO does not routinely hold inmates solely for civil immigration purposes.

However, the Sheriff's office has a policy in place requiring inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.

Staff interviews revealed that they are aware of their responsibilities with regard to reporting, and would accept and act on any information received immediately. All staff that were interviewed acknowledged their duty to report any PREA related information. Information on how to report on behalf of an inmate is listed on the agency website. Staff indicated they would accept and act on third-party reports, including from another inmate. Verbal reports are required to be documented.

RCSO policy provides a requirement that inmates have the option of reporting incidents of sexual abuse to a public or private entity that is not part of the agency. Offenders have the ability to report outside the RCSO, by phone, to the Roanoke City Police Department Crime Line. This information is in the inmate handbook, posted by the phones and on the PREA card the inmates receive at intake. During the site review, the auditor observed PREA informational posters and placards adjacent to the inmate telephones with the Hotline information where reports can be taken and referred immediately for investigation. Most all offenders interviewed were aware of this as a potential reporting method, indicating the offenders are receiving this information. Documentation provided shows that there have been reports made through the hotline making this a viable reporting method. Contact information, including address and phone number is also available for SARA, the local rape crisis hotline.

The auditor reviewed the allegations for the previous 12 months and found that there were allegations reported through a variety of methods, including reporting directly to both security and non-security staff, hotline, and tablet. This indicates that offenders are aware of the various reporting methods.

The Auditor verified the availability of the hotline by making a test call. Information indicates that to place a call to the hotline, inmates should dial "#7732." The information for the test call was forwarded to the facility and relayed to the auditor.

Policy and the inmate handbook stipulate that 3rd party reports of sexual abuse or harassment will be accepted verbally or in writing. Random inmate and staff interviews revealed that the staff and inmates are aware that third party reports will be accepted and treated just like any other reports, with an investigation started immediately.

A targeted interview with the PREA Coordinator and random staff verified that there

	are multiple ways to make PREA complaints by both staff and inmates, including the use of the inmate phone system, anonymous letters, as well as third party reporting by family and friends. The auditor reviewed investigative files for the allegations of sexual misconduct within the last year. Most of the allegations were reported directly to facility staff, however there were a variety of methods used. Policy requires that all staff accept reports of sexual abuse or harassment both verbally and in writing and that those reports shall be documented in writing by staff and responded to immediately. During targeted interviews with staff, the staff indicated that if an inmate reported an allegation of sexual abuse or harassment, they would notify their supervisor of such an allegation and immediately intervene by separating the victim and alleged perpetrator. Each staff member stated that they would take action without delay and would accept a verbal complaint and would be required to make a written report of the incident. During random inmate interviews, the inmates were asked if they knew that they could make a verbal report of an incident of sexual harassment. All the inmates stated that they knew that they could report to any staff member. Staff may privately report sexual abuse or harassment of inmates either verbally or in writing to their supervisors, or Sheriff directly. Staff members are informed of this provision during PREA training. Staff interviews revealed that they are aware they can go directly to facility administration, including the PREA Coordinator or Sheriff to report sexual abuse and harassment of inmates and all staff that were randomly interviewed answered that they would report any such incident to their supervisor. After a review, the Auditor determined that the facility meets the requirements of the standard Corrective Action: None
--	---

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Operating Policy 3.33 3. Inmate Handbook 4. Staff Interviews Findings: Agency policy is written in accordance with the standard. Grievances about sexual assault or sexual harassment will be accepted and reviewed regardless of when the

	incident took place. Policy allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred. The RCSO allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The grievance procedures are outlined in the inmate handbook, with a section specific to the grievance procedure for sexual abuse and harassment. Random inmate interviews indicated they are aware of the grievance process and that they can utilize the process to report a PREA allegation. None of the inmates interviewed by the Auditor had filed a grievance alleging an imminent risk of sexual abuse or an allegation of sexual abuse. A targeted interview with the facility investigator revealed that all allegations, including ones submitted through the grievance process are immediately referred for investigation. Per the PAQ: In the past 12 months, the number of grievances filed that alleged sexual abuse: 0 A review of the investigative files confirmed this information. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Inmate Handbook 4. Website information 5. MOU with SARA Interviews with the following: a. PREA Coordinator b. Random Inmates c. Random and Targeted Staff d. Mental Health and Medical Staff Observations of the Following: a. PREA informational Posters throughout the facility and public areas

Findings:

RCSO policy 3.33 indicates that advocacy services are available. Policy states, "As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. A qualified agency or community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assaults and forensic examinations."

The facility provides inmates with access to local, state, or national victim advocacy or rape crisis organizations, including toll-free hotline numbers. The inmate handbook states that inmates making allegations of sexual misconduct, sexual contact, sexual abuse or sexual harassment shall be provided appropriate counseling or medical treatment. Counseling will be arranged by the Chief Correctional Officer or his/her designee. Staff interviews indicate they are aware of their obligations under this standard.

The auditor reviewed the RCSO handbook, which included information regarding the availability of outside confidential support services for victims of sexual abuse and harassment. Addresses and phone numbers are provided.

Policy requires that inmates and staff are allowed to report sexual abuse or harassment confidentially and requires that medical and mental health personnel inform inmates of their limits of confidentiality. Targeted interviews with medical and mental health reveal they are aware of their obligations to inform the inmates of the limits of confidentiality. The auditor reviewed documentation that verified this is being relayed to the inmates.

Inmates are informed of the services available during orientation. Inmate interviews indicated they knew they could ask to speak to mental health for counseling services if they needed to.

The information is listed in the inmate handbook. Staff interviews revealed that outgoing mail is not opened or searched (without documented cause) and there are no restrictions on inmates sending mail to external reporting entities, outside emotional support services, and/or legal mail.

The RCSO has an MOU with Sexual Assault Response and Awareness (SARA), the local rape crisis center to establish an agreement for emotional support services. The Auditor was provided a copy of the MOU and verified the agreement for services. The auditor verified the availability of services with SARA staff, as well as facility mental health staff.

The RCSO does not routinely hold inmates solely for civil immigration purposes. However, the Sheriff's office has a policy in place requiring inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security. In

	accordance with the standard, the RCSO provides inmates with access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes. After a review, the Auditor determined the facility substantially meets the requirements of the standard. The auditor does recommend adding additional information regarding the availability of advocacy and counseling services through SARA to the inmate handbook on the next revision or otherwise making this information readily available to the inmates. Corrective Action: None
--	---

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Inmate Handbook 4. RCSO Website 5. Staff Interviews 6. Inmate Interviews Findings: The RCSO policy is written in accordance with the standards, stipulating that all third-party reports will be accepted and investigated. The RCSO publicly provides a method for the receipt of third-party reports of sexual abuse or harassment through the RCSO website. Policy states that inmates may have a third party report an allegation of sexual misconduct, sexual contact, sexual abuse, and sexual harassment through the Roanoke City Sheriff's Office's website. The Auditor reviewed the agency website. The website has information on its PREA page that contains information about PREA and their responsibilities for criminal and administrative investigations. It also contains contact and reporting information should any one wish to report an incident of sexual abuse or harassment on behalf of an inmate. Staff interviews reveal that they are aware of their obligation to accept and immediately act on any third-party reports received. Staff, including supervisors, indicate they will accept a third-party report from a family member, friend or another inmate. They would document the report and inform their supervisor, and the report would be handled the same as any other allegation or report and investigated thoroughly.

