

# PREA Facility Audit Report: Final

**Name of Facility:** Arlington County Detention Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 09/20/2020

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Paul Perry	<b>Date of Signature:</b> 09/20/2020

AUDITOR INFORMATION	
<b>Auditor name:</b>	Perry, Paul
<b>Email:</b>	paul.perry@carolinedf.org
<b>Start Date of On-Site Audit:</b>	08/17/2020
<b>End Date of On-Site Audit:</b>	08/19/2020

FACILITY INFORMATION	
<b>Facility name:</b>	Arlington County Detention Facility
<b>Facility physical address:</b>	1435 N Courthouse Rd, Arlington, Virginia - 22201
<b>Facility Phone</b>	
<b>Facility mailing address:</b>	

<b>Primary Contact</b>	
<b>Name:</b>	Broderick Lindsey
<b>Email Address:</b>	blindsey@arlingtonva.us
<b>Telephone Number:</b>	703-228-7063

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Gretchen Foster
<b>Email Address:</b>	gfoster@arlingtonva.us
<b>Telephone Number:</b>	703-228-4492

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	Cristen Bowers
<b>Email Address:</b>	cbowers@arlingtonva.us
<b>Telephone Number:</b>	

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Marjorie Burris
<b>Email Address:</b>	marjorie.burris@corizonhealth.com
<b>Telephone Number:</b>	703-228-4508

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	719
<b>Current population of facility:</b>	216
<b>Average daily population for the past 12 months:</b>	338
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Both females and males
<b>Age range of population:</b>	18-75
<b>Facility security levels/inmate custody levels:</b>	min-max
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	254
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	42
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	186

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	Arlington County Sheriff's Office
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	1425 N Courthouse Rd, Arlington, Virginia - 22201
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

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

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Broderick Lindsey	<b>Email Address:</b>	blindsey@arlingtonva.us

## AUDIT FINDINGS

### **Narrative:**

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

The Arlington County Sheriff's Office contracted with PREA Auditors of America, 14506 Lakeside View Way, Cypress, TX 77429 for Prison Rape Elimination Act audit services of the Arlington County Detention Facility. The Auditor has been certified by the United States Department of Justice to conduct PREA audits of adult facilities. The purpose of this audit was to determine the Arlington County Detention Facility's level of compliance with standards required by the Prison Rape Elimination Act of 2003. This is the third Prison Rape Elimination Act audit of the Arlington County Sheriff's Office's, Arlington County Detention facility. The facility was last audited in August 2017.

The Auditor sent a notice by email to the agency's PREA Coordinator on June 23, 2020. The notice contained information and an address, informing inmates how to confidentially contact the Auditor prior to arriving on site. This notice was emailed in an English and Spanish version. The notice informed the inmate population their communications to the Auditor's address would be treated as confidential correspondence by facility staff. The notice required an agency representative's name and date upon posting the notice in areas throughout the facility. While touring the facility the Auditor observed all notices were posted on July 2, 2020 in all inmate living units by the PREA Compliance Manager. Notices were posted in various other areas where inmates frequent. The Auditor received no correspondence from an inmate prior to arriving at the facility.

The Auditor received the ACSO completed Pre-Audit Questionnaire through the Online Audit System (AOS). The Pre-Audit Questionnaire was completed and the Auditor began reviewing the material on August 1, 2020. The information sent by the agency's PREA Coordinator and PREA Compliance Manager included; but was not limited to: policies, procedures, annual reports, organizational chart, forms, training materials, educational materials, staffing plan, population reports, tracking mechanisms, contractor and volunteer records, Memorandums of Agreement, investigative records, medical documentation, inmate records, contracts, brochures and Inmate Handbook.

Once a contract between the PREA Auditors of America and the Arlington County Sheriff's Office was signed and the Pre-Audit Questionnaire was completed, the Auditor began communications with the ACSO PREA Compliance Manager through email. Prior to arriving on site, the Auditor asked questions and specifically requested additional information. The ACSO PREA Compliance Manager responded quickly to communications from the Auditor. The Auditor maintained communications with the PREA Compliance Manager prior to arrival and after completing the on-site portion of the audit. After leaving the facility the Auditor requested additional documents and other relevant information from the PREA Compliance Manager. The PREA Compliance Manager remained very responsive to the Auditor.

The Auditor conducted a thorough review of the agency's policies and procedures. During a review the Auditor discovered several areas that were addressed with the agency. The agency reviewed the findings and made several revisions to its policies. The Auditor was sent a copy of the revisions along with the Special Directive notice sent to all staff regarding the policy revisions. Details of the Auditor's findings and the facility's revisions are specified in the applicable standards in this report.

The Auditor observed the facility has a Memorandum of Agreement with Doorways for Women and Families for community support services. The Auditor requested the contact information for Doorways and was provided the information by the ACSO PREA Compliance Manager while on site. The Auditor contacted a representative from Doorways. An interview with a representative from Doorways was conducted by telephone. The Auditor conducted a telephone interview to determine the types of services provided by Doorways for Women and Families. Details of the telephone interview are included in the relevant standards in this report.

The Auditor discovered the ACSO maintained a Memorandum of Agreement with the Inova Ewing Forensic Assessment & Consultation Teams Department (FACT). The contact information was not included in the OAS. The Auditor requested the contact information of the FACT. The PREA Compliance Manager provided the contact information while on site. The Auditor contacted the SANE and conducted a formal interview through the telephone. The Auditor familiarized himself with the memorandum prior to the telephone interview. The interview provided the Auditor with an understanding of the level and scope of services provided to ACSO inmates following an incident of sexual abuse. Details of the telephone interview are provided in the applicable sections of this report.

The Auditor conducted a review of the Arlington County Sheriff's Office website (<https://sheriff.arlingtonva.us>). The website includes information related to the agency's Prison Rape Elimination Act information. The website includes information regarding the agency's zero-tolerance and investigation practices, annual reports, and previous PREA audit report. The public is provided information how to file an allegation of sexual abuse and/or sexual harassment on behalf of an inmate.

The Auditor arrived at the Arlington County Detention Facility the morning of August 17, 2020. The Auditor met with members of the command staff to discuss the audit process. The Auditor was informed operational adjustments have been made in the facility to reduce the risk of COVID-19. The Auditor was provided with and informed to wear an N95 mask while in the facility. The Auditor informed staff informal interviews with inmates and staff would not be conducted while touring the facility. The group was informed any issues discovered would be brought to the attention of the PREA Coordinator and PREA Compliance Manager if/when discovered. The Auditor informed the group he would take a tour of the facility and attempt not to disrupt facility operations as much as possible. The following personnel were in attendance in the meeting:

- Sheriff
- Chief Deputy
- Director of Corrections
- PREA Coordinator
- PREA Compliance Manager

The Auditor was allowed full access to all areas in the Arlington County Detention Facility. The tour included visits to all inmate housing units, administrative areas, intake, property, control center, visitation, recreation areas, medical, commissary, laundry, library, and food service. While touring the facility the Auditor observed for blind spots, opposite gender announcements, overall supervision level, staff interactions with the population and camera placements throughout the facility. The Auditor observed posted PREA materials while touring the facility.

During the facility tour, the Auditor observed staff making security rounds, staff interacting with the inmate population, medical practitioners performing services, intake operations, inmates working in food service and laundry, and male and female staff making opposite gender announcements before entering

opposite gender housing units. The Auditor observed all inmate restroom and showers to ensure inmates could utilize the restroom and take a shower without staff of the opposite gender seeing the inmate fully naked.

The Auditor conducted a review of supportive documentation provided by the PREA Compliance Manager. Supportive documentation included; policies, procedures, staffing plan, brochures, handbooks, educational video, training records, employee, contractor and volunteer records, medical records, inmate records, investigative files, logbooks, and other relevant documents. The Auditor reviewed supportive documentation to determine the facility's level of compliance in prevention, detection, and response to sexual abuse and sexual harassment, training and education, risk screening, reporting, investigations, inmate discipline, medical and mental health care, and data collection, review and reporting practices.

The Auditor requested additional supportive records from the PREA Compliance Manager. The Auditor requested 15 randomly chosen and 15 specifically targeted inmate medical and classification records, all staff, contractor and volunteer training records, and 15 randomly chosen HR records. The Auditor requested to formally interview 20 of the inmates whose files were chosen for review. While on site, the Auditor visited with day and night shifts.

Formal interviews were conducted with randomly and specifically chosen inmates. Due to current operational adjustments, the Auditor conducted formal interviews with inmates by video. The facility provided the Auditor a private room and a laptop computer to ensure the interviews were not recorded or monitored. The Auditor conducted formal interviews with 20 inmates. Inmates specifically chosen for interviews included 4 who reported sexual victimization, 1 who identified as transgender, 3 who identified as gay/lesbian, 1 with a mental disability, 1 who were Limited English Proficient, 2 with a physical disability and 3 who reported an incident of sexual abuse. During interviews with randomly selected inmates the Auditor discovered additional inmates who had been previously victimized, were diagnosed with a mental disability, identified as gay/bisexual/lesbian and had committed a crime of a sexual offense. There were no inmates housed at the facility who were blind or deaf at the time of the audit. The Auditor selected a relevant sample of inmates from various housing units. Adjustments of those chosen for interviews were made during the audit as some inmates opted not to participate in an interview.

Formal interviews were conducted with ACSO staff. The Auditor conducted random formal interviews with 11 staff members and specialized interviews with 19 staff members. Specialized interviews were conducted with HR, Risk Screening, Intermediate/Higher Level, Intake, Investigators, Incident Review Team Member, Retaliation Monitor, Security and Non-Security First Responders, Segregation Supervisor, Mental and Medical Practitioners and Contractors. All formal interviews were conducted in a private area of the facility.

The Auditor concluded the onsite portion of the audit on August 19, 2020. The Auditor met with members of the agency's command staff. The Auditor informed personnel of immediate findings after touring the facility, interviewing staff, interviewing inmates and reviewing documentation. The group was informed the Auditor still had more documentation to review after leaving the facility. The Auditor stated any recommendations and findings would be documented in the Auditor's report. It was explained that recommendations made by the Auditor were recommendations only and not required to enact.

The Auditor informed the group he may contact the PREA Compliance Manager for additional information and documents after leaving the facility. Facility staff were thanked for their display of professionalism with the Auditor while on site. The following were in attendance:

- Sheriff
- Chief Deputy
- Director of Corrections
- Director of Judicial Services
- Assistant Director of Security Operations
- PREA Coordinator
- PREA Compliance Manager

## AUDIT FINDINGS

### Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Arlington County Detention Facility is operated by the Arlington County Sheriff's Office. The facility is located at 1425 N. Courthouse Road, Arlington, VA 22201. The facility is an approximate 5 minute drive to the Pentagon and approximately 10 minutes to The White House. The ACDF is a modern style "high rise" facility with twelve floors. Floors 5,7,9 and 11 have housing units that are two tiers in height. Floors 6,8,10 and 12 are the mezzanine level of each housing unit. The Arlington County Detention Facility houses adult male and female, State, local and Federal inmates. The facilities rated capacity is 716 and houses minimum, medium and maximum custody inmates.

Facility housing units on floors 5, 7 and 9 are identical construction with the exception of housing unit A on the 5th floor. Each floor has three, two tiered housing units that are known as A, B and C units. Each housing unit has 48 "double bunked" cells. There is a toilet and sink inside each cell. Showers in the housing units are adjacent to the dayroom. Each shower has a door to ensure staff of the opposite gender cannot view the inmate fully naked. Dayrooms have tables, chairs, kiosk, telephones and televisions for inmate usage. There are washing machines and dryers so each detainee has the ability to wash and dry their clothes, linens and blankets. The design of Housing unit A on the 5th floor is similar except it is divided into three distinct sections and has 46 "double bunked" cells. The facility houses special management inmates in housing unit A. Each housing unit on floors 5, 7, and 9 have a shared recreation yard. Each floor has a centralized programs center with a classroom, Video TeleConferencing (VTC) room, barber shop and offices. Each housing unit, recreation yard and programs center is monitored by cameras. Staff provide direct supervision of the inmate population.

Housing unit A on the facility's 11th floor is two tiers in height and has 32 single cells. Each cell has a toilet and sink inside. Toilets are adjacent to the dayroom and have doors so staff cannot see the inmate fully naked. Inmates have access to tables, chairs, telephones, televisions and a shared recreation yard. There are cameras that monitor inmate activity in the dayroom. Staff provide direct supervision in the housing unit.

There is a two tiered Protective Custody housing unit located on the 11th floor. The PC unit has 8 single cells. Inmates have access to tables, chairs, television, and telephones in the dayroom. Showers are adjacent to the dayroom and are protected from full view by a door. Housing unit B on the 11th floor houses those with mental illness. The unit is two tiered in height and has 21 single cells. Inmates have access to telephones, television, tables and chairs. The unit is monitored by cameras while staff provide direct supervision of the inmates. Housing unit C has 8 single cells and inmates have access to the same equipment as those in other housing units. Cameras monitor the dayroom and staff provide direct supervision. There are 3 crisis cells centralized on the 11th floor. Two of the cells are "dry cells." One cell has a toilet and sink inside. Inmates shower in an adjacent shower that is protected from full view. The programming center on the 11th floor has been converted for the Department of Human Services staff office areas.

The facility's administrative, booking/processing and kitchen are located on the ground floor. The processing and booking are two distinct areas. There are 3 multiple occupancy cells in the processing

area. Each has a toilet that are blocked from view with a 1/2 wall. None of the cells have cameras inside. There are cameras that monitor the general processing area. The booking area has 6 multiple occupancy cells. Inmates have access to a restroom in the booking area that are protected from view with a door. There are 2 showers protected from view by a door. Most inmates are placed in a general seating area while being booked into the facility. There is a television that plays the orientation video to the inmates. A door separates another area that has 9 individual cells. These cells generally remain vacant. There are cameras that monitor all areas in booking.

The facility's kitchen is monitored by cameras. An officer is stationed to provide supervision in the kitchen while inmates are working. The kitchen office is centralized and has large windows to allow sight into the kitchen area. Inmates have access to a breakroom where they consume meals. The kitchen has a bakery, storage, dish washing area, pots and pans area, prep area, dry storage, two walk-in freezers, two walk-in refrigerators, tray washing area and a loading dock. The kitchen is large and open to allow sight throughout. Food services are contracted with Aramark who employs a Food Service Manager with two Food Service employees. There are 9 inmate workers on each shift in the kitchen.

The facility's medical, library, visitation and multipurpose room are located on the 2nd floor. The facility contracts medical and mental health services with Corizon Correctional Healthcare. The Arlington County Department of Human Services provides additional mental health services in the facility. The medical area has 4 examination/treatment rooms, medical storage, medical records, dialysis room, dental lab with 2 chairs and offices. There is a male and female housing area in the medical section. Both are divided by a wall so male and female inmates cannot see or interact with each other. There are 8 single cells in the male side and 4 single cells in the female side. The facility has one male negative pressure and one female negative pressure cell. An officer supervises inmates in the medical area. There are cameras that monitor the medical area and medical housing area. No cameras are located in cells. Inmates have access to showers adjacent to the medical area that are protected from view with a door.

The library has books and computers for legal purposes. There are three stationary computers and one mobile computers with Lexis Nexis. Cameras are positioned in the library to monitor activities. In addition to accessing the library, inmates may check out books from a rolling cart in their housing units. The library is operated by the Arlington County Public Library staff. Those staff attend facility training prior to working in the facility's library. The facility's visitation area on the 2nd floor has a male and female side. The female visitation has 3 attorney visiting booths, 2 personal visiting booths and 3 non-locking booths. The male visitation has 3 attorney visiting booths, 2 personal visiting booths and 7 non-locking booths. Both visitation areas are monitored by cameras.

The facility's 3rd floor is unfinished. The 3rd floor is used as a storage area. The facility's mechanical room is located on the 4th floor. Inmates are not allowed in the mechanical room.

Supervision in the facility is conducted directly. Staff conduct twice hourly security rounds throughout all facility areas. Facility supervisors are required to tour all facility areas on each shift. Facility cameras monitor hallways, corridors, visitation, kitchen, recreation yards, laundry, sallyports, housing units, booking, processing, medical, programs centers, library, and reception area. All facility cameras are accessible and monitored by the facility's main control center.

On the first day of the audit there were 242 inmates incarcerated in the Arlington County Detention Facility. There were 214 males and 28 females. The age range of the population was 18-75.

## AUDIT FINDINGS

### Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy ). 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.

<b>Number of standards exceeded:</b>	3
<b>Number of standards met:</b>	42
<b>Number of standards not met:</b>	0

The Auditor reviewed the facility's previous PREA audit report prior to arriving at the Arlington County Detention Facility. The previous audit determined the facility complied with all PREA standards and was determined to exceed 4 standards. The previous Auditor determined the facility exceeded PREA standards 115.16 - Inmates with disabilities and inmates who are limited English proficient, 115.41 - Screening for risk of victimization and abusiveness, 115.31 - Employee training and 115.65 - Coordinated response. During this audit, the Auditor determined the facility revised policies and was proactive in updating such to ensure the agency complies with the PREA standards.

The Auditor determined the Arlington County Sheriff's Office has developed appropriate policies and procedures that aid in prevention, detection and response to acts of sexual abuse and sexual harassment. The Auditor found the facility's staff are following the agency's policies and procedures related to sexual abuse and sexual harassment. The ACSO training materials include elements from the agency's policies and procedures and PREA standards. The Auditor found inmates feel safe in the Arlington County Detention Facility. The ACDF maintains 15 housing units to ensure likely abusers can be separated from those identified at risk of sexual victimization. Interviews with staff and contract personnel revealed they have been trained and understand their responsibilities in response to acts of sexual abuse and sexual harassment.

The Auditor was provided a detailed tour of the Arlington County Detention Facility and observed staff and contractors interacting professionally with the population. A review of files and other documents revealed facility personnel are documenting actions in accordance with the ACSO policies and procedures related to sexual abuse and sexual harassment. Formal interviews with inmates reveal they are confident in staff's abilities to respond to and protect them from acts of sexual abuse. Numerous inmates informed the Auditor facility staff are very professional, do not tolerate acts of sexual abuse or sexual harassment and attempt to help the inmate population. Formal interviews with staff revealed they are knowledgeable in the policies and procedures to prevent, detect and respond to incidents of sexual abuse. The Auditor determined the Arlington County Sheriff's Office has successfully created a zero-tolerance culture in the Arlington County Detention Facility. Interviews with the ACSO command staff reveal they are supportive of PREA standards and staff's input and efforts to prevent, detect and respond to sexual abuse and sexual harassment.

The Auditor found the facility's command staff make unannounced rounds throughout all facility areas to

deter sexual abuse and sexual harassment. The ACSO command staff have an open-door policy and staff feel they can approach and talk to command staff. Command staff have a proactive approach towards compliance with the Prison Rape Elimination Act standards. Command staff welcome input from other staff to ensure inmates are protected from acts of sexual abuse and sexual harassment.

The Auditor determined the inmate population had been appropriately educated by facility staff. The inmate population was found knowledgeable in the agency's prevention, detection and response efforts towards sexual abuse and sexual harassment. Inmates understood the various ways of reporting sexual abuse and sexual harassment and all inmates informed the Auditor they preferred reporting such directly to a staff member. Each inmate is provided information and an education upon arrival at the ACDF. The facility provides readily available information to inmates in the form of posters and handbooks. The population informed the Auditor they feel safe in the ACDF.

The ACSO staff are appropriately screening each inmate during booking to determine their level of risk for abusiveness or victimization. The risk screening allows the facility's Case Manager to identify such inmates to ensure they are protected from abuse in determining housing, programs, education and work opportunities. The facility is conducting reassessments of inmates within 30 days of arrival, after an incident of sexual abuse, referral and/or upon receiving additional information that bears on the inmate's assessment.

The facility's investigators are conducting appropriate investigations following an allegation of sexual abuse and sexual harassment. The Auditor observed evidence facility investigators understand the requirement to refer criminal acts of sexual abuse to the Arlington County Police Department for criminal investigation. Investigations conducted at the facility appear objective and are conducted promptly and thoroughly. Investigators are informing inmates of investigative determinations at the conclusion of each investigation. The facility conducts an incident review of all allegations within 30 days of the conclusion of the investigation.

The Auditor determined the facility meets the requirement of each standard. The Auditor made several recommendations to the facility in an effort to strengthen its level of compliance. Details of recommendations made are included in the applicable section of this report. The facility made several corrective actions to comply with provisions of these standards. The Auditor determined the facility has appropriate policies, procedures and practices for prevention planning, response planning, training and education, screening for risk of victimization and abusiveness, reporting, response following a report, investigations, discipline, medical and mental health care, and data collection and review of sexual abuse and sexual harassment incidents.

## 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	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office (ACSO) has established a policy that prohibits all forms of sexual abuse, staff sexual misconduct and sexual harassment. The policy stipulates the ACSO has a zero-tolerance and does not condone nor tolerate any type of inmate rape, sexual assault, sexual misconduct, consensual sexual contact, sexual abuse and sexual harassment toward any inmate. The ACSO policy includes its prevention, detection, reporting and response strategies. The policy includes but is not limited to, the following strategies:</p> <ul style="list-style-type: none"> <li>● Mandating a zero-tolerance;</li> <li>● Providing training;</li> <li>● Objective jail classification procedures;</li> <li>● Effective control and supervision of inmates;</li> <li>● Confidential disclosures;</li> <li>● Conducting investigations;</li> <li>● Employing a PREA Coordinator;</li> <li>● Following a uniform evidence protocol;</li> <li>● Crisis intervention services;</li> <li>● Multi-disciplinary meetings;</li> <li>● Data collection.</li> </ul> <p>The agency has a policy that includes sanctions for staff and inmates who have been found guilty of participating in prohibited behaviors. Sanctions for inmates are outlined in the Rules of Conduct policy. Staff sanctions are outlined in the Sexual Misconduct Against Inmates policy.</p> <p>The Arlington County Sheriff's Office has appointed a PREA Coordinator and a PREA Compliance Manager. The PREA Coordinator oversees the Sheriff's Office efforts towards compliance with the Prison Rape Elimination Act. The PREA Coordinator serves as the agency's Assistant Director of Professional Compliance and is employed at the rank of Captain. The PREA Coordinator reports to the Director of Corrections. The PREA Coordinator has sufficient time and authority to develop, implement and oversee the Arlington County Sheriff's Office efforts to comply with the Prison Rape Elimination Act.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 5-229 Inmate Sexual Misconduct/Sexual Assault, pg. 26</p> <p>Policy - 11-100 Rules of Conduct, pg. 4-8</p> <p>Policy - 11-509 Sanctions for a Guilty Plea or Finding of guilt in a Disciplinary Hearing, pg. 9-10</p> <p>Policy - 2-307 Sexual Misconduct Against Inmates, pg. 10-11, 13</p>

ACSO Organizational Chart

PREA Coordinator Position Description

Interviews with Staff

Interviews with Inmates

**Analysis/Reasoning:**

The Auditor conducted a review of the Arlington County Sheriff's Office policies and procedures. The agency's policy includes its prevention, detection and response approaches towards sexual abuse and sexual harassment of inmates. The ACSO policy includes sanctions for staff, contractors, volunteers and inmates who are found to have participated in an act of sexual abuse and/or sexual harassment.

The Auditor reviewed the ACSO Organizational Chart. The chart outlines the agency's PREA Coordinator position. The responsibility for PREA compliance has been appointed to the Assistant Director of Professional Compliance. The Assistant Director of Professional Compliance reports to the Director of Corrections and has the ability to report directly to the Sheriff if needed.

The agency has created a position description for the PREA Coordinator. The position description includes major duties, specific tasks, minimum qualifications, education and experience, and special requirements. The position description stipulates the PREA Coordinator is responsible for the overall responsibility developing, implementing, and overseeing the Arlington County Sheriff's Office program to comply with the Prison Rape Elimination Act.

The Auditor conducted an interview with the agency's PREA Coordinator. The PREA Coordinator explained his ability to develop, implement and oversee agency PREA efforts. The PREA Coordinator informed the Auditor he has a PREA Compliance Manager to assist in agency compliance efforts. The Auditor determined the PREA Coordinator has sufficient time and authority to oversee agency efforts to ensure compliance. The Auditor conducted an interview with the PREA Compliance Manager. The PREA Compliance Manager informed the Auditor she has sufficient time and authority to complete her compliance tasks. The PREA Compliance Manager responded quickly to the Auditor's questions and requests prior to, during and after the auditor conducted the site visit. Both the PREA Coordinator and PREA Compliance Manager were knowledgeable regarding the requirements of the Prison Rape Elimination Act and the agency's efforts to comply with such.

The Auditor conducted interviews with inmates. Interviews with inmates reveal they are confident in staff's ability to respond to allegations of sexual abuse and sexual harassment and to maintain confidentiality with the information. During interviews with inmates the Auditor determined staff take the prevention, detection and response to sexual abuse seriously. Inmates informed the Auditor staff do not tolerate such acts. The Auditor asked each inmate interviewed if they felt safe in the facility. All inmates informed the Auditor they felt safe in the facility. The overall responses from the inmates interviewed were that staff are professional, respectful and helpful to the population. All inmates interviewed informed the Auditor they were comfortable reporting allegations verbally to a staff member and were confident the staff member would ensure the allegation would be taken serious and handled appropriately.