	Offenders are provided this information at intake through the PREA card, as well as the inmate handbook. Offender interviews indicate that they are aware that family or friends or other offenders can call or write and report an incident of sexual abuse or sexual harassment on their behalf. A review of the investigations for the past 12 months revealed no allegations of sexual abuse or harassment through third-party reports. The auditor reviewed the investigative files, which confirmed this information. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Review of investigative files Interviews with the following: • Investigative staff • Sheriff • Random Staff • Medical and Mental Health Staff Findings: RCSO policy is written in accordance with the standard and requires all staff, contractors and volunteers to immediately report any knowledge, suspicion or information related to sexual abuse or harassment to a supervisor. Policy states that as soon as an incident of sexual contact, sexual abuse or sexual harassment comes to the attention of a staff member or any individual in a position of authority over an inmate (including third-party and anonymous reports), whether or not the incident occurred within this facility, the staff member or contract employee who receives the information shall immediately inform the designated department investigator, Chief Correctional Officer, or Shift Commander. Staff who received the information must also report any retaliation against inmates or staff who reported such an incident. Failure to do so may result in disciplinary action, up to and including dismissal. Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

During the site review, all staff members interviewed were asked if they were required by policy to report any instances or suspicions of sexual abuse or harassment. All the staff members responded unequivocally that they were required to report any such instances. The auditor also informally asked the same question of contracted staff, and they stated that they would report any instance of sexual abuse or harassment immediately to security staff. Interviews with staff indicate they are very clear with regard to their duties and responsibilities with regard to reporting PREA related information, including anonymous and third-party reports. During random staff interviews, all of the staff members stated that they were required by policy to report any instance of sexual abuse or harassment or retaliation for making reports. They were also asked if that included alleged behavior by staff or contractors or volunteers. All staff members who were randomly interviewed said that they were obligated to report any such allegations or suspicions, no matter who it involved. Staff articulated their understanding that they are required to report any information immediately and document such in a written report.

During the random staff interviews, staff were asked about their requirement for maintaining confidentiality. The staff articulated the need to keep the information limited to those that need to know to preserve the integrity of the investigation. Staff indicated that details related to either inmate allegations or staff allegations should remain confidential and they would only discuss details with supervisors and investigators. A targeted interview with the PREA Coordinator and PSU Lieutenant verified that all investigative files are maintained securely with limited access.

RCSO requires that all medical and mental health personnel report the mandatory reporting requirements and limits of confidentiality to victims of sexual abuse.

Interviews with medical and mental health staff indicate they are aware of their mandatory reporting requirements and comply with the mandate to disclose the limits of their confidentiality. Medical and mental health staff are aware of their responsibilities to report information, knowledge, or suspicions of sexual abuse, sexual harassment, retaliation, staff neglect or violations of responsibilities which may have contributed to an incident. The auditor viewed documentation that shows that medical and mental health staff discuss limits of confidentiality with the offenders. Mental health staff stated that inmates are informed about limits of confidentiality and informed consent and acknowledge this at the initiation of any mental health services.

Targeted interviews with the PREA Coordinator, as well as random staff interviews verified that all allegations of sexual abuse or harassment received from a third party are referred for investigation and immediately acted upon.

If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency would report the allegation to the designated State or local services agency under applicable mandatory reporting laws. However, the RCSO has not held any such inmates during the audit period.

All allegations of sexual abuse and harassment are reported to the on-duty supervisor, who initiates an investigation. The reporting officer and supervisor create

	a report, and this report is forwarded to the PREA Coordinator for review and further action. In addition, the Sheriff is notified verbally through the chain of command. The Auditor conducted a formal interview with one of the facility investigators, who indicated that all allegations are immediately reported and investigated. The Auditor reviewed the investigative files for allegations within the audit period and determined that they were promptly reported and investigated as required by the standard. After a review, the Auditor determined the facility substantially meets the requirements of the standard. The Auditor suggests that language regarding the confidentiality of PREA information be more clearly added to the policy. Corrective Action: None
--	---

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: Evidence Reviewed: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 Interviews with the following: • PREA Coordinator • Sheriff • Random Staff • Random Inmates Findings: RCSO policy is written in compliance with the standard and requires that whenever there is a report that there is an incident of sexual abuse or harassment, the victim should be immediately protected. Policy states that as soon as a staff member learns that an inmate is subject to a substantial risk of imminent sexual abuse, they shall take immediate action to protect the inmate. Random interviews with staff, both security and non-security, indicate they are clear about their duty to act immediately if an offender is at risk of imminent sexual abuse. Staff indicated they would immediately remove the inmate from the situation, keep them separate and safe, and find an alternate place for them to stay or be housed pending an investigation or further action. Staff stated they would ensure the inmate was kept safe, away from the potential threat and an initial investigation would be completed by the on-duty supervisor. The PREA Coordinator and Classification staff would be notified in order to determine appropriate housing. Targeted interviews with

	the Sheriff, Supervisors and the PREA Coordinator confirmed that it is the policy of RCSO to respond without delay when inmates are potentially at risk for sexual abuse or any other types of serious risk. RCSO reports in the PAQ that there have been no determinations made that an offender was at substantial risk of imminent sexual abuse. The PREA Coordinator confirmed that RCSO did not have any inmates determined by the facility to be subject to a substantial risk of imminent sexual abuse requiring immediate action during this audit period. All inmates that report an allegation are immediately separated from the alleged abuser and kept in staff sight at all times until the alleged abuser is secured. If the report is made to staff other than an officer, security staff would be notified immediately. The staff member that the inmate reported the allegation to would remain with the inmate and ensure their safety until security staff responded. The Auditor randomly reviewed files and talked with staff, both formally and informally, and found no evidence that an inmate was determined to be at imminent risk of sexual abuse. There have been no incidents that required action with regard to this standard. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 Interviews with the following: • PREA Coordinator • Sheriff Findings: The RCSO's policy is written in accordance with the standard and requires that if the Sheriff or his/her designee receives an allegation regarding an incident of sexual abuse that occurred at another facility, he/she must make notification within 72 hours. Policy 3.33 states, "1. Upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility that

received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. 2. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. 3. All notifications shall be documented. 4. The superior officer of the department that receives the notification shall ensure that the allegation is investigated in accordance with these standards.”

Per the PAQ: In the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility: 6

According to targeted interviews with the Sheriff and PREA Coordinator, if they receive such a notice, they would immediately report the allegation to the Sheriff or Administrator of the other facility and document such a notice. They confirmed their understanding of their affirmative requirement to report allegations in accordance with the standard. The auditor reviewed examples of notification regarding reported instances of sexual abuse and found that they were handled in accordance with RCSO policy. The RCSO keeps an Excel spreadsheet regarding notification provided to other facilities.

RCSO requires that if the Sheriff or designee receives notice that a previously incarcerated inmate makes an allegation of sexual abuse that occurred at the RCSO, it would be investigated in accordance with the standards. The RCSO reported there had been one report from another facility that an inmate claimed he/she was sexually abused while housed at RCSO within this audit cycle. In the event such allegation is received, the Sheriff shall notify the PREA Coordinator, who will ensure that an investigation is initiated. Per the PREA Coordinator, a follow up call or e-mail is made to the facility confirming details of the allegation. Records are then reviewed to determine if the allegation was previously investigated. If it had been investigated, they will confirm with the other agency that there is no new information. If not yet investigated, they will begin an investigation and conduct an interview with the victim and any available perpetrators or witnesses.

Interviews with the Sheriff and PREA Coordinator confirm the staff are aware of their obligation to fully investigate allegations received from other facilities. The Auditor reviewed the investigative file for the allegation received from another facility and found the response and investigation to be in compliance with policy and the standard.