The Auditor conducted formal interviews with randomly selected staff. The Auditor determined the facility's staff were well trained and had retained the knowledge provided through ACSO training efforts. Each staff member understood the agency's policies and procedures towards preventing, detecting and responding to acts of sexual abuse and sexual harassment. The facility has provided training each year to its staff and contractors. Each staff member had been trained within the previous 12 months and most had received training more than once during that time period. Staff informed the Auditor they receive PREA information during shift briefings throughout the year.

The agency's command staff supports subordinate staff efforts and ideas towards compliance with the Prison Rape Elimination Act. Command staff maintain an "open door" policy and staff feel comfortable they can approach and speak to command staff. The agency's command staff, including the Sheriff, routinely tour the Arlington County Detention Facility.

**Conclusion:**

The Auditor conducted a thorough review of the agency's policies and procedures, organizational chart, position description and conducted interviews with staff and inmates. The Auditor determined the Arlington County Sheriff's Office has developed an appropriate zero-tolerance policy that includes its prevention, detection and response approaches towards allegations of sexual abuse and sexual harassment. The agency has designated an appropriate staff member to develop, implement and oversee agency efforts. The Arlington County Sheriff's Office has successfully created a zero-tolerance culture. The culture appears to have resonated from staff to the inmate population. The Auditor determined the ACSO exceeds the requirements of this standard. In addition to the PREA Coordinator position, the agency has appointed a PREA Compliance Manager, even though the appointment is not required by this standard.

115.12	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington Sheriff's Office reported it does not contract for the confinement of its inmates.</p> <p><b>Evidence Relied Upon:</b></p> <p>Interviews with Staff</p> <p><b>Analysis/Reasoning:</b></p> <p>At the time of the audit the Arlington Sheriff's Office had not entered into a contract for the confinement of ACDF inmates with another governmental or private agency.</p> <p>The Auditor conducted formal interviews with randomly selected and specifically chosen staff. No staff member, including command staff, was aware of an existing contract with any private or government agency to confine inmates for the Arlington County Sheriff's Office.</p> <p><b>Conclusion:</b></p> <p>The Auditor conducted interviews with agency staff. No evidence was found that the Arlington County Sheriff's Office contracts for the confinement of its inmates. The Auditor determined the Arlington County Sheriff's Office meets the requirements of this standard.</p>

115.13	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office has a policy that requires the agency make its best efforts to comply on a regular basis with its staffing plan. The ACSO policy requires the plan is developed with the inclusion of the following:</p> <ul style="list-style-type: none"> <li>● Generally accepted detention and correctional practices;</li> <li>● Any judicial findings of inadequacy;</li> <li>● Any findings of inadequacy from Federal investigative agencies;</li> <li>● Any findings of inadequacy from internal or external oversight bodies;</li> <li>● All components of the facility's physical plant (including "bind-spots" or areas where staff or inmates may be isolated);</li> <li>● The composition of the inmate population;</li> <li>● The number and placement of supervisory staff;</li> <li>● Institutional programs occurring on a particular shift;</li> <li>● Any applicable State or local laws, regulations or standards;</li> <li>● The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and</li> <li>● Any other relevant factors.</li> </ul> <p>The Staffing Management policy requires the facility document and justify all deviations from the staffing plan in circumstances in which the staffing plan is not complied with. The policy requires the staffing plan be reviewed annually, in consultation with the PREA Coordinator. The annual review is conducted to assess, determine, and document whether adjustments are needed to the plan.</p> <p>The Supervision of Staff policy requires supervisors initial the Post Log Book each time they complete a routine or unannounced security round. Assistant Directors and high level administrative staff are required to visit living and activity areas at least weekly. The policy stipulates Shift Commanders conduct an unannounced visit to each post at least once each shift. Zone supervisors are required to visit each post in their assigned zone at least twice each shift, one of which must be a documented unannounced round. The policy prohibits staff from alerting other staff that supervisory rounds are occurring, unless the announcement is related to a legitimate operational function of the facility.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 2-901 Staffing Management, pg. 1-2</p> <p>Policy - 9-201 Supervision of Staff, pg. 2</p> <p>Staffing Plan</p> <p>Staffing Plan Analysis</p> <p>Staffing Plan Annual Review</p>

Position Control Report

ACDF Phase Operations

Day/Night Shift Staffing

Shift Commander Reports

Housing Unit Logs

Activity Logs

Interviews with Staff

Interviews with Inmates

Observations

**Analysis/Reasoning:**

The Auditor reviewed the ACSO staffing plan. The staffing plan allows for 289 total positions for the Arlington County Sheriff's Office; 238 security and 51 civilian positions. There are 217 positions allocated to the Arlington County Detention Facility. The facility is allocated 181 security and 36 civilian positions. The ACSO staffing plan was created utilizing the staffing model established by the Virginia Department of Corrections with the assistance of the Compensation Board of Virginia. The average daily population in 2019 was 366 inmates. The population on the first day of the audit was 242.

At the time of the audit the ACSO had 15 security and 2 civilian vacancies in the Arlington County Detention Facility. The Auditor determined the following staffing ratios based on the current population number and number of allocated staff positions:

- 1 staff member for every 1.1 inmate
- 1 security staff member for every 1.3 inmate

The Auditor determined the following staffing ratios based on the current number of staff and the current population of the facility:

- 1 staff member for every 1.2 inmate
- 1 security staff member for every 1.5 inmate

The Auditor reviewed a shift roster from July 30, 2020 and calculated the staffing ratio for the shift. The staffing ratio based on the population count for July 30, 2020 was 1 staff member for every 3.8 inmates.

The staffing plan reviewed by the Auditor includes provisions for administrative, support and security positions on all shifts in each facility area. The facility utilizes overtime to ensure vacant positions are filled for each shift. The facility's security staffing level was maintained at 8% below capacity at the time of the audit. The overall staffing level for the Arlington County Sheriff's Office was 8% below capacity at the time of the audit. The ACSO staffing plan appears adequate to provide protection to inmates from sexual abuse.

The Auditor reviewed Shift Commander Reports from each quarter completed in the previous 12 months. Shift Commander Reports include daily staff vacancies on each shift and account for the vacancies. The Shift Commander Report requires the Shift Commander document the staff working overtime. The Shift Commander notates the reason for staff vacancies on the report. The Auditor observed vacancies for the following reasons: Vacation, FMLA, Military Leave, Training, Details, Hospital, and Sick Leave. The Shift Commander Report notates the number of staff working overtime to fill vacant positions. The Auditor observed the total number of staff assigned to the shift and the actual number of staff working during the shift on each report.

The Auditor reviewed the Arlington County Sheriff's Office annual staffing plan review. The Staffing Plan Review was conducted in July 2020. The annual review was conducted by the Director of Corrections, Director of Judicial Services, Assistant Director of Corrections, Assistant Director of Inmate Services, PREA and Accreditation Manager and the Accreditation Manager (PREA Coordinator). The Auditor observed the participants reviewed, considered and discussed each topic as bulleted above in the Staffing Plan Analysis. The ACSO staff review the staffing plan annually.

The Auditor reviewed samples of facility Daily Activity Logs from the previous 12 months. Facility supervisors are required to conduct unannounced rounds through all facility areas. Supervisors document their unannounced rounds in the Daily Activity Log. The Auditor reviewed Daily Activity Log entries. The Auditor observed unannounced rounds documented by supervisors in the logs. While touring the facility the Auditor reviewed active Daily Activity Logs on staff computers. Evidence was viewed of supervisors documenting unannounced rounds.

During a tour of the facility the Auditor observed staff making security rounds in living units and support areas of the facility. Staff were present in all areas toured by the Auditor. Security and contract personnel were observed interacting with the inmate population. The Auditor observed camera placements throughout the facility. Cameras were strategically placed to assist in the prevention, detection and response to incidents of sexual abuse. The agency has added cameras throughout the facility since the last PREA audit. The additional cameras were added to increase video monitoring capabilities. The Auditor observed supervisors making unannounced rounds throughout various facility areas, to include housing units.

The Auditor conducted formal interviews with staff and supervisors from various shifts. Staff were asked if supervisors conduct unannounced rounds throughout the facility. Each staff stated supervisors do make unannounced rounds through the facility. Staff were asked if anyone ever alerts them when supervisors are touring the facility. No staff member had ever been alerted when supervisors were making unannounced rounds. Supervisors were asked if they were required to make unannounced rounds. The Auditor was informed they are required to make unannounced rounds through all facility areas. Each supervisor was asked how they keep staff from alerting other staff when they are making unannounced rounds. The Auditor was informed policy prohibits staff from doing so. Supervisors stated they do not create a pattern in the manner they make rounds in the facility. The Auditor was informed supervisors take different routes and make their rounds at different times.

Each supervisor was asked what actions they take if they were to catch a staff member informing others they were conducting unannounced rounds. Supervisors informed the Auditor they would talk with the staff member about the importance of the unannounced round and

the reason for it. Each was asked what they would do if they caught the person a second time. Supervisors stated they would formally discipline the staff member. Line staff interviewed were aware the ACSO prohibits them from alerting other staff of supervisory rounds.

The Auditor conducted formal interviews with inmates. Inmates were asked if supervisors and other staff announce their presence when entering housing units. Inmates informed the Auditor females and males announce their presence when entering opposite gender housing units. The Auditor observed notices on inmate housing unit doors requiring staff of the opposite gender to announce their presence when entering.

The facility was under no consent decrees, and had no judicial findings of inadequacies, or findings of inadequacies from a federal, internal, or external oversight body at the time of the audit.

The Auditor did not identify any "blind spots" that are not addressed in any way by the facility while touring.

**Conclusion:**

The Auditor concluded the facility has an adequate staffing plan to ensure the protection of inmates from sexual abuse. The Auditor reviewed policies, procedures, staffing plan, staffing plan review, rosters, Shift Commander Reports, Daily Activity Logs, interviewed staff and inmates and made observations to determine the facility meets the requirements of this standard.

115.14	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office policy is not to house juvenile inmates in the Arlington County Detention Facility other than on a temporary basis not to exceed eight hours. The agency's policy is to house inmates under the age of 18 who have been certified by the Courts in protective custody. The facility will not place a youthful inmate in a housing unit in which they will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping quarters.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 6-203 Juvenile Bookings, pg. 3</p> <p>Policy - 8-703 Reasons for Youthful Offender Status, pg. 3</p> <p>Policy - 8-704 Conditions of Youthful Offender Custody, pg. 3, 6-7</p> <p>Age at Commitment Reports</p> <p>In/Out Report Summary</p> <p>Observations</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the Age of Commitment Report and In/Out Summary Reports for the previous 12 months. A review of the reports revealed the Arlington County Detention Facility has not incarcerated a youthful inmate in the previous 12 months.</p> <p>ACDF personnel are required to escort youthful inmates when they leave the housing unit for any reason. Staff are prohibited from leaving a youthful inmate in any area with other non-youthful inmates. When a youthful inmate is booked into the facility staff complete a watch log and maintain the log for the first 72 hours of the inmate's incarceration. In the first 72 hours of the youthful inmate's incarceration the Case Manager, Mental Health Staff and Housing Unit Deputy work closely to monitor the youthful inmate's adjustment. The group will determine if the watch log should continue or be discontinued.</p> <p>A youthful inmate is supervised by Housing Unit Deputies 24/7. Deputies in the housing units conduct a minimum of one security round every thirty minutes. Adult workforce inmates are prohibited from entering the protective custody cellblock. All deputies and classification staff who work with youthful inmates are provided training and updates in the developmental, safety, and other specific needs of youthful inmates.</p> <p>The Auditor toured the housing unit where the facility would house a youthful inmate. The housing unit provides sight and sound separation from adult inmates. While the youthful inmate is participating in recreation a staff member remains with the youthful inmate. No adult</p>

offenders are in the recreation area while the youthful inmate is participating in recreation. Education and programs are available to the youthful inmate.

Interviews with staff reveal they have not received a youthful inmate in "years." It was explained to the Auditor that youthful inmates generally are not brought to the facility. When they are brought to the facility they are transported out within hours. Youthful inmates do not leave the processing area. There are cells in the processing area that would allow sight and sound separation from adult inmates. Every staff member interviewed by the Auditor informed the facility does not house youthful inmates.

**Conclusion:**

The Auditor reviewed the Arlington County Sheriff's Office policies, procedures, age at commitment reports, in/out summary reports, made observations and conducted interviews with staff and determined the agency meets the requirements of this standard.

115.15	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office has a policy that prohibits cross-gender strip searches of inmates. The policy requires strip searches be conducted in an area where the search cannot be observed by persons not physically conducting the search except in the case of an overriding security need. The agency allows staff of the same gender of the inmate to conduct a pat search at any time. Cross-gender pat searches may be conducted upon a determination of reasonable suspicion the inmate possesses hidden serious contraband. Cross-gender pat searches of female inmates is not permitted except in exigent circumstances. Absent an exigent circumstance, the deputy is required to isolate the opposite gender inmate and either contact another deputy of the same gender of the inmate or contact the Zone Supervisor to arrange for a pat search. The agency requires staff to document all cross-gender searches. The opposite gender search is included in the Post Logbook and a Strip Search Documentation Form is completed and attached to the Master Facility Headcount Sheet.</p> <p>The ACSO requires body cavity searches of inmates be conducted by a trained medical practitioner at the hospital. Staff are required to seek consent from the inmate agreeing to the body cavity search upon approval of the Director of Corrections or higher official.</p> <p>Agency policy is to provide programs and services to inmates without any form of unlawful discrimination. The facility is encouraged to provide co-educational programming to provide an atmosphere similar to activities provided in the public. Policy requires male and female inmates be provided housing, programs, services, and recreational activities that are comparable. The ACDF allows inmates the opportunity to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing them in a state of undress, except during mandatory documented surveillance tours.</p> <p>The agency's Intake Screening policy requires staff to place an inmate who's gender-related expression, identity, appearance, or behavior that differs from their biological sex in a holding cell by themselves during the booking process. Staff are then required to perform the following to determine the sex of the inmate:</p> <ul style="list-style-type: none"> <li>● Review commitment documents for gender assignment or notification that identifies the inmate as transgender or vulnerable;</li> <li>● Ask the inmate for verification of genitalia status; and</li> <li>● If the sex cannot be determined or the inmate refuses to cooperate, notify a supervisor immediately so the inmate can be escorted to the medical unit for a physical examination and gender determination.</li> </ul> <p>Staff are informed in the agency's policy to ask questions in a respectful manner to preserve confidentiality as well as human dignity and avoid subjecting the inmate to abuse, humiliation or ridicule. Policy requires inmates be called by their last names without reference to gender specific identifiers or other gender specific terms used in addressing a person.</p>

Policy requires facility supervisors verbally announce that ACSO staff and supervisors of the opposite gender will enter the unit during the shift. Intake staff are required to explain this process to each inmate entering the facility. Policy requires all persons entering a housing unit to announce their gender when entering.

**Evidence Relied Upon:**

Policy - 9-601 Pat Searches, pg. 1-2

Policy - 9-602 Strip Searches, pg. 2-3

Policy - 9-603 Body Cavity Searches, pg. 4

Policy 12-202 Equal Access, pg. 1-2

Policy - 9-203 Staff/Inmate Interaction, pg. 6

Policy - 8-901 Intake Screening, pg 3

Opposite Gender Announcement Signs

Shift Rosters

Activity Logs

Field Training Officer Packets

ACSO Special Directive

PREA Training Lesson Plan

Observations

**Analysis/Reasoning:**

The ACSO houses both male and female inmates. The Auditor reviewed facility shift rosters. The facility maintains male and female staff on each shift to ensure inmates are searched by a staff member of the same sex. The Auditor conducted formal interviews with male and female inmates in the facility. Female inmates were asked if they had been pat-searched or strip searched by a male staff member. No female had been strip-searched or pat-searched by a male staff member. The Auditor asked female inmates if a male staff member had ever been present during a strip-search. None could recall such a situation. The facility does not allow female staff to pat-search male inmates. No male inmate interviewed by the Auditor had been pat searched or strip searched by a female staff member. The Auditor asked if a female staff member had ever been present when a male inmate was being strip-searched. No inmate could recall such a situation. Each female inmate was asked if they were ever denied opportunities to attend programs, education or other privileges because there was no female staff member available to conduct a pat search. No female inmate had ever been denied access due to such reasons.

Interviews with male and female inmates reveal they can take a shower, change clothes and use the restroom without security staff of the opposite gender seeing their breast, buttocks or

genitalia. Inmates informed the Auditor staff of the opposite gender announce their presence when entering living units. The Auditor conducted formal interviews with male and female staff members. Each staff member was asked if opposite gender announcements were being made in the housing units. Each staff member informed the Auditor opposite gender announcements are being made when entering any opposite gender housing unit. The Auditor observed a sign posted on the entrance door of each housing unit. The sign notifies opposite gender staff to announce their presence when entering the housing unit. While touring the facility the Auditor reviewed officer activity logs. Activity logs notated opposite gender announcements of all opposite gender staff who entered the housing unit.

The ACDF utilizes a body scanner in the booking area. All inmates entering the facility are required to be scanned by staff. Intake personnel informed the Auditor a same sex staff member reviews the scan of the inmate. The Auditor asked if both male and female staff work in the booking area. Staff informed the Auditor there are males and females that work in the booking area that have been trained to read the scanner on each shift. A review of shift rosters revealed the facility staffs each intake shift with both male and female staff.

The Auditor conducted formal interviews with randomly chosen staff. Each was asked if they had been trained to conduct a pat-search of a transgender and intersex inmate. All staff had been trained and explained the procedures to the Auditor. Transgender and intersex inmates are offered a preference of a male or female to conduct their pat search. Each staff member was asked if he/she would conduct a strip search of the inmate if they were unable to identify the inmate's gender. No staff member stated they would conduct such a search. The Auditor was informed if they were unsure of the inmate's gender they would notify a supervisor and medical personnel.

The Auditor reviewed a facility special directive. The directive was sent to all facility security staff. The directive identifies a transgender inmate and informs security staff that pat-down searches of the inmate will be conducted by female deputies only, absent exigent circumstances. Female staff are informed to use the academy's 'same-sex' technique. The directive informs male staff to use a hand-held metal detector or contact a female deputy as appropriate. The special directive was sent to security staff on January 19, 2020. The transgender inmate had been released from the facility prior to the Auditor's arrival. There were no transgender or intersex inmates incarcerated at the Arlington County Detention Facility at the time of the audit, as such, the Auditor did not conduct an interview with a transgender or intersex inmate.

The facility reported there were no incidents in which a cross-gender strip or pat search was conducted in the previous 12 months. The Auditor asked staff if they had conducted a cross-gender pat or strip search. No staff member had done so. Staff informed the Auditor there is always a male and female staff member on shift to ensure inmates are searched by a same gender staff member. There were no body cavity searches conducted in the previous 12 months.

Facility staff escorted the Auditor on a tour of all facility areas. The Auditor observed the shower and restroom areas in each inmate housing unit. Each housing unit has showers that provide privacy to the inmate. Staff are unable to see the inmate fully naked while taking a showers. Inmates have access to toilets in their cells. While touring the facility the Auditor observed staff making opposite gender announcements when entering housing units. During interviews with inmates, the Auditor was informed staff do make opposite gender

announcements when entering housing units.

Facility training documents were reviewed by the Auditor. The agency's training curriculum includes how to conduct cross-gender searches and searches of transgender and intersex inmates. Training records reveal each agency employee had attended the training. The Auditor observed the training includes how to communicate professionally and respectfully with transgender and intersex inmates. The facility conducts training with its staff on an annual basis.

**Conclusion:**

The Auditor conducted a review of ACSO policies, procedures, training documents, shift rosters, activity logs, special directives, interviewed staff and inmates and made observations. The Auditor concluded the ACSO staff had been appropriately trained to conduct cross-gender searches and how to make opposite gender announcements when entering housing units. Inmates have the ability to shower, change clothes and use the restroom with a level of privacy. Transgender and intersex inmates are treated respectfully and professionally in the facility. The Auditor determined the ACSO meets the requirements of this standard.

115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The ACSO has a policy that ensures inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the ACDF's efforts to prevent, detect and respond to incidents of sexual abuse and sexual harassment. The policy includes those who are deaf or hard of hearing, blind or low vision, or those who have intellectual, psychiatric, or speech disabilities. When necessary, staff are required to provide access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessarily specialized vocabulary. Staff are required to provide written materials in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision.</p> <p>The ACSO's Access to Programs and Services policy requires the facility take reasonable steps to ensure meaningful access to all aspects of the ACDF's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient. Steps to provide interpreters shall include those who can interpret effectively, accurately, and impartially, both receptively and expressively. Policy prohibits the use of inmate interpreters, readers or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety.</p> <p>Prior to arriving on site, the Auditor observed a conflict in the agency's policy, details are included in the "Analysis/Reasoning" section below.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 13-500 Health Care, pg. 1-3</p> <p>Policy - 13-504 Access to Programs and Services</p> <p>Policy - 8-1000 Special Management Inmates, pg 1, 3-8</p> <p>Policy - 7-203 Exceptions to Standard Initial Processing, pg. 4</p> <p>Policy 7-205 Orientation, pg. 5-6</p> <p>Access Interpreting Incorporated Agreement</p> <p>Volatia Language Network Contract</p> <p>ACSO Special Directive</p> <p>Inmate Handbook</p> <p>ADA Inmate List</p> <p>Inmate Orientation Brochure</p>

Inmate Orientation Checklist

Inter-Departmental Memorandums

Staff Interpreter List

**Analysis/Reasoning:**

While reviewing the agency's policy 13-504 Access to Programs and Services, the Auditor observed the following statement, "Reasonable steps are taken to ensure meaningful access to all aspects of the efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where and extended delay in obtaining an effective interpreter could compromise the inmates safety, the performance of first-response duties, or the investigation of the inmates allegations."

The written policy conflicts with PREA standard 115.16 (c) which requires the agency not rely on inmate interpreters, inmate readers or other types of inmate assistants, 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. The Auditor discussed the conflicting statement with the PREA Compliance Manager prior to arriving on site. The PREA Compliance Manager immediately had the agency's policy changed to read, "Reasonable steps are taken to ensure meaningful access to all aspects of the efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. Inmate readers, or other types of inmate assistants are used only in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties, or the investigation of the inmate's allegations."

The previous policy statement was written in error as the facility included both standard requirements in one sentence. The agency's policy now aligns with the requirements of the standard. The Auditor observed a Special Directive issued to all staff regarding the policy revision. The Special Directive was dated August 11, 2020 and sent to all employees. While interviewing randomly selected agency staff each was asked if they rely on inmate interpreters or inmate readers. No agency staff member stated the facility uses inmate interpreters. The Auditor was informed only court certified interpreters and the language line interpreters are used at the facility. The Auditor determined staff had been trained appropriately and concluded the previous policy statement was written in error.

The Auditor conducted a formal interview with a limited English proficient inmate. The inmate was asked how staff communicate with him. He informed the Auditor staff use an interpreter or the telephone to communicate. The Auditor utilized the language line to communicate with the inmate. The inmate was asked if his documentation provided to him by the facility was written in English or Spanish. The inmate informed the Auditor all written information he received was written in Spanish. The inmate stated he watched a video that was played in Spanish. The inmate was knowledgeable regarding the facility's rules against sexual abuse

and sexual harassment. The inmate understood all avenues of reporting allegations of sexual abuse and sexual harassment.

The agency's Inmate Handbook is written in English and Spanish. Each inmate is provided an Inmate Handbook upon arrival at the facility. All materials posted throughout the facility are written in English and Spanish. The facilities PREA video is maintained in English and Spanish and closed captioned in each language. The Case Manager meets with each inmate entering the facility and discusses the agency's PREA information and education material with them. Inmates who have a cognitive disability are met with on an individual basis in an effort to provide the information and education in a manner they can understand.

The ACSO Inmate Handbook includes the following information:

- Zero Tolerance
- Prison Rape Elimination Act description
- Reporting Sexual Misconduct
- Definition of Sexual Misconduct
- Tips for Preventing Sexual Misconduct
- Intervention
- Additional Information
- Grievance Reporting

ACDF inmates who cannot read English or Spanish are provided the information and education through use of a court certified translator or the language line service. The Arlington County Sheriff's Office maintains a contract with the Volatia Language Network for translation services. The agency employs staff who are bilingual and whom are certified as interpreters. The ACSO maintains a contract with Access Interpreting Incorporated for interpretation services. Access Interpreting Incorporated provides Sign Language and verbal interpretation services.

The facility's comprehensive educational video is maintained on a CD. The video is closed captioned for the deaf or hard of hearing. Inmates who are blind or have low vision can hear the information being played through the video. Comprehensive education is provided in the booking area and through televisions in the inmate housing units. In addition to receiving the comprehensive education within 30-days of booking, the video plays on a daily basis in all inmate housing units. Inmates who cannot otherwise benefit from the comprehensive education attend a one-on-one session with a facility staff member.

Each inmate entering the facility receives an Inmate Orientation Brochure. The brochure is written in English and Spanish. In addition to other topics, the brochure includes information informing inmates about the agency's policies regarding sexual misconduct. The brochure is provided by the Intake Officer within minutes of arrival. Inmates informed the Auditor they not only received information during the booking process they were also informed of the policies by a staff member.