Further, interviews with the staff revealed that staff is aware of their obligations with regard to reporting, and there is a universal understanding and commitment to immediately report any allegations of sexual abuse or harassment, which increases the probability that abuse will be detected, reported and investigated.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. PREA 1st Responder Poster 4. Review of investigative files 5. Interviews with Random Staff, PREA Coordinator, Investigator Findings: The RCSO policy is written in accordance with the standard and indicates actions staff should take in the event of learning an inmate has been sexually assaulted. Policy requires that when an inmate reports an incident of sexual abuse, the responding staff member: Separate the alleged victim and alleged abuser, preserve and protect and evidence, if the abuse allegedly occurred within a time period that would allow the collection of evidence the first responded advise the victim not take any actions that would destroy any evidence, and take action to prevent the alleged abuser from destroying evidence. Per the PAQ: In the past 12 months, the number of allegations that an inmate was sexually abused: 9 In the past 12 months, the number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence: 0 There were 9 allegations of sexual abuse during this audit period. The auditor reviewed the investigative reports for the allegations. In all cases, the alleged victim was separated from the alleged perpetrator. A review of the investigative reports indicated that in all instances, security supervisory staff and/or the PREA Coordinator was notified and an investigation was initiated. During the on-site portion of the audit, the auditor interviewed two inmates who had reported sexual abuse or harassment during the review period. Both inmates were male and stated that upon reporting, the staff had immediately responded, ensured they were safe and offered them medical and mental health services. Neither inmate had reported allegations that required collecting evidence or necessitated a forensic exam. The Auditor conducted interviews with staff first responders. Security first responders were asked to explain the steps they would take following an alleged sexual abuse reported to them. Most all staff interviewed said that they would notify their supervisor after separating the inmates and wait for further instructions. The staff were able to appropriately describe their response procedures and the steps they

	would take, including separating the alleged perpetrator and victim and securing the scene and any potential evidence. The Auditor was informed the scene would be preserved and remain so until the assigned Investigator arrived to process the scene. A targeted interview with the Investigator and the PREA Coordinator indicated that once the initial steps were done and the scene was secure, the Roanoke City Police Department or State Police would be notified, depending on the nature of the investigation. The Auditor conducted interviews with supervisory staff. The Auditor asked what the supervisor response and role would be following a report of sexual assault. The supervisors stated that they would ensure the alleged victim and alleged abuser were removed from the area and kept separately in the facility. The crime scene would be secured and a staff member posted to ensure no one entered the scene. The alleged victim would be taken to medical for treatment of any emergent needs and transported to the Carilion Roanoke Memorial Hospital for a forensic exam, if needed. The Sheriff would also be informed. Policy requires that if the first responder is not a security staff member, the staff immediately notify a security staff member. The Auditor conducted formal interviews with non-security personnel. Staff were asked what actions they would take following an alleged sexual abuse reported to them. Staff indicated they would ensure the victim remains with them and immediately inform an officer or supervisor. They would also request the victim not take actions to destroy evidence. Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder: 0 Medical personnel interviewed stated they would first ensure a victim's emergency medical needs are met. They stated they would request the victim not to use the restroom, shower, or take any other actions which could destroy evidence. Medical staff informed the auditor they would immediately notify a supervisor if they were the first person to be notified of an alleged sexual abuse. Victims would be transported off-site to Carilion Roanoke Memorial Hospital for forensic exams, if needed. The HSA stated the medical staff would not do anything to destroy evidence. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination:

1. RCSO Completed PAQ
2. RCSO Policy 3.33
3. Sexual Assault Checklist
4. Interview with PREA Coordinator, Investigator, Medical Staff and Sheriff

Findings:

RCSO has a coordinated facility plan to address actions in response to an incident of sexual abuse among facility staff, including first responders, supervisory staff, medical, investigative staff and administrators. Interviews with multiple staff indicate that they understand their duties in responding to allegations of sexual assault and are knowledgeable in their role and the response actions they should take. The RCSO has a Sexual Assault Checklist listing actions to be taken by staff in response to a sexual assault allegation to ensure that all aspects of the response are covered and nothing is missed. Many of the facility staff involved in responding to incidents of sexual abuse are also a part of the incident review team.

The auditor reviewed the investigative files for allegations of sexual assault, which indicate staff are appropriately responding to allegations of sexual assault. None of the allegations required preservation and/or collection of physical evidence. However, the staff appear knowledgeable regarding their duties.

There have been no instances of reported sexual assault during this review period that required the first responder to preserve or collect physical evidence.

The auditor interviewed the Sheriff, a designated investigator, medical staff, as well as the PREA Coordinator, who is also an investigator, who all described the facility's coordinated response in the case of an allegation of sexual abuse or harassment. The response begins with the allegation and first responder action to protect the victim, secure the crime scene and protect any potential evidence. The initial investigation begins with the first responders and supervisors and then the facility investigators.

Depending on the nature of the allegation, the investigation will either begin as administrative or criminal. In the case of a criminal investigation, the victim is treated in accordance with policy and provided a forensic exam and ancillary services, as well as offered advocacy services. The remainder of the investigation is dictated by the nature of the allegation. Regardless, all investigations are completed and a finding is assigned. It may be referred for criminal prosecution or handled administratively and could require medical and mental health services and monitoring for retaliation and notice to the victim about the outcome of the investigation.

All staff at RCSO that the auditor spoke with appear to be well-versed in their role and responsibilities in responding to allegations of sexual assault.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 2.01 Interviews with the following: • PREA Coordinator Findings: The RCSO has not entered into any agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The RCSO prohibits entering into a collective bargaining agreement. The RCSO policy states that members of the Department are prohibited from affiliating with any labor unions or with any other organization or body, the constitution of which embraces provisions which might in any way exact prior consideration and prevent the proper and efficient functioning of department operations or that maintains the right of its members to strike; nor shall they become affiliated with, or cause to be established within the Department, any such organization. Per agency policy, the auditor determined that there is not a collective bargaining agreement in place. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33

Interviews with the following:

- PREA Coordinator
- Sheriff

Findings:

The RCSO's policy is written in accordance with the standard and states retaliation by or against any party, staff or offender, involved in a complaint or report of sexual abuse or sexual harassment shall be strictly prohibited. Policy states, "Sheriff's Office employees, any individual in a position of authority over an inmate, or any inmate, detainee, or resident shall not retaliate against the alleged victim, complainant, inmate and/or any witness for making allegations of sexual misconduct, sexual contact, sexual abuse or sexual harassment. Such retaliation may include, but is not limited to, threats regarding parole, bail or probation, denial of privileges, subjection to disciplinary or adverse administrative action, negative comments or recommendations to any parties or organizations, unjustified transfers or unjustified changes in work assignment. No Sheriff's Office employee shall lead the complainant, victim, or witness to believe that such retaliatory actions can or will be taken to induce statements or other cooperation. This in no way shall limit the Roanoke City Sheriff's Office's ability to take appropriate disciplinary or prosecutorial action where inmates make untruthful allegations. If any other individual who cooperates with an investigation expresses a fear of retaliation, appropriate measures shall be taken to protect that individual against retaliation. The Roanoke City Sheriff's Office will provide 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 that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. For a minimum of 90 days following a report of sexual abuse, the conduct and treatment of inmates or staff who reported the sexual abuse and the inmates who were reported to have suffered the sexual abuse shall be monitored by the Professional Standards Unit Lieutenant, or designee (e.g., inmate disciplinary reports, housing, or program changes by inmates, or negative performance reviews or reassignments by staff, etc.) to see if there are changes that may suggest possible retaliation by inmates or staff, and Sheriff's Office personnel shall act promptly to remedy any such retaliation. In the case of inmates, this monitoring shall also include periodic status checks. This obligation to monitor shall terminate if the allegation is unfounded. Any use of restrictive housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of SOI 5.03 - Classification of Inmates."

Retaliation in and of itself, shall be grounds for disciplinary action and will be investigated. Policy requires staff and inmates who report allegations of sexual abuse or harassment are protected from retaliation for making such reports. The PREA Coordinator is designated as the staff who will be responsible for monitoring retaliation for a minimum period of 90 days. Monitoring shall occur beyond ninety (90) days if the initial monitoring indicates a continuing need and monitoring shall cease if the investigation determines that the allegation is unfounded.

The Auditor conducted a formal interview with the staff member responsible for

	monitoring retaliation. When monitoring retaliation, he reviews disciplinary charges and Incident Reports and any other actions related to the inmate, including documents maintained in the inmate's file and his electronic record. He stated that anytime anything changes he will look at those actions. He also indicated he will make referrals to medical and mental health as needed. The monitoring will also include periodic status checks and notations made by the staff monitoring the retaliation. The PREA Coordinator stated the monitoring period would be a minimum of 90 days, and longer if necessary. He indicated that he will meet with them after the conclusion of the investigation and at a minimum of every 30 days. In the event the inmate cannot be protected at the facility, the staff can and will recommend a transfer. In the case of an offender being retaliated on by staff, the administration would discuss staff assignments with the supervisor to ensure the staff member is not placed in an area where the inmate is housed. The PREA Coordinator and Classification staff have the authority to move inmates around the facility or to request transfers to other facilities thru the Sheriff, or take other protective measures to assure inmates are not retaliated against. Inmates would not be held in Special Management unless requested by the inmate. In addition, the Sheriff has the authority and would intervene in any way necessary to protect employees from retaliation if they reported incidents of sexual abuse or harassment. The auditor reviewed examples of monitoring for retaliation provided by the facility and found them to be in compliance with the standard. In addition, staff interviews confirmed their knowledge of the requirements for protection from retaliation for both inmates and staff members. Per the PAQ: The number of times an incident of retaliation occurred in the past 12 months: 0 After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ

2. RCSO Policy 5.03

3. Review of all Investigative Files from the past 12 Months

Interviews with the following:

- PREA Coordinator
- Staff who supervise inmates in Restrictive Housing

Observation of the following:

- Observation of Inmates in restrictive housing

Findings:

The RCSO's policy is written in accordance with the standard and requires the use of segregated housing be subjected to the requirements of PREA standard 115.43. Policy states that the inmates assigned to involuntary segregation due to being a high risk for sexual victimization shall only be housed in involuntary segregation until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. If no other alternative arrangement can be made, it shall be documented: (1) The basis for the concern for the inmate's safety; and (2) The reason why no alternative means of separation can be arranged. Every 30 days, a review of the housing assignment shall be afforded to determine if there is a continuing need for separation from the general population. Any use of protective custody to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements listed above.

Interviews with staff state they would not place an inmate in segregation for reporting sexual abuse or assault. Staff indicated they would not ordinarily place a sexual assault victim in segregation unless he had requested it. Staff explained that other alternatives are explored as they have multiple housing locations, and segregation is utilized as a last resort. The Auditor was informed of and observed several areas in the facility to place sexual abuse victims to ensure they are protected from abusers without having to place the victim in segregated housing.

The auditor reviewed all the RCSO restrictive housing areas and through informal discussions with supervising staff, no staff indicated that inmates were assigned to restrictive housing as a result of their sexual vulnerability. Staff indicated that if an inmate that made an allegation were to be held in restrictive housing, it would be very briefly until other housing was arranged or the initial investigation was complete.

The agency has had no incidents that have required restrictive protective custody. Interviews with the supervisory staff as well as the PREA Coordinator confirmed their knowledge of their requirements to appropriately adhere to the elements of standard 115.43, after a victim's allegation of abuse.

In addition, during targeted interviews with the PREA Coordinator and supervisors, they verified that there have been no instances of inmates being placed in restrictive housing as a result of the sexual victimization or vulnerability. There were no records or documentation to review regarding this standard because there were no instances

	of the use of restrictive housing to protect and inmate who was alleged to have suffered sexual abuse. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Review of Investigative files 4. Interviews with Staff 5. Documentation of Investigator Training 6. Certificates of Completion for Facility Investigators 7. Training Curricula for Investigative Training specific to Corrections Findings: The RCSO policy is written in accordance with the standard. Policy requires that the agency conduct administrative investigations of sexual abuse and harassment. The policy stipulates criminal investigations shall be conducted by the Roanoke City Police Department, depending on the nature of the investigation. Policy states that all credible allegations of forcible sexual assault will be reported to the Sex Offenses Unit of the Roanoke City Police Department as soon as possible in order to preserve physical evidence. All allegations referred to the Roanoke City Police Department will be thoroughly and promptly investigated per the RPD Operational Directive for Sexual Assault Investigations. Policy 3.33 states, “14. When the quality of evidence appears to support criminal prosecution, compelled interviews shall be conducted only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. 15. The investigator will conduct thorough and prompt interviews with the complainant, the witnesses, the accused, the alleged victim(s) and any other individuals who may have information about the alleged incident (s). Residents shall not be utilized as interpreters. 16. A polygraph examination may be used as an investigative tool. It will not be required of a resident who alleges sexual abuse to submit to a polygraph examination or other truth telling devices as a condition for proceeding with the investigation of

such an allegation.

17. The investigation, including all interviews, videos, polygraph documents, witness statements, supporting documents, and other evidence will be treated as confidential. Secrecy orders will be executed when appropriate. The name of the complainant and/or alleged victim and the identity of witnesses shall be confidential. It is imperative that confidentiality regarding the identity of any individual involved in the investigation be maintained to the greatest extent possible within the Roanoke City Adult Detention center or within any facility to which the resident may be transferred. Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in policy, to make treatment, investigation, and other security and management decisions.

18. Except for those individuals responsible for conducting the investigation, all other individuals alerted to the allegation, including Sheriff's Office staff, are prohibited from conducting independent investigations or inquiries into the circumstances related to the alleged incident(s). Breach of confidentiality may result in disciplinary action, up to and including dismissal. However, the pending investigation shall in no way limit a resident's right to access legal counsel.

19. The confidentiality provisions above shall in no way limit the investigator or Sheriff's Office staff from cooperating with or appearing or testifying before a grand jury, court, or local, state or federal investigatory agency.

20. All interviews will be conducted thoroughly in a professional, non-abusive and non-threatening manner. Staff will make no predetermined judgment regarding whether the reported incident occurred or not based on the status of an alleged victim, suspect, or witness, but will proceed with notifying the appropriate individuals based on the nature of the report. If appropriate, a sexual misconduct complainant may be offered the opportunity to speak to a same gender deputy regarding facts of complaint."

The agency policy stipulates that they will respond to complaints that are received internally, verbally and in writing and externally by a third party. The policy requires that investigations are responded to promptly. The RCSO conducts an investigation on all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports. Administrative investigations will include efforts to determine whether staff actions or failure to act contributed to an act of sexual abuse.

Investigative reports are required to include a description of physical evidence, testimonial evidence, the reason behind credibility assessments, and investigative facts and findings.