There were no inmates housed at the time of the audit who were identified as blind or deaf. The Auditor interviewed an inmate who was identified as hearing impaired. The inmate was able to read the information provided during the booking process. The inmate was able to benefit from the ACSO comprehensive educational video. The inmate informed the Auditor the video was closed captioned. The inmates understood the agency's policies and procedures

towards prevention, detection and response towards sexual abuse. The Auditor attempted to interview an inmate identified with a severe mental illness. The inmate refused to speak to the Auditor. Each inmate interviewed by the Auditor was able to articulate the information provided by ACSO personnel.

The Auditor conducted interviews with randomly selected and specifically chosen facility staff. The Auditor asked staff to explain how blind and deaf inmates benefit from the agency's information and education. Staff stated blind inmates can hear the video and deaf inmates can read the closed captioning. The Auditor was informed the informational brochure is read to blind inmates and to those who cannot read. The Auditor was informed staff use the language line when dealing with non-English speaking inmates. The Auditor asked how staff communicate with inmates who only understand sign language. Staff stated the ACSO maintains a contract for Sign Language interpretive services. The Case Manager makes individual arrangements to ensure any inmate who cannot otherwise benefit from the agency's information and education can do so.

The Auditor conducted a detailed tour of the Arlington County Detention Facility. Observations were made of readily available sexual abuse and sexual harassment materials and posters throughout the facility, including each housing unit and service areas. All posters and posted materials were written in English and Spanish. During interviews with inmates the Auditor discovered all inmates were aware of the posted materials.

The facility maintains an ADA inmate list. The Auditor reviewed the ADA inmate list. Each inmate who is identified with a disability is included on the list. The list includes the inmate's name, alert description and expiration date, as applicable. The Auditor reviewed ACSO Special Directives. The facility issues special directives to staff when an inmate requires any special accommodations. Directives inform staff of the required accommodation and inform staff the inmate must be provided the same opportunities as other inmates.

The Auditor reviewed the records of 30 inmates. All 30 inmates had signed the Inmate Orientation Checklist. The acknowledgement, states, "I have been given a chance to view the Prison Rape Elimination Act video in its entirety and understand everything covered by the video." The Inmate Orientation Checklist requires the staff member to check a box if the orientation video was provided in English/Spanish or the orientation was provided one-to-one by a staff member. The Auditor viewed Inmate Orientation Checklists in which a staff member provided a one-to-one orientation to inmates for various reasons.

**Conclusion:**

The Auditor concluded the facility provides information that ensures equal opportunity to inmates who are disabled. The facility takes reasonable steps to ensure meaningful access to inmates who are disabled. The facility takes reasonable steps to ensure meaningful access to all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment are provided to inmates who are limited English proficient. The Auditor conducted a thorough review of the agency's policies, procedures, contracts, Inmate Handbook, inmate records, Special Directives, ADA Master List, Inmate Orientation Brochure, conducted interviews with staff, inmates and made observations to determine the agency meets the requirements of this standard.

115.17	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office has a policy that prohibits hiring or promoting anyone or enlisting the services of any contractor or volunteer who may have;</p> <ul style="list-style-type: none"> <li>• Engaged in sexual abuse in prison, jails, lockups, community confinement facilities, or other institutions;</li> <li>• 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</li> <li>• Been civilly or administratively adjudicated to have engaged in the activity described above.</li> </ul> <p>The agency has a practice of considering any incidents of sexual harassment in determining whether to promote anyone, or to enlist the services of any contractor, who may have contact with inmates. The ACSO policy requires a criminal background records check be conducted before hiring any new staff member or contractor who may access the Courthouse and/or Detention Facility. Background checks are conducted minimally every five years of all contractors and employees who may have contact with inmates. Policy also requires the agency 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.</p> <p>The Arlington County Sheriff's Office policy is to ask all applicants and employees who may have contact with inmates about possible previous misconduct either in applications or interviews for hiring or promotions. The agency has a policy that stipulates, "Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination."</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 2-102 Background Investigations, pg. 3-4</p> <p>Policy - 2-301 Code of Ethics/Conduct, pg. 4</p> <p>Annual Evaluation Affirmations</p> <p>Sexual Misconduct Information Release</p> <p>Background Information Summaries</p> <p>Inter Office Memorandums</p> <p>Background Checks Audit</p> <p>Interviews with Staff</p>

## Interviews with Contractors

### **Analysis/Reasoning:**

The Auditor reviewed the ACSO Annual Evaluation Affirmation-PREA form. Each applicant affirms specific information related to sexual abuse and sexual harassment prior to selection and current employees affirm annually. The Annual Evaluation Affirmation-PREA form states, "I understand, while being employed with the Arlington County Sheriff's Office, I am obligated and affirm to disclose any form of misconduct with inmates, including, but not limited to, the following:

- Engaging in sexual abuse in a jail, prison, community confinement facility, juvenile facility, or other institution.
- 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.
- Civilly or administratively adjudicated to have engaged in the activity as described above.
- Engaged in any sexual harassment incident."

The Auditor reviewed the ACSO Sexual Misconduct Information Release form. The form is utilized for any staff being considered for a promotional opportunity. The promotional position is included on the form. Each employee is required to complete the form prior to the effective date of promotion. The form includes the information as bulleted above. The Auditor randomly chose 15 employee records to review. A review of records revealed newly hired and current staff completed the Annual Evaluation Affirmation-PREA form and staff who had been promoted within the previous 12 months completed the Sexual Misconduct Information Release form prior to their promotion date.

The Auditor conducted a review of employee records. The facility conducts a criminal background check of all employees every five years. The Internal Affairs Investigator conducts the criminal background check electronically through the Virginia Criminal Information Network and the National Crime Information Center. Each year every employee is required to complete the Annual Evaluation Affirmation-PREA form during their annual evaluation process. Records reveal the ACSO has conducted criminal background record checks every five years. Records reveal each employee is specifically asked questions related to sexual abuse prior to employment, promotion and annually.

The Auditor conducted a review of contractor records. Records reveal the ACSO asks each contractor questions related to acts of sexual abuse. Each contractor reads and signs Annual Evaluation Affirmation-PREA form. The form requires an affirmative duty to disclose any misconduct as described above. Contractors are required to print, date and sign the form. The Auditor observed evidence the agency performs a criminal background check on each contractor prior to selection and every five years thereafter.

The Auditor reviewed the personnel records of ACSO staff who had previously been employed at other confinement facilities. The Auditor observed the ACSO specifically requests information regarding substantiated allegations and resignations during a pending investigation of sexual abuse from other institutional employers prior to offering the candidate

a position at the Arlington County Detention Facility. The Auditor asked the Human Resource representative if information related to sexual abuse investigations is provided to other institutional employers when requested by other agencies regarding a former ACSO employee. The Auditor was informed that information is provided when requested. The Auditor interviewed a staff member from the Internal Affairs section. The investigator either reviews files at other institutions or requests information on a former employee prior to being hired by the ACSO. The Auditor was also informed all security staff must pass a polygraph test prior to being hired.

The Auditor conducted formal interviews with staff. Staff were asked if they were aware of the criminal background records check process. Each staff was aware the facility conducts a criminal background records check every five years. Staff informed the Auditor they sign a release of information so the ACSO can perform the record check. Staff were asked when they are asked specific questions related to sexual abuse and sexual harassment. Each staff asked informed the Auditor they answer those questions before being hired, annually and prior to promotion.

The Auditor conducted formal interviews with contractors. Contractors were asked if they were aware the agency conducts a criminal records background check of them. Each contractor was aware the facility conducts such checks prior to services and every five years. The Auditor asked each if they were ever questioned about prior or current acts of sexual abuse or sexual harassment. Each contractor stated they had to complete a form affirming they are required to report such information to the agency. Each stated they are required to sign the form.

**Conclusion:**

The Auditor concluded the Arlington County Sheriff's Office is attempting to identify previous acts of sexual misconduct prior to hiring staff and enlisting the services of contractors, and before promoting staff members. The Auditor conducted a thorough review of the ACSO policies, procedures, employee records, contractor records, forms and interviewed staff and contractors to determine the agency meets the requirements of this standard.

115.18	<b>Upgrades to facilities and technologies</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 536 360"><b>Auditor Discussion:</b></p> <p data-bbox="252 405 1469 651">The practice of the Arlington County Sheriff's Office is to consider the effects of design, acquisition, expansion, or modification upon the ACSO's ability to protect inmates from sexual abuse when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facility. The agency considers how technology may enhance the agency's ability to protect inmates from sexual abuse when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology.</p> <p data-bbox="252 685 574 719"><b>Evidence Relied Upon:</b></p> <p data-bbox="252 763 587 797">Inter Office Memorandum</p> <p data-bbox="252 831 512 864">Interviews with Staff</p> <p data-bbox="252 909 427 943">Observations</p> <p data-bbox="252 976 544 1010"><b>Analysis/Reasoning:</b></p> <p data-bbox="252 1055 1477 1346">The ACSO has installed new cameras since its last PREA audit. The Auditor toured the facility and observed new camera placements. Placements of cameras were chosen to better cover recognized blind spots throughout the facility. An interview with the Director of Corrections revealed the PREA Coordinator was involved with the selection of new camera placements. The Auditor was informed the facility reviews incidents of sexual abuse after an investigation. Those areas in the facility where an allegation had been alleged were considered when choosing camera locations.</p> <p data-bbox="252 1379 1485 1547">The Auditor reviewed an interoffice memorandum from the PREA Coordinator addressed to the Director of Corrections. The memorandum explains the modifications made to the facility's video monitoring system. The PREA Coordinator explained there were 330 cameras replaced and 59 additional cameras added in the facility. There are 389 cameras in the facility.</p> <p data-bbox="252 1581 1469 1659">The Arlington County Sheriff's Office has not designed or acquired any new facility or planned any substantial expansion or modification of its existing facility during this audit cycle.</p> <p data-bbox="252 1693 427 1727"><b>Conclusion:</b></p> <p data-bbox="252 1771 1477 1939">The agency's PREA Coordinator was able to provide input in new camera placements throughout the facility. The Auditor observed new camera placements in the facility during a tour. The Auditor reviewed an interoffice memorandum, conducted formal interviews with staff and made observations to determine the ACSO meets the requirements of this standard.</p>

115.21	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office has a policy that requires all victims of inmate-on-inmate or staff-on-inmate sexual abusive penetration have access to a forensic medical examination provided by a Sexual Assault Nurse Examiner (SANE). The examination is provided to the victim at no cost to the victim. The agency provides inmates with access to outside victim advocates for emotional support services related to sexual abuse and gives inmates mailing addresses and telephone numbers, including toll free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant service agencies.</p> <p>The agency's policy states, "The Arlington County Sheriff's Office follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The protocol is adapted from or otherwise based on the 2011 U.S. Department of Justice's Office of Violence against women publication, "A national protocol for Sexual Assault Medical Forensic Examination, Adults/Adolescents" subsequent editions, or similarly comprehensive and authoritative protocols developed after 2004."</p> <p>The facility provides maintains a Memorandum of Agreement with an agency to provide a victim advocate for emotional support services during the forensic examination. The policy allows the advocate to accompany the victim in investigatory interviews and to provide emotional support, crisis intervention, information and referrals.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 5-229 Inmate Sexual Misconduct/Sexual Assault, pg. 27-28</p> <p>ACPD Policy - 531.03 Sex Crime Investigations, pg. 1-6</p> <p>Memorandum of Agreement with Arlington County Police Department</p> <p>Memorandum of Agreement with the Inova Ewing Forensic Assessment &amp; Consultation Teams Department</p> <p>Memorandum of Agreement with Arlington County Department of Human Services and Doorways for Women and Families</p> <p>Inmate Handbook, pg. 34-35</p> <p>Interviews with Staff</p> <p>Interview with SANE</p> <p>Interview with Victim Advocate</p> <p><b>Analysis/Reasoning:</b></p>

The Arlington County Sheriff's Office conducts administrative investigations and refers all criminal allegations to the Arlington County Police Department. The agency's Internal Affairs department investigates allegations of sexual abuse in the facility. The agency's policy requires investigators follow a uniformed evidence protocol to maximize the potential for obtaining usable physical evidence. The Arlington County Police Department investigators process physical evidence from any crime scene in the facility.