The auditor reviewed investigative reports for the allegations of sexual misconduct during the past 12 months. All reports contained the required elements as dictated by the standard. As evidenced by the investigative reports, all allegations are investigated promptly, thoroughly, and objectively. Oversight for all allegations is completed through the PREA Coordinator's office and the PSU Department.

If at any time during the investigation, it appears the charges are criminal in nature, the investigation will be referred to the Roanoke City Police Department or State Police. The facility is required to maintain written investigative reports for as long as

the alleged abuser is incarcerated or employed by the RCSO, plus an additional 5 years in accordance with records retention schedules. The RCSO prohibits the termination of an investigation if an inmate is released or a staff member is terminated or terminates employment. This was confirmed through interview with the PREA Coordinator.

RCSO investigators are required to cooperate with outside investigators and attempt to communicate to remain informed about the progress of a sexual abuse investigation. According to a targeted interview with one of the designated Investigators, if an outside agency were to conduct an investigation of sexual abuse, the PREA Coordinator serves as a liaison and would keep facility administrators informed of the progress of the investigation. The PREA Coordinator indicated that they typically work together and share information.

Per the PAQ: The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012, or since the last PREA audit, whichever is later: 2

The investigative report indicates collaboration between RCSO Investigators and the Commonwealth Attorney's Office regarding prosecutorial efforts.

At the time of the on-site audit, RCSO employs and provided training records for all staff members who have received specialized training to conduct sexual abuse investigations in confinement facilities. The auditor was provided training curricula and training certificates of designated investigators. The auditor reviewed and verified that each of the facility investigators had proof of receiving the specialized training required by the standard. Each investigator had received specialized training to conduct sexual abuse investigations in confinement settings through the NIC online course. Targeted interviews with a facility investigator verified they are available to respond immediately, if necessary, including the PREA Coordinator who is also an investigator.

The Auditor conducted a formal interview with one of the facility's designated PREA Investigators. The Auditor asked the Investigator to describe his process when he is conducting an investigation. He stated he interviews the victim, alleged perpetrator, inmate witnesses, and staff witnesses, if applicable. He stated he reviews the scene, and preserves any evidence, if necessary. In accordance with the standard, he will gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. He reviews any documentation for all inmates involved, including criminal histories, disciplinary history, incident reports, and classification actions. The investigator will review prior reports and complaints of sexual abuse involving the suspected perpetrator. The investigator reviews video footage if applicable, telephone recordings, staff logs, and any other relevant items which could be considered evidence to support the determination. He will keep the facility administration advised of the progress of investigation. If at any point during the investigation he determines there could be potential criminal charges involved, the investigation would be reviewed and discussed and Roanoke City Police Department or State Police would be contacted.

	The facility or the outside agency can contact the Commonwealth Attorney for referral and consultation as warranted. The Investigator stated he begins the investigation immediately after receiving an allegation. Per the PAQ: In the past 12 months, the number of allegations referred for criminal investigation: 1 All investigative files are maintained by the PREA Coordinator and Professional Standards Lieutenant with limited access. Investigative files are maintained for a minimum of five years after the abuser has been released or a staff abuser is no longer employed. An offender who alleges sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition to proceed with the sexual abuse investigation. If an allegation is reported anonymously, the Investigator stated the investigation would be handled the same as any other investigation. The PREA Coordinator indicated they would continue the investigation even if an inmate is released or a staff member terminates employment during the investigation. The auditor reviewed a report that indicates compliance with this element of the standard. The auditor reviewed investigative reports for allegations of sexual misconduct during the past 12 months. A review of the investigative files indicate that the investigators are conducting the investigations in accordance with the standard. The reports show evidence that the investigator is gathering evidence, interviewing witnesses, victims, perpetrators, and conducting the investigation promptly. Reports indicate that investigators look at each allegation on its own merits and 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. The investigations appear to be conducted promptly, thoroughly and objectively. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Review of Investigative files for the past 12 months Interviews with the following:

	• PREA Coordinator • Investigative Staff Findings: The RCSO's policy is in compliance with the requirements of the standard and imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. A formal interview with one of the designated Investigators confirmed that the staff responsible for administrative adjudication of investigations is aware of the requirements of the evidentiary standard. The investigator was able to articulate what preponderance meant and how he arrives at the basis for his determinations. The auditor reviewed the investigative files for allegations of sexual abuse or harassment within the last 12 months. The auditor reviewed the narrative of the investigation, including the basis for the determination. A review of the investigative files indicates that the investigations are being conducted in accordance with the standard. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Review of investigative files and notification to inmate Interviews with the following: • PREA Coordinator • Investigator Findings: The RCSO policy is written in accordance with the standard and requires an inmate be notified when a sexual abuse allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. The agency is responsible for administrative investigations. Per the PAQ: The number of criminal and/or administrative investigations of alleged

	inmate sexual abuse that were completed by the agency/facility in the past 12 months: 9 Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of inmates who were notified, verbally or in writing, of the results of the investigation: 9 The PREA Coordinator indicated that inmates are informed of the results of an investigation at the conclusion of the investigation. A memo format is used for offender notification that is signed by the Sheriff. Documentation of receipt is maintained by the facility. The auditor interviewed two inmates that had reported sexual abuse at RCSO during the on-site portion of the audit. Both inmates stated that they had received notification of the outcome of the investigation. If an outside agency conducts an investigation, the RCSO requests the relevant information from them in order to inform the inmate of the outcome of the investigation. Outside criminal investigations are conducted in conjunction with the internal administrative investigation. The Roanoke City Police conduct all criminal investigations and communicates with the facility to send any relevant updates relating to criminal charges/ convictions. There has been one allegation referred criminal investigation during this audit period. The investigation was deemed substantiated at the facility level. The PD provided notification of the progress of the investigation to the RCSO. The Auditor reviewed the investigative files for reported allegations of sexual assault during the review period. The RCSO made notification to the inmates at the conclusion of the investigation as required. Interviews with a facility investigator confirmed their knowledge of their affirmative requirement to report investigative finding to inmates in custody. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Interviews with Staff

Findings:

The RCSO PREA and disciplinary policies were reviewed and are in compliance with the requirements of the standard. Staff is subject to disciplinary sanctions up to and including termination for violating the sexual abuse or sexual harassment policies.

Policy requires that staff found responsible for sexual abuse of an inmate shall be terminated from employment. Employees who are found to have violated agency policy related to sexual abuse and harassment, but not actually engaging in sexual abuse shall be disciplined in a manner commensurate with the nature and circumstances or the acts as well as the previous disciplinary history of the staff and comparable to other comparable offenses by other staff with similar disciplinary histories. Policy 3.33 states, "Any accused employee may be placed on suspension or be subject to other alternatives as indicated by the investigation, such as temporary transfer to another assignment, pending the outcome of the investigation."

Per the PAQ: In the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies: 0

Per the PAQ: In the past 12 months, the number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: 0

Per the PAQ: In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse): 0

Per the PAQ: In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies: 0

Interviews with facility staff and administrators verified that staff consider a violation of the PREA policy to be of sufficient seriousness to warrant termination and prosecution in accordance with the law. Staff interviews indicated that the staff were aware that the agency has a zero-tolerance policy regarding sexual abuse and any such incidents would be investigated and reported to the appropriate agency for prosecution, if necessary.

The Auditor interviewed facility administration regarding the facility's staff disciplinary policy. Facility administration indicated that if a staff member is terminated for violating the facility's sexual assault and harassment policy, and if the conduct is criminal in nature, it would be referred to the Police Department or State Police and Commonwealth Attorney's office for possible prosecution. If an employee under investigation resigns before the investigation is complete, or resigns in lieu of termination, that does not terminate the investigation or the possibility of prosecution if the conduct is criminal in nature. The facility would still refer the case for prosecution when a staff member terminates employment that would have otherwise been terminated for committing a criminal act of sexual abuse or sexual harassment.

	After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33, 5.02 3. Contractor/Volunteer Agreement 3. Interviews with Staff Findings: In accordance with the standard, any contractor or volunteer who engages in sexual abuse is reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies. The RCSO PREA and disciplinary policies were reviewed and are in compliance with the requirements of the standard. Contractors and volunteers who violate the sexual abuse or sexual harassment policies are prohibited from having contact with inmates and will have their security clearance for the RCSO revoked. Per the PAQ: In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates: 1 Per the PREA Coordinator, this case is currently under review by the Commonwealth Attorney's office. Charges have not been retained. The contract employee has been terminated. The auditor reviewed the investigative file, which corroborated this information. A targeted interview with contract staff members verified that they consider a violation of the PREA policy to be of sufficient seriousness to warrant termination from the facility. The contract staff were aware that the agency has a zero-tolerance policy regarding sexual abuse and any such incidents would be investigated and reported to the appropriate agency for prosecution, if necessary, as well as any licensing boards. The Auditor interviewed facility administration regarding the disciplinary policy regarding contract staff and volunteers. Facility administration indicated that contractors and volunteers who violate the sexual abuse or sexual harassment policies will have their security clearance revoked immediately. Contract staff would most likely be terminated by the contract employer. If the conduct is criminal in nature, it will be referred to investigators, with referral to the Roanoke City Police

	Department or State Police and the Commonwealth Attorney's office for possible prosecution, as well as reported to any relevant licensing bodies. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33, 3.10 3. Inmate Handbook 4. Review of Investigative Files 5. Review of Classification Records 6. Interviews with Staff Findings: The RCSO policy directs that inmates are not permitted to engage in non-coercive sexual contact and may be disciplined for such behavior. The RCSO dictates that staff is prohibited from disciplining an inmate who makes a report of sexual abuse in good faith and based on a reasonable belief the incident occurred, even if the investigation does not establish sufficient evidence to substantiate the allegation. Policy states that inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Any sexual activity that occurs between inmates is prohibited and shall result in discipline. Sanctions shall be appropriate 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. The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Consideration of therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse may lead to the requirement of the offending inmate to participate in interventions as a condition of access to programming or other benefits. The inmate may be disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such contact. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct shall not constitute falsely reporting an incident or lying, even if an

investigation does not establish evidence sufficient to substantiate the allegation.

RCSO prohibits sexual activity between inmates. Inmates found to have participated in sexual activity are internally disciplined for such activity. If the sexual activity between inmates is found to be consensual, staff will not consider the sexual activity as an act of sexual abuse. Instances of sexual activity between inmates, if reported to be consensual, are still investigated and each case is taken at face value.

RCSO policy states inmates are subject to formal disciplinary action following an administrative finding that they engaged in inmate-on-inmate sexual abuse.

Per the PAQ: In the past 12 months, the number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility: 0

Per the PAQ: In the past 12 months, the number of criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility: 0

The auditor reviewed the investigative files for allegations of sexual misconduct within the last 12 months and verified the information reported in the PAQ.

Disciplinary action for inmates is proportional to the abuse committed as well as the history of sanctions for similar offenses by other inmates with similar histories.

Agency policy requires that staff consider whether an inmate's mental health contributed to their behavior before determining their disciplinary sanctions.

There is mental health staff on site to provide mental health services to the inmates at RCSO. Mental health staff provides an array of services, including programming, supportive counseling and crisis intervention. Mental health staff are on call for emergent needs and can transfer inmates if they need more in-depth mental health treatment. Any decision to offer counseling or therapy to offenders and the initiation of any such counseling or therapy for individuals who have committed sexual offenses would be done at the discretion of the mental health staff in conjunction with a treatment plan for the offender. Mental health staff stated that they would provide services to inmate perpetrators, if requested.

Agency policy stipulates that inmates will not be disciplined for sexual contact with staff unless it is substantiated that the staff did not consent. There were no substantiated instances of inmate on staff sexual assault during the audit period.

Agency policy prohibits disciplining inmates who make allegations in good faith with a reasonable belief that prohibited conduct occurred. Interviews with staff and inmates confirm that RCSO is adhering to the provisions of the standard.

The Auditor reviewed investigative files, classification files, inmate records and interviewed staff, including a targeted interview with the PREA Coordinator. There is no evidence to suggest an inmate received a disciplinary charge for making an allegation of sexual abuse or sexual harassment in good faith.

Interviews with staff and inmates confirmed their knowledge of the policy regarding

	inmates engaging in non-coerced sexual activity. Furthermore, the staff and inmates were aware that the agency has an internal disciplinary process for inmates who engage in sexually abusive behavior against other inmates and knew that they could be disciplined for sexual abuse. Staff indicated that there is a thorough investigation into all disciplinary reports. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33, 3.05 3. PREA Screening and Follow-up 4. Random Review of Files 5. Follow up mental health referral within 14 days 6. Interviews with Staff, including the following: a. PREA Coordinator b. MH Staff c. Medical Staff 7. Interviews with Inmates Findings: The RCSO's policy is consistent with the requirements of the standards. The policy states that, "Any inmate who is referred to the medical section because they are identified as being at high risk for sexually assaultive behavior or being at high risk for sexual victimization will be immediately referred for a Mental Health Assessment by the Jail Psychiatrist or other qualified mental health professional. Any inmate (prison or jail) who indicates that that they have experienced prior victimization or previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner. Such inmates will be assessed within 14 days of the referral. Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. Medical and mental health practitioners shall 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.”

A random review of inmate files validated that the screenings were being conducted in accordance with the standards and the policy. In addition, there were several documented instances provided by the facility where inmates who were identified as needing follow up care, were offered the follow-up care within the 14-day period prescribed by the standards.

An interview with medical staff and mental health staff confirms that if an inmate answers yes on the screening question that they have experienced previous victimization, the inmate is offered a follow-up meeting, which is scheduled at that time. The mental health provider indicated that the 14-day follow-ups entailed a face-to-face meeting with the inmate. Staff also stated that the follow-up meetings typically occur sooner than 14 days.

Jail staff ask screening questions related to previous victimization, as does the medical staff. This increases the likelihood of inmate reports, and follow-up meetings with a mental health professional.

Interviews with medical and mental health staff also confirmed that referrals are generated if a screening indicates that an inmate has perpetrated sexual abuse, whether it occurred in an institutional setting or in the community. The auditor reviewed risk screenings and documentation of follow-up referrals for inmates identified as perpetrators of sexual abuse.

The auditor interviewed 5 inmates that had reported previous victimization during the risk screening. The inmates all recall being offered a follow-up meeting with mental health services.

The Auditor conducted a formal interview with mental health staff. The staff member indicated that inmates identified as needing follow-up care are scheduled to be seen within 14 days. When asked who this information would be shared with, the staff was clear about confidentiality and that this information would be only be shared with those who needed to know. Mental health staff confirm that services are offered to both inmates at risk of victimization, as well as inmates who have a history of sexually assaultive behavior.

The PREA Coordinator stated that he reviews all intakes for reports of prior victimization and will ensure that referrals are made as appropriate and follow up to ensure the inmates are seen by mental health.