The Auditor reviewed the agency's Memorandum of Understanding with the Arlington County Police Department. The memorandum stipulates the Arlington County Police Department agrees:

- To follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for criminal prosecutions;
- The evidence collection protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, or similarly comprehensive and authoritative protocols developed after 2011;
- To utilize only investigators who have received special training in sexual abuse investigations;
- To gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data;
- To interview alleged victims, suspected perpetrators, and witnesses, and review prior complaints and reports of sexual abuse involving the suspected perpetrator;
- That the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff;
- That substantiated allegations of conduct that appear to be criminal shall be referred for prosecution; and
- To continue the criminal investigation to conclusion. The departure of the alleged abuser or victim from the employment or control of the agency shall not provide a basis for termination an investigation.

The memorandum requires the Arlington County Sheriff's Office agrees;

- To assist the ACPD in their investigatory efforts by permitting them access to office spaces, inmate living spaces, desk spaces, Sheriff's office staff, inmates, audio and/or video recordings, and personnel records, historical records of any kind, phone records or any other type of record that may contain evidence of a pattern of abusive behavior or tendency toward violence or sexual abuse;
- Ensure that any inmates and staff personnel are available for interviews, court hearings, meetings and any other processes involved with the investigation and prosecution of a case;
- Provide transport, escort and/or security when requested by the ACPD, in conjunction with an investigation into a criminal sexual incident that has occurred within the Arlington County Detention Facility;
- The ACSO shall retain all written reports of the incident for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. These reports may

include the ACPD's investigative reports, if they are released, as permitted by law and by the policy and directives of the ACPD;

- Following an investigation into an inmate's allegation that he or she suffered sexual abuse in the ACDF, court lockup or other location, the ACSO shall inform the inmate as to whether the allegation has been determined to be sustained, not sustained, unfounded or exonerated;
- Following an inmate's allegation that a staff member, volunteer, contractor has committed sexual abuse against the inmate, the ACSO shall subsequently inform the inmate whenever the staff member is no longer posted within the inmate's unit, the staff member is no longer employed at the facility, the ACSO learns that the staff member has been indicted on a charge related to sexual abuse within the facility, and/or the ACSO learns that the staff member has been convicted on a charge related to sexual abuse within the facility;
- Following an inmate's allegation that he or she has been sexually abused by another inmate, the ACSO shall subsequently inform the alleged victim whenever the ACSO learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility, and/or the ACSO learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility; and
- All such notifications or attempted notifications shall be documented.

The agency maintains a Memorandum of Agreement with the Inova Ewing Forensic Assessment & Consultation Teams Department (FACT). The memorandum stipulates the ACSO agrees to:

- Make involvement of a sexual assault nurse examiner (SANE) a component of the standard response to a report of sexual abuse and/or a request for help from a survivor of sexual violence;
- Any time that an incident or allegation of sexual abuse is discovered or reported the ACSO will transport the inmate, within 120 hours of the incident, to Inova Fairfax Hospital for a forensic-medical examination conducted by a SANE in the FACT department;
- If the incident occurred more than 120 hours prior to being reported, the ACSO will ensure that the inmate receives a forensic-medical evaluation, if indicated, and any needed medical treatment;
- Facilitate a follow-up examination, whenever necessary, of the inmate by a FACT department SANE while the inmate is detained by the ACSO. The ACSO will provide the FACT department contact information to all inmates seen by the FACT department upon release. This should be done without regard to the presence or status of an investigation;
- Provide inmates with confidential, 24-hour access to the rape crisis hotline, at no cost, through the inmate telephone system;
- Respect the confidential nature of communication between FACT department, SANE, and patients detained at the ACSO, as it relates to the medical portion of the exam;
- Communicate any questions or concerns to the FACT department staff prior to the examination;
- Pay invoices for services rendered by FACT within thirty (30) days of the date of the invoice; and
- Follow all Inova Campus policies pertaining to Prisoner/ Inmate Patients.

The Memorandum of Agreement requires the FACT agrees to:

- Provide a forensic-medical examination in response to a request from the ACSO when inmates are brought to Inova Fairfax Hospital for sexual assault forensic examinations;
- Permit Inova Sexual Assault Nurse Examiners to conduct forensic-medical examinations at the Arlington County Detention Facility (ACDF) when deemed appropriate unless there is not an adequate space or equipment available. In cases where the SANE conducts the examination at the ACDF, Inova will supply all supplies and equipment;
- Provide appropriately trained personnel to conduct the forensic-medical examinations for sexual assault victims. Persons rendering these services will provide care that meets the most current version of The National Protocol for Sexual Assault Medical Forensic Examinations from the Department of Justice. Persons rendering services pursuant to this MOA shall at a minimum: Physicians - Be licensed and maintain licensure as a physician of their respective state and possess training specific to the sexual assault medical forensic examination and Registered Nurses - Be licensed and maintain licensure as a Registered Nurse by their respective State Board of Nursing and possess training and/or certification in the Sexual Assault Nurse Examination;
- Provide inmates with a Sexual Assault Medical Forensic Examination and treatment for the prevention of sexually transmitted infections (including Human Immunodeficiency Virus) and pregnancy;
- Utilize the Inova Ewing FACT Department Sexual Assault Examination template to document all findings of the Sexual Assault Forensic Examination. Information regarding medical treatment will be documented in the Inova electronic health record;
- Provide crisis intervention and emotional support resources to sexual assault victims as necessary, and information about victim preferences with respect to the exam, to include the right to refuse any or all medical and forensic services. Offer emergency contraception (Plan B) to the patient after appropriate medical counseling, when appropriate;
- The Inova Ewing FACT department SANE will conduct a nursing forensic examination after informed consent is obtained;
- The SANE must maintain the kit in his/her presence until all evidence is collected and the kit sealed;
- Within 48 hours of the examination, the Physical Evidence Recovery kit will be handed over by the Inova Ewing FACT department in accordance with evidence chain of custody procedures to the Arlington County Police Department; at no time is the inmate to take possession of the Physical Evidence Recovery Kit;
- The SANE will provide a copy of the discharge and follow-up instructions to the sexual assault victim. Provide follow-up examinations, when medically appropriate, to inmates at the ACSO, as resources allow;
- Work with designated ACSO officials to obtain ACDF security clearance and follow all facility guidelines for safety and security, as necessary;
- Maintain confidentiality of communications with inmates detained at the ACSO in compliance with HIPAA and the Prison Rape Elimination Act Standards; and
- Communicate any questions or concerns about the MOA to the ACSO. Submit invoices to ACSO for services rendered by FACT through the ACSO Budget Analyst without contacting the inmate or inmate's family.

The facility utilizes forensic services with the Inova Ewing Forensic Assessment & Consultation Teams Department (FACT). The Auditor conducted a telephone interview with the Director of the FACT. The Auditor discussed the services provided by the FACT. The Auditor was informed that forensic examinations are conducted by a certified Sexual Abuse Nurse Examiner and are performed in the hospital. The Auditor asked if a victim advocate is allowed to accompany the victim during the examination. The SANE stated advocates are always allowed when requested by the victim. The SANE was asked if the inmate is charged a fee after the examination. The Auditor was informed no inmates are billed for the forensic exam.

The Auditor conducted a telephone interview with the Director of Doorways for Women and Families. The Auditor discussed the Memorandum of Agreement with the Director. The Director stated her organization provides a victim advocate to accompany an inmate victim of sexual abuse during the forensic examination, upon the inmates request. The Auditor asked what services are provided for inmates at the Arlington County Detention Facility. The Director stated her organization provides crisis intervention services, emotional support services, information, referrals and counseling. Inmate victims are provided the same services offered to victims in the community. The Auditor asked if a victim advocate would accompany an inmate during investigatory interviews. The Director stated they have not been asked to do so but would do such. The Director informed the Auditor her organization has not been requested to accompany a victim during a forensic examination in the past 12 months.

The Auditor conducted a review of the agency's Inmate Handbook. The handbook includes a section informing inmates of available medical services. The medical services sections includes the types of services that inmates will not be charged a fee for. The Auditor observed "PREA related services" does not require the inmate to pay a fee.

The Auditor conducted formal interviews with Corizon Correctional Healthcare medical personnel. Medical personnel were asked if they conduct forensic examinations at the facility. Each medical personnel stated they do not conduct forensic examinations at the facility. The Auditor was informed inmate victims of sexual abuse are transported to the Inova hospital for forensic examinations. The Auditor asked how many inmates had been transported for a forensic examination in the previous 12 months. Medical personnel informed the Auditor there has not been a need to send an inmate victim for a forensic examination in the previous 12 months.

The Auditor conducted a formal interview with an agency investigator. The investigator was asked to explain the process when investigation allegations of sexual abuse. The Auditor was informed criminal investigations of sexual abuse are conducted by the Arlington County Police Department. When the investigator determines there is evidence of an alleged sexual abuse that occurred within a time period to allow for the collection of evidence, the Arlington County Police Department is notified immediately. The Auditor asked how evidence collection occurs and was informed the ACPD investigator collects evidence from the crime scene inside the facility. ACSO personnel secure the scene to protect potential evidence following an incident of sexual abuse.

The facility reported no incidents or allegations that required an alleged victim be transported to the Inova hospital for a forensic examination.

The Arlington Sheriff's Office does not utilize staff to serve the role of victim advocate.

**Conclusion:**

The ACSO is utilizing an appropriate uniformed evidence protocol to maximize the potential for usable evidence. The facility makes victim advocates available to victims of sexual abuse and ensures access to a forensic examination performed by a certified Sexual Abuse Nurse Examiner. The Auditor reviewed the ACSO policies, procedures, Memorandums of Agreement, Inmate Handbook, and conducted interviews with staff, avocate and SANE. The Auditor determined the facility meets the requirements of this standard.

115.22	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office policy is to ensure an administrative and/or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. The ACSO policy is to refer allegations of sexual abuse to the Arlington County Police Department. The Arlington County Police Department has the legal authority to conduct such investigations.</p> <p>The agency's Inmate Sexual Misconduct/Sexual Assault policy includes the responsibilities of the ACSO personnel and the duties responsible to the Arlington County Police Department investigator.</p> <p>The Auditor observed a statement in the agency's policy that conflicted with PREA standard 115.71 (d). Details of the conflicting statement are included in the "Analysis/Reasoning" section of this standard.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 5-229 Inmate Sexual Misconduct/Sexual Assault, pg. 27-28</p> <p>Memorandum of Understanding with the Arlington County Police Department</p> <p>Special Directive</p> <p>Agency Website</p> <p>Investigation Tracking Sheet</p> <p>Interviews with Staff</p> <p>Interview with SANE</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor observed the ACSO policy stated, "Substantiated allegations of conduct that appears to be criminal are referred for prosecution." The Auditor discussed use of the word "substantiated" in the policy statement. Stating "substantiated allegations of conduct that appears to be criminal are referred for prosecution" requires the facility to investigate the allegation until a determination of substantiated is made. PREA standard 115.71(d) requires, "When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution."</p> <p>The agency quickly revised its policy, 5-229 Inmate Sexual Misconduct/Sexual Assault. The agency deleted the statement, "Substantiated allegations of conduct that appears to be criminal are referred for prosecution." The revised policy reads, "Conduct that appears to be</p>

criminal is referred for prosecution." The revised statement no longer conflicts with PREA standard 115.71(d). The Director of Corrections sent a Special Directive to all staff on August 19, 2020. An interview with a facility investigator revealed the investigator understood to consult with prosecutors before continuing with an investigation once learning the evidence appears to support prosecution.

The Auditor reviewed the agency's website. The website includes information explaining to the public that criminal allegations of sexual abuse are referred to the Arlington County Sheriff's Office for investigation. The Auditor observed the agency's website did not inform the public of the responsibilities of the ACSO and the ACPD during investigations. The agency updated its website to include the responsibilities of both agencies. The website explains the Arlington County Sheriff's Office conducts administrative investigations while the Arlington County Police Department conducts criminal investigations. The website explains an administrative or criminal investigation is conducted for all allegations of sexual abuse and sexual harassment. The website further explains the investigations of staff sexual abuse and sexual harassment.

The Auditor reviewed the Memorandum of Agreement with the Arlington County Police Department. The memorandum stipulates the Arlington County Police Department will investigate incidents of sexual abuse in the Arlington County Detention Facility. The memorandum stipulates the Arlington County Sheriff's Office will cooperate with the Arlington County Police Department during their investigation.

The Auditor conducted a formal interview with an ACSO sexual abuse investigator. The Auditor asked the investigator to explain the process once an allegation appears to be criminal in nature. The investigator stated the Arlington County Police Department is notified immediately to conduct a criminal investigation. The referral to the ACPD is documented in the written investigative report. The Auditor asked the investigator how the administrative investigation continues after notifying the ACPD. The investigator stated the administrative investigation is placed on hold until the criminal process is completed by the ACPD and prosecutor.

The facility utilizes forensic services at the Inova Fairfax hospital. The Auditor conducted a telephone interview with a SANE, The Auditor discussed the services provided to inmate victims of sexual abuse. The Auditor was informed that forensic examinations are conducted by a certified Sexual Abuse Nurse Examiner and occur at the hospital. The Auditor asked if a victim advocate is allowed to accompany the victim during the examination. The SANE stated advocates are always allowed when requested by the victim. The SANE was asked if the inmate is charged a fee after the examination. Inmates are not directly charged for the forensic exam. Any evidence collected during the forensic exam is provided to the Arlington County Police Department by the SANE to maintain chain of custody.

The Auditor conducted formal interviews with Corizon medical personnel. Medical personnel were asked if they conduct forensic examination. Each medical personnel stated they do not conduct forensic examinations. The Auditor was informed forensic examinations were conducted at the Inova Fairfax hospital by a certified SANE. Medical personnel stated they call the hospital to notify the SANE of the sexual abuse prior to the inmates arrival at the hospital.

The Auditor conducted formal interviews with inmates who alleged sexual abuse while housed

at the facility. The inmates were asked if an investigator met with them after making the allegation. Each informed the Auditor they did meet with an investigator. When asked if they were informed of their investigative results one inmate informed the Auditor he had not been told the results. The Auditor determined this inmate had alleged being sexually abused at another facility years before arriving at the Arlington County Detention Facility. The other facility had investigated the incident.

The Auditor reviewed the agency's investigative tracking mechanism. The tracking reveals there were no allegations referred for criminal investigation within the previous 12 months. The Auditor was informed there were no allegations in which an investigator determined evidence appeared to support prosecution.

No department of justice component is responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in the Arlington County Detention Facility.

**Conclusion:**

The ACSO is utilizing an appropriate uniformed evidence protocol to maximize the potential for usable evidence. The facility makes victim advocates available to victims of sexual abuse and ensures access to a forensic examination performed by a certified Sexual Abuse Nurse Examiner. The Auditor reviewed the ACSO policies, procedures, Memorandums of Agreement, Website, investigative tracking mechanism, Special Directive and conducted interviews with staff, inmates, and SANE. The Auditor determined the facility meets the requirements of this standard.

115.31	<b>Employee training</b>
	<p data-bbox="252 170 927 203"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 536 360"><b>Auditor Discussion:</b></p> <p data-bbox="252 400 1485 607">The agency has "Required Staff Training" policies. Chapter 3 of this policy is titled, "Training &amp; Staff Development." The Auditor reviewed the chapter. The policies include, guidelines, orientation, basic training, training requirements, in-service and supplemental training and specialized training. The agency's 3-202 Orientation policy madates all employees receive sexual harassmt training during their initial employee orienatation.</p> <p data-bbox="252 647 1477 853">The agency's training personnel create and follow an annual training plan to ensure agency personnel receive mandated training. Training personnel have created lesson plans that include all elements of this standard in its PREA training classes. All personnel are provided a Sexual Misconduct Brochure that includes the agency's efforts towards prevention, detection and responding to sexual abuse and sexual harassment.</p> <p data-bbox="252 893 1442 1099">Arlington County Detention Facility personnel are required by the Virginia Board of Corrections' Minimum Standards for Local Jails and Lockups to review the agency's emergency procedures annually. The agency includes it's PREA policies in the annual review. Each staff member is required to read and sign denoting their understanding of the policies.</p> <p data-bbox="252 1140 576 1173"><b>Evidence Relied Upon:</b></p> <p data-bbox="252 1214 667 1247">Policy - 3-202 Orientation, pg. 3</p> <p data-bbox="252 1288 1002 1321">Policy - 2-307 Sexual Misconduct Against Inmates, pg. 15</p> <p data-bbox="252 1361 523 1395">Annual Training Plan</p> <p data-bbox="252 1435 612 1469">PREA Training Lesson Plan</p> <p data-bbox="252 1509 572 1543">PowerPoint Presentation</p> <p data-bbox="252 1583 477 1617">Training Records</p> <p data-bbox="252 1657 531 1691">Annual Policy Review</p> <p data-bbox="252 1731 625 1765">Sexual Misconduct Brochure</p> <p data-bbox="252 1805 512 1839">Interviews with Staff</p> <p data-bbox="252 1879 557 1912">Interviews with Inmates</p> <p data-bbox="252 1953 544 1986"><b>Analysis/Reasoning:</b></p> <p data-bbox="252 2027 1474 2134">The Auditor reviewed the agency's lesson plans and PowerPoint presentations utilized to train staff. The ACSO lesson plans include all training topics as bulleted above. The ACSO instructor teaches from the lesson plan and uses a PowerPoint presentation to train staff.</p>

Each new appointee is provided this training when they are initially hired. The facility provides PREA training to all staff annually. The training provided to employees is not tailored to any gender as the facility houses male and female inmates.

The Auditor reviewed the ACSO staff training records. Training records reveal all staff are provided the PREA training. The Auditor reviewed training records for the previous 12 month period. All staff had been provided training within the previous 12 months. The Auditor observed numerous staff had received PREA training twice within the previous 12 months. Employee understanding is recorded electronically by the agency. Staff are required to take the PREA training online and pass a test denoting their understanding. If staff fail the test they are provided one additional attempt. Any staff who fail the test two times must retake the entire training and then pass the test. The Auditor interviewed staff who had recently received the 2020 PREA training.

The Auditor conducted formal interviews with specialized and randomly selected staff. Each was asked about the training provided by the agency. All staff interviewed had been provided the training and informed the Auditor they receive training every year. The Auditor asked each to explain the topics provided by the agency during their initial and annual training. Staff were able to articulate the training topics as required by this standard. The Auditor determined staff were knowledgeable regarding those topics.

The Auditor conducted formal interviews with randomly selected and specifically targeted inmates. The inmates interviewed articulated staff appropriately respond to incidents, take sexual abuse and sexual harassment seriously and had confidence in staff's abilities. The inmates' collective responses allowed the Auditor to determine staff had received PREA training. While interviewing inmates the Auditor was informed ACSO staff treat inmates with respect, help them with their problems, are professional and "put the correct in corrections."

The facility's Pre-Audit Questionnaire reported 254 staff employed who may have contact with inmates. The Auditor reviewed the training documents that reveal 208 staff were provided training in October 2019. The Auditor reviewed the agency's annual policy review for 2020 and 2019. In 2020 there were 286 personnel who reviewed and signed denoting their understanding of the ACSO policy. In 2019 there were 303 personnel who reviewed the policy. The Auditor verified all current employees at the facility have received the agency's PREA training.

The Auditor reviewed the Arlington County Sheriff's Office annual training plan. The training plan includes a section for Pre-Academy training. This section of the training plan mandates sexual harassment, sexual misconduct and Prison Rape Elimination Act training. The mandated section of the annual training plan requires all employees receive training in sexual harassment, sexual misconduct and Prison Rape Elimination Act training. The section stipulates this training is provided to employees continually and on an annual basis.

**Conclusion:**

The Auditor concluded the facility provides training beyond the requirements of this standard. Staff are provided training and refresher information each year. In addition, staff receive PREA information and training during shift briefings. The facility ensures all staff's training has been documented as required by this standard. Facility staff interviewed by the Auditor were knowledgeable in the training topics mandated in PREA standard 115.31. The agency's

additional training efforts have ensured staff retained the information provided through training. The Auditor reviewed agency policy, procedures, training materials, training rosters, lesson plans, Annual Training Plan, policy reviews and conducted interviews with staff and inmates and determined the facility exceeds the requirements of this standard.

115.32	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office has policies that require contractors and volunteers who have contact with inmates receive training prior to providing services in the ACDF. Policies require volunteers and contractors sign a waiver and agreement indicating receipt of the required training, ACDF Identification Pass and a copy of ACDF rules and regulations concerning volunteers and contractors policies and procedures. The volunteer and contractor signatures stipulate the volunteer and contractor agrees to obey all ACDF rules, regulations, policies and procedures. The agency's Program Coordinator is required by policy to provide on-site training, information and supervision of all volunteers. The ACSO policy requires volunteer and contractor training include ACSO sexual abuse and sexual harassment prevention, detection, and response policies and procedures.</p> <p>Volunteers who are "one-time or short-term" who are continually supervised may be provided less intensive training. Volunteer training may be granted only when the Program Coordinator and the Assistant Director of Inmate Services mutually agree that it is not necessary. Written justification for granting a waiver of volunteer training must be provided by the Program Coordinator.</p> <p>ACSO policy states, "One-time or short term contractors who are continuously supervised may require less intensive training.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 16-605 Training and Orientation (Volunteers), pg. 4-5</p> <p>Policy - 16-704 Training and Orientation (Contractors), pg. 2-3</p> <p>Security Orientation Training Forms</p> <p>Security Orientation Outline</p> <p>Training Rosters</p> <p>PowerPoint Presentation</p> <p>Interviews with Contractors</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the agency's volunteer and contractor training curriculum. Contract personnel who work regularly in the facility receive the same training as provided to all agency personnel. Contractors and volunteers who do not work regularly in the facility are provided polices and are required to read and sign for understanding of such policies. Those persons are required to read and sign acknowledgement of the following, but not limited to, training:</p>

- Sexual Misconduct/Harassment
- Staff on Staff Harassment/Misconduct
- Staff on Inmate Harassment/Misconduct
- Inmate on Inmate Harassment/Misconduct
- PREA
- Sheriff's Office Policies
- Code of Ethics and Conduct

Each volunteer and contractor sign the Security Orientation Training Form. The training form states "I agree to abide by the Policy and Procedures of the Arlington County Sheriff's Office. I accept full responsibility for my actions while in the Detention Facility/Courthouse and understand that my entrance privilege may be suspended, curtailed, or terminated at any time." Each volunteer and contractor is required to sign acknowledgement and understanding of the provided training. The form states, "I have read and understand the above information and policy." The signature is witnessed by the trainer. The trainer follows a security orientation outline when providing training to volunteers and contractors. The Auditor observed the outline includes the following topics: Misconduct/sexual misconduct/harassment, Inmate Manipulation, sexual misconduct, PREA-sexual abuse and assault intervention, and Sheriff's Office policy.

The Auditor reviewed the PowerPoint presentation utilized to train volunteers and contractors. The following, but not limited to, information was observed in the PowerPoint presentation:

- Staff on staff sexual harassment and misconduct
- Staff on inmate sexual harassment and misconduct
- Inmate on inmate sexual harassment and misconduct
- Zero-tolerance
- Detection - Sexual abuse indicators
- Inmate's rights
- Disciplinary measures
- Prevention
- Reporting
- Responsibilities
- Investigations

The agency reported 42 contractors who have contact with inmates who are authorized to enter the facility. The agency reported 186 volunteers who have contact with inmates authorized to enter the facility. Each volunteer and contractor undergoes a background check and receives training prior to authorization to enter the facility. The Auditor reviewed the training records of all current contractors. The records reveal each had been provided training by the facility prior to rendering services in the facility. The Auditor randomly chose 5 volunteer records. A review of records revealed each had been provided training prior to entering the facility for volunteer services.

The Auditor conducted formal interviews with contract personnel. Each contractor interviewed verified they had been provided training related to the agency's PREA policies prior to beginning services. The Auditor asked each specific questions related to the facility's policy's and procedures for reporting allegations of sexual abuse and sexual harassment. Each contractor understood their requirements for reporting allegations, information and knowledge

related to such. Each was asked to explain their responsibilities under the ACSO policies related to sexual abuse. Each contractor understood their rights and responsibilities for such. All contractors understood the agency has a zero-tolerance policy of sexual abuse and sexual harassment.

The Auditor was unable to interview a facility volunteer due to operational adjustments to mitigate the risks of COVID-19 spread. No volunteers have been providing services in the facility since the onset of COVID-19.

**Conclusion:**

The Auditor concluded the facility is appropriately training volunteers and contractors and staff ensures documentation of training is maintained. The Auditor determined through a review of agency policies, procedures, training curriculum and rosters, PowerPoint presentation, security orientation training forms and by interviewing contract personnel the facility meets the requirements of this standard.