This information is recorded in the electronic system and each staff member with access has an individual login and password. An interview with the PREA Coordinator confirmed that information related to sexual victimization and sexual abusiveness is kept secure and confidential with limited staff access. This information is limited access and only used to make housing, bed, work, education, and other program assignments.

RCSO policy states that medical and mental health personnel will obtain informed

	consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18. Interviews with medical and mental health staff confirm that they would gain informed consent before reporting information about prior sexual victimization that did not occur in an institutional setting. The auditor reviewed examples provided by the facility of completed informed consent forms. The RCSO has multiple levels of redundancy to ensure that all inmates that report sexual victimization have an opportunity to have a follow-up with mental health. After a review, the Auditor determined the facility exceeds the requirements of the standard. Corrective Action: None
--	---

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Mediko Policy J-F-06 4. Interviews with Staff, including the following: a. PREA Coordinator b. Investigator c. Medical Staff d. Random Security Staff 5. Interviews with Inmates Findings: The RCSO policy is written in compliance with the standard and states that all inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Policy 3.33 states, “7. Any resident who has become a victim of sexual assault or harassment shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. 8. The evaluations and treatment of such victims shall 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.

9. Medical and mental health services should be consistent with the community level of care.

10. Resident victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the sexually abusive vaginal penetration, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

11. Resident victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”

Interviews with medical staff confirm that victims of sexual abuse would receive timely, unimpeded access to these services. Contract medical staff through Mediko provide coverage 24 hours per day, seven days a week. The staff are aware of their responsibilities with regard to protection of the victim and evidence in the case of a report of sexual assault. In addition, the contracted medical and mental health staff are available 24 hours per day in the case of emergency and/or for crisis intervention services. This was confirmed by the PREA Coordinator, facility staff and medical staff. For services that are outside the scope of their experience, the victim can be treated at the local emergency department. Forensic exams are conducted off-site at Carilion Roanoke Memorial Hospital by qualified forensic nurse examiners. An advocate from the rape crisis center, SARA is available at the request of the victim. The auditor verified the availability of both of these services.

There were no documented allegations of sexual abuse requiring emergency medical or mental health services during the review period. Interviews with facility staff indicate their awareness of the provisions of the standard and their responsibilities if there is a report of sexual abuse.

RCSO policy states that all inmate victims of sexual abuse will be offered information and access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate. Medical staff was interviewed and confirmed the fact that they knew that they had an affirmative responsibility to provide care without regard to the ability of the victim pay for services or identify the alleged abuser, and the requirement to make a provision for emergency contraception and STD prophylaxis, if required. They confirmed that victims of sexual abuse would be offered these services either at the emergency room or as a follow-up once returned to the facility. There have been no allegations of sexual assault at the RCSO in the last 12 months requiring these services.

RCSO policy states that forensic examinations will be performed by Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE) at a local hospital without a financial cost to the victim. The inmate would be transferred to Carilion Roanoke Memorial Hospital for this service. Interviews with medical staff

	confirm that victims of sexual abuse would not be charged for services received as a result of a sexual abuse incident. There have been no allegations of sexual assault at the RCSO in the last 12 months requiring these services. The Mediko policies reflect and are in compliance with the PREA Standards. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Mediko Policy J-F-06 4. Interviews with Staff, including the following: a. Mental Health Staff b. Medical Staff 5. Interviews with Inmates Findings: The RCSO policy is written in compliance with the standard and states that the facility will offer medical and mental health evaluation and treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The evaluation and treatment of such victims will include follow up services, treatment plans, and referrals for continued care following their transfer or release. Policy 3.33 states, "7. Any resident who has become a victim of sexual assault or harassment shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. 8. The evaluations and treatment of such victims shall 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.

9. Medical and mental health services should be consistent with the community level of care.

10. Resident victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the sexually abusive vaginal penetration, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

11. Resident victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”

Interviews with medical and mental health staff confirm that these services would be available to inmates who have been victims of sexual abuse, and these services would be consistent with the community level of care. Interviews with medical and mental health staff reveal that they feel the care they provide the inmates is much better than the community level of care due to access and 24/7 availability of medical staff.

Inmate victims of sexual abuse while in the facility will be offered tests for sexually transmitted infections as medically appropriate. Interviews with medical staff confirm that inmate victims of sexual abuse would be offered tests for sexually transmitted infections and emergency prophylaxis. Female victims of sexual abusive vaginal penetration while incarcerated would be offered pregnancy tests.

There have been no allegations of sexual assault at the RCSO in the last 12 months requiring these services.

RCSO policy states that all treatment services for sexual abuse will be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Interviews with medical staff confirm that these services would be provided to the inmate at no cost. There have been no allegations of sexual assault at the RCSO in the last 12 months requiring these services.

The auditor reviewed documentation provided by the facility of ongoing services and mental health care for inmates identified as victims. In a targeted interview with the mental health staff, he stated that both high risk victims and high-risk abusers would be offered services. Policy 3.33 states, “An attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.”

Staff interviews confirmed the presence of policies and procedures consistent with the standard and confirmed the medical and mental health staffs’ knowledge of the policy and standard. Staff are well-versed in their responsibilities with respect to PREA related incidents.

Interviews with inmates confirm they are generally aware of the availability of

	services should they request or require them. SARA, the local rape crisis center is available for crisis counseling and/or advocacy services and inmates can request to speak with mental health. There have been no requests for advocacy services during this review period. The auditor reviewed documentation indicating these services are being offered. The Mediko policies reflect and are in compliance with the PREA Standards. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.86 Sexual abuse incident reviews	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Incident Reviews 4. Interviews with Staff Findings: The RCSO has a policy that governs the review of all substantiated or unsubstantiated allegations of sexual abuse. Policy 3.33 states, "Within 30 days of the conclusion of any substantiated or unsubstantiated sexual abuse investigation, a sexual abuse incident review shall be conducted. The review team shall include, but are not limited to the Chief Deputy (or designee), Chief Correctional Officer (or designee), Chief Support Services Officer (or designee), an Investigator, medical representative, and PREA Coordinator (or designee). These members are suggested for the Incident Review Team. It may also include any party that the Sheriff deems necessary. The purpose of the Incident Review Team will be to: Consider whether the allegation/ investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; Consider what motivated the allegation/incident, whether it was race, ethnicity, gender identity, sexual preference, group dynamics, etc.; Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; Assess the adequacy of staffing levels in that area during different shifts; Assess whether monitoring technology should be deployed or augmented to supplement supervisions by staff; and Prepare a report of findings and any recommendations for improvement. The recommendations for improvement, if any were found, shall be implemented or document the reasons for not doing so."

Per the PAQ: In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents: 3

Per the PAQ: In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents: 3

The auditor reviewed examples of the incident reviews provided by the facility. They were completed within 30 days and considered all elements as required by the standard.

In accordance with the standard, RCSO policy states that the review team will consider a need to change policy or practice to better prevent, detect, or respond to sexual abuse; if the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, perceived status, gang affiliation; the area in the facility where the alleged incident occurred to assess whether physical barriers in the area may permit abuse; the adequacy of staffing levels in that area during different shifts; and whether monitoring technology should be deployed or augmented to supplement supervision by staff.

An interview with two members of the incident review team, as well as the Sheriff confirms if there was an incident that required a review, all these factors would be considered. An interview with the PREA Coordinator confirms that a report of the findings, including recommendations for improvement, would be completed and submitted for inclusion in the file. The Sheriff will review the recommendations. The PREA Coordinator also stated any recommendations would be implemented, or the reasons for not doing so would be documented. Both members of the incident review team interviewed stated that the Sheriff is very involved in PREA related matters and is good about implementing recommendations.

The RCSO has appointed a team that conducts incident reviews at the conclusion of any sexual assault investigations as stipulated by the standard. This was confirmed by formal interview of the Sheriff and PREA Coordinator. A written report of the findings is prepared and maintained by the PCM. He indicated that the reviews take place within 30 days of the conclusion of the investigation.

Sexual Abuse Incident Reviews are conducted in a standardized form. Team members meet to discuss the various components required by the standard and then this is documented on the Sexual Abuse Incident Review Report Form. The PREA Coordinator ensures that they are complete and require a copy be submitted to them upon completion in the required timeframe. This oversight and standardization are completed for all sexual abuse related abuse allegations.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

115.87	Data collection
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Annual Report 4. PREA Investigative Log 5. Interviews with Staff 6. SSV's Findings: The RCSO policy is consistent with the requirements of the standard and states that, "1. Accurate, uniform data for every allegation of sexual misconduct at the facility shall be collected using a standardized instrument and set of definitions (see definitions above). The incident-based sexual misconduct data shall be aggregated annually. The data collected shall 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. 2. All data shall be maintained, reviewed, and collected as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. All such data, upon request, from the previous calendar year shall be provided to the Department of Justice, no later than June 30. 3. The data that is collected and aggregated shall be reviewed in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. This includes identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings from its data review and corrective actions for the agency. Such report shall include a comparison of the current year's data and corrective action with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse." The facility maintains a spreadsheet for all allegations including all pertinent information needed for data collection. This was reviewed by the auditor and found to be comprehensive. The Auditor reviewed the Annual Report available on the facility website, including aggregated sexual abuse data for fiscal years 2015-2025. An interview with the PREA Coordinator confirms the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Data from the previous calendar year is supplied to the Department of Justice no later than June 30th, if requested. Per the PAQ and the PREA Coordinator, the last requested SSV was 2024 for CY2023, which was submitted as required. This was reviewed by the auditor.

	The facility is collecting and aggregating sexual abuse data on an annual basis as required by the standard for facilities under its direct control. The report uses a standardized set of definitions, which are available on the facility website and in the RCSO policy. The RCSO does not contract with any private facilities for confinement of RCSO inmates. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ with ADP 2. Statistical Report 2024, 2025 3. Annual Report 2024, 2025 4. Website with sexual abuse data 5. Interviews with Staff Findings: The RCSO policy is consistent with the requirements of the standard and indicates that data collected pursuant to 115.87 for all facilities under its direct control will be made readily available to the public through the agency website, excluding all personal identifiers after final approval. Policy 3.33 states, “4. The approved (by agency head) annual report will be readily available to the public annually through its website. All personal identifiers will be removed before making sexual misconduct data publicly available. 5. The agency ensures that the incident-based and aggregate data are securely retained. The sexual misconduct data collected is maintained for at least 10 years after the date of the initial collection, unless federal, state, or local law requires otherwise. 6. The PREA Coordinator will be responsible for providing a copy of this annual report to ICE by email to roanokecap@ice.dhs.gov.” The Auditor reviewed the Annual Reports available on the agency website, including data for fiscal years 2024 and 2025. The reports are available to the public at the Sheriff’s Office website at https://www.roanokecitysheriffsoffice.com/prison-rape-e-elimination-act-prea.

	The reports indicate that the agency reviewed the data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The report, entitled "PREA Annual Report" is a comprehensive report that includes an overview of the facility's plan for addressing sexual abuse and aggregated data. The annual report indicates the agency's efforts to address sexual abuse include continually providing education and staff training, as well as evaluating processes and standardization. Interviews with the PREA Coordinator and Sheriff confirm these efforts. The RCSO does not contract with any private facilities for confinement of RCSO inmates. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. RCSO Completed PAQ 2. RCSO Policy 3.33 3. Annual Report 4. RCSO Website containing sexual abuse data 5. Interviews with Staff Findings: The RCSO policy is consistent with the requirements of the standard, which mandates that aggregated sexual abuse data from facilities under its direct control be securely maintained. RCSO policy is written in accordance with the standard that data collected pursuant to 115.87 will be made readily available to the public through the agency's website, excluding all personal identifiers after final approval by the Sheriff. Policy states the agency will ensure all data collected is securely retained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise. All sexual abuse data and files are maintained by the PREA Coordinator, with limited access, including senior facility management. Aggregated sexual abuse data is gathered from the investigative reports. The Auditor reviewed the agency's website, which included annual reports with aggregated sexual abuse data, as well as an analysis of the data. There were no personal identifiers contained within the report. The Auditor was informed sexual abuse and sexual harassment data is maintained for a minimum of 10 years after collection.

	The RSCO does not contract with any private facilities for confinement of RSCO inmates. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	--

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. Previous Audit Report 2. PAQ 3. On-Site Review Interviews with the following: • PREA Coordinator • Sheriff • Random and Targeted Inmates Observation of the following: • Observation of, and access to all areas of the RSCO during the site review The RSCO had its last PREA Audit in June 2023. The Auditor was given full access to the facility. The facility administration was open to feedback and all recommendations were implemented immediately. The facility provided the Auditor with a detailed tour of the facility. The Auditor was able to request, review and receive all requested documents, reports, files, video, and other information requested, including electronically stored information. All requested documentation was provided in a timely manner. All staff at RSCO cooperated with the Auditor and allowed the Auditor to conduct interviews with staff and inmates in a private area. The auditor was permitted to conduct unimpeded private interviews with inmates at the RSCO, both informally and formally. The Auditor was given private interview rooms to interview inmates, which were convenient to inmate housing areas. The RSCO staff facilitated getting the inmates to the auditor for interviews in a timely and efficient manner. Informal interviews with inmates confirm that they were aware of the audit and the ability to communicate with the auditor. The auditor was able to observe both inmates and staff in various settings. Prior to the on-site review, letters were sent to the facility to be posted in all inmate living areas which included the Auditor's address. The Auditor observed notices

	posted in each inmate living unit that were emailed to the PREA Coordinator prior to the Audit. The Auditor received documentation that the notices to inmates were posted six weeks in advance of the first day of the audit. The auditor received one confidential letter from an inmate at RCSO. However, the inmate had been released prior to the onsite audit. The facility had an onsite review and audit within the three-year period of the last audit and has completed the onsite review and audit process. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None
--	---

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination: 1. Previous Audit Report 2. RCSO Website Interviews with the following: • PREA Coordinator The Auditor reviewed the RCSO website which contains a link for the July 2023 PREA Audit Report, completed by this auditor. The RCSO website https://www.roanokecitysheriffsoffice.com/prison-rape-elimination-act-prea contains all previous audits for the facility. After a review, the Auditor determined the facility meets the requirements of the standard. Corrective Action: None

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

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
--	-----

Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
---	-----

115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Has the agency employed or designated an agency-wide PREA Coordinator?	yes
--	-----

Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
--	-----

Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
--	-----

115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	na
---	----

Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	na
---	----

115.12 (a) Contracting with other entities for the confinement of inmates

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

115.12 (b) Contracting with other entities for the confinement of inmates

Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na
---	----

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

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

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

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

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

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

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

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

	agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the agency train all employees who may have contact with	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	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).	na
115.81 (b)	Medical and mental health screenings; history of sexual abuse	

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

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

	115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	

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

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

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

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