115.33	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>It is the policy of the Arlington County Sheriff's Office to provide each inmate with PREA information and training upon arrival at the facility. Policy stipulates "The Arlington County Sheriff's Office and its contracted entities are required to make 'reasonable modifications and accommodations' to existing policies, administrative directives, and procedures in order to allow qualified inmates with disabilities the same opportunities as non-disabled inmates, unless to do so would be an undue burden on the Department or jeopardize the safety or security of staff, and inmates, or would result in a fundamental alteration in the nature of the program or activity."</p> <p>The ACSO has a policy that requires the ADA Coordinator and/or the Shift Commander coordinate a meeting with the inmate and appropriate staff, as soon as reasonably possible, to discuss and explain the orientation video, initial housing assessment, inmate handbook, PREA, classification, housing unit orientation and answer any other questions the inmate may have. The agency policy is to provide access to an interpreter for any person who is non-English speaking or deaf. Agency staff may contact a County approved interpreter from the list maintained in Processing, or if necessary, initiate the AT&amp;T Language Line service.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 7-205 Orientation (Inmates), pg. 5-6</p> <p>Policy - 11-101 Orientation to Facility Rules, pg. 2</p> <p>Policy - 7-203 Exceptions to Standard Initial Processing, pg. 4</p> <p>Policy - 8-1002 Intake, pg. 5</p> <p>Volatia Language Network Contract</p> <p>Access Interpreting, Inc. Agreement</p> <p>PREA Video Processing Log</p> <p>Inmate Orientation Checklist</p> <p>Inmate Orientation Brochure</p> <p>Inmate PREA Brochure</p> <p>Reporting Sexual Misconduct Brochure</p> <p>PREA Posters</p> <p>Inmate Handbook, pg. 3, 6-9</p>

Interviews with Staff

Interviews with Inmates

Observations

**Analysis/Reasoning:**

Each inmate is provided an Inmate Handbook upon arrival at the Arlington County Detention Facility. The following information is included in the Inmate Handbook:

- Sexual Misconduct/Sexual Assault - Zero-tolerance
- Prison Rape Elimination Act - Overview
- Reporting Sexual Misconduct
- Definitions
- Tips for Preventing Sexual Misconduct
- Intervention
- Additional Information
- Grievable Issues - Sexual misconduct, sexual contact, sexual abuse and sexual harassment

Each inmate is provided a brochure upon entry to the facility. The brochure is provided by the Intake Officer. The brochure includes the following information:

- PREA overview
- Zero-Tolerance Policy
- What is sexual assault
- What to do if you have been sexually assaulted
- How to prevent sexual assault
- How to report an incident of sexual misconduct or sexual assault

The Arlington County Sheriff's Office utilizes the "What You Need to Know" video. Each inmate watches the video during their classification process and in their housing units. The video plays everyday in the mornings in each housing unit. Inmates are given an opportunity to ask questions about the facility's information and comprehensive education with the Case Manager. The Case Manager meets with each new inmate individually and explains the PREA material. The facility maintains the Inmate Handbook, brochure and Comprehensive educational video in English and Spanish. The video is closed captioned in each language.

The Auditor reviewed 30 inmate records. The Auditor randomly chose 15 and specifically chose 15 inmate files. A review of inmate records revealed each inmate signed the Inmate Orientation Checklist denoting receipt of the information and education. Each inmate had been provided the Inmate Handbook and brochure upon intake and the comprehensive education within 30 days of arrival. The Auditor was able to determine by a review of a relevant sample of inmate files the inmate population receives a comprehensive education and information upon arrival. While interviewing inmates the Auditor was informed they received an Inmate Handbook and brochure during the booking process. The Inmate Handbook and brochure includes the agency's sexual abuse and sexual harassment information.

The Auditor conducted formal interviews with an inmate who was identified as Limited English Proficient. The inmate was asked if he was provided information during the booking process. The inmate informed the Auditor he was provided a handbook and brochure written in Spanish. The Auditor asked the inmate if he had watched the comprehensive educational video. He informed the Auditor he had seen the Spanish version of the video. The inmate was knowledgeable regarding the agency's sexual abuse and sexual harassment policies and procedures towards prevention, detection and response. The Auditor asked the inmate how the facility communicated with him. The inmate stated the facility uses interpreters to communicate with him and sometimes uses the telephone.

The Auditor conducted formal interviews with inmates who were identified with a mental illness. Each inmate was asked if he/she was provided a handbook and brochure upon arrival. The Auditor asked each if he/she had watched a video about sexual abuse and sexual harassment. Each inmate informed the Auditor he/she was provided a handbook, brochure and watched the educational video. The Auditor questioned each inmate about the contents of the information and video. The inmates understood how to report allegations of sexual abuse and sexual harassment, understood the facility has a zero-tolerance policy, and they had a right to be free from sexual abuse, sexual harassment and retaliation. The Auditor was able to determine the inmates identified with a mental illness had benefitted from the agency's information and comprehensive education.

The Auditor conducted a formal interview with a Case Manager. Case Management was asked how information is provided to inmates who are deaf, hard of hearing, blind, have low vision or who cannot read English. The Auditor was informed PREA information can be read by those who are deaf and listened to by those who are blind. The Case Manager stated any inmate who cannot otherwise benefit from the agency's information and education is worked with one-on-one. The Auditor was informed the agency contracts for telephonic language line service and for sign language interpreters. The Case Manager informed the Auditor the facility has staff who are bilingual in the event an inmate doesn't speak English. The Auditor asked how the facility ensures inmates who cannot otherwise benefit from the agency's education and information receive the information. The Case Manager discusses options with command staff and the PREA Coordinator.

While touring the facility the Auditor observed the housing units where the comprehensive educational video plays on a daily basis. The Auditor observed key information readily available in the form of PREA posters and materials throughout the facility. The facility provides readily available information to inmates in its Inmate Handbook and brochure. The facility maintains PREA materials written in English and Spanish. During interviews with inmates the Auditor was informed the video plays every morning in the housing units.

**Conclusion:**

The Auditor concluded the inmate population at the Arlington County Detention Facility has been appropriately educated in the facility's zero-tolerance policy, how to report allegations, rights to be free from sexual abuse, sexual harassment, retaliation, and the agency's policies and procedures for responding to such. The facility maintains appropriate documentation of such in each inmate's record. The Auditor reviewed the agency's policies, procedures, inmate records, Inmate Handbook, brochure, orientation video, posters, interviewed staff, inmates and made observations to determine the facility meets the requirements of this standard.

115.34	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office policy is that employees may receive specialized training for specific assignments as approved by the Sheriff. The assignment assigned to the employee dictates the type, length and amount of training that will be provided to the employee. The Training Coordinator and Director of Administration processes all specialized training unless otherwise approved by the Sheriff. The agency allows employees to request attendance in a specialized training in order to become eligible for various posts and assignments.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 3-206 Specialized Training, pg. 6</p> <p>Memorandum of Agreement with the Arlington County Police Department</p> <p>Training Curriculum</p> <p>Training Certificates</p> <p>Interview with Investigator</p> <p><b>Analysis/Reasoning:</b></p> <p>The ACSO utilized the National Institute of Corrections (NIC), "PREA: Investigating Sexual Abuse in Confinement Settings" to train its investigators. The NIC training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. At the time of the audit the Arlington County Sheriff's Office employed 36 staff who have completed the required training. The Auditor reviewed the training certificates of each investigator; each had attended the training. In addition, the Auditor reviewed the training files of the investigators. Each investigator had received the PREA training offered to all ACSO employees. The agency trains all Sergeants, Lieutenants and Captains to conduct sexual abuse investigations.</p> <p>The Arlington County Police Department conducts criminal investigations of sexual abuse in the Arlington County Detention Facility. The Auditor reviewed the Memorandum of Understanding with the Arlington County Police Department. The MOU stipulates the Arlington County Police Department will ensure each of its investigators receive specialized training to conduct investigations of sexual abuse in confinement settings.</p> <p>The Auditor formally interviewed an Arlington County Sheriff's Office investigator. The Auditor asked the investigator to explain the topics included in the specialized training they received. The investigator articulated the topics as listed above. The Auditor asked the investigator to explain the process she utilizes when conducting investigations. The investigator's response indicate she had been trained to conduct sexual abuse investigations</p>

in confinement settings. The investigator discussed interviewing techniques, Miranda and Garrity warnings, evidence collection and the criteria and evidence to support administrative and prosecutorial referral.

No department of justice component is required to investigate sexual abuse allegations in the Arlington County Sheriff's Office.

**Conclusion:**

The Auditor concluded the facility has provided appropriate training to its sexual abuse investigators. The Auditor conducted a review of policies, procedures, training curriculum, training records, MOU and conducted an interview with a facility investigator to determine the facility meets the requirements of this standard.

115.35	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office, Training Requirements policy mandates contractors are responsible for training their personnel in profession-based skills. All mental health practitioners are provided by the Arlington County Department of Human Services (DHS) who are qualified mental health professionals and meet educational and license/certification criteria specific to their respective professional discipline. All DHS personnel employed in the ACDF are required to conform to all DHS and ACDF policies, procedures, rules and regulations. ACDF policy is that comprehensive medical training is provided in areas of responding to medical emergencies and in recognition of symptoms and problems in order to promote a safe, healthful and effective operational environment.</p> <p>Agency policy requires the medical contractor maintain and comply with all American Correctional Association (ACA), Prison Rape Elimination Act (PREA) and Virginia Department of Corrections (VADOC) medically related standards.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 3-200 Training &amp; Staff Development, pg. 1-4</p> <p>Policy - 13-101 General (Health Care), pg. 1-2</p> <p>Policy - 13-401 Administration (Health Care), pg. 1</p> <p>Security Orientation Outline</p> <p>Training Certificates</p> <p>PowerPoint Presentations</p> <p>Interviews with Medical/Mental Health Practitioners</p> <p><b>Analysis/Reasoning:</b></p> <p>Medical and mental health services at the Arlington County Detention Facility are conducted by Corizon Correctional Healthcare. All Corizon medical and mental health practitioners are required by the ACSO policy to comply with the requirements of the Prison Rape Elimination Act, to include specialized medical training. The Auditor reviewed the records of all medical and mental health practitioners employed in the facility. Records reveal each had attended the specialized medical training provided by Corizon. Documentation for each medical and mental health practitioner's understanding of the training is maintained by employee signature.</p> <p>Corizon requires its employees to complete the specialized medical training. Each Corizon medical and mental health practitioner completes the training online through the National Institute of Corrections. Medical practitioners complete the "PREA: Medical Healthcare for Sexual Assault Victims in a Confinement Setting." Each mental health practitioner completes</p>

the "PREA: Behavioral Health Care for Sexual Assault Victims in a Confinement Setting" course.

The Auditor reviewed the Arlington County Detention Facility staff training records. A review of records revealed each medical and mental health practitioner was provided the training offered to all facility personnel. Each medical and mental health practitioner is required to attend the annual training provided to all ACSO employees at the facility. Medical and mental health practitioners are required to review the agency's sexual abuse and sexual harassment policies annually.

The Auditor conducted formal interviews with medical and mental health practitioners. Each Corizon employee informed the Auditor they had received both specialized training and the training offered to all ACSO employees. Each stated they received the training upon hire before providing services. The Auditor questioned each regarding the training topics as required by this standard. Medical practitioners explained how they treat victims while preserving physical evidence. Medical professionals appeared to be well educated regarding the requirements of this standard.

No Corizon staff at the Arlington County Detention Facility conduct forensic examinations.

**Conclusion:**

The Auditor concluded medical and mental health professionals at the Arlington County Detention Facility have been appropriately trained. The facility maintains documentation that medical and mental health professionals have received specialized medical training and the same training offered to ACSO staff. The Auditor conducted a review of ACSO policies, procedures, training curriculum, training records and interviewed medical and mental health professionals and determined the agency meets the requirements of this standard.

115.41	<b>Screening for risk of victimization and abusiveness</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office policy requires an assessment of each inmate's risk of being sexually abused by other inmates or sexually abusive toward other inmates during the intake screening process. The ACDF's classification system includes the following three (3) phases:</p> <ul style="list-style-type: none"> <li>● <i>Phase I</i> - Initial Housing Assessment - completed by the Inmate Services Processing Counselor or the Zone Supervisor within 8 hours of the inmate's incarceration.</li> <li>● <i>Phase II</i> - Classification Interview and Classification and Custody Assessment - typically completed by the Intake Counselor within 72 hours of the inmate's incarceration.</li> <li>● <i>Phase III</i> - Case Management - typically initiated by the Case Manager within 72 hours of inmate's placement into general population.</li> </ul> <p>Policy requires Inmate Services Staff determine each inmate's degree of classification, custody level, housing assignment, and treatment needs by considering the following criteria:</p> <ul style="list-style-type: none"> <li>● Sex</li> <li>● Age</li> <li>● Nature of offense/charges</li> <li>● Criminal history</li> <li>● History of sexual victimization</li> <li>● History of sexual assault</li> <li>● Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming</li> <li>● Inmates own perception of vulnerability</li> <li>● History of assaultive behavior</li> <li>● Record of escapes and/or attempted escapes</li> <li>● Prior adjustments to incarcerations</li> <li>● Medical history and current physical condition</li> <li>● Mental and emotional stability</li> <li>● Inmate separations/enemies of record</li> <li>● Prior suicidal history and behavior</li> <li>● Treatment needs</li> <li>● Academic and vocational needs</li> <li>● Availability and participation in programs and services</li> <li>● Court status/Sentence</li> <li>● Current behavior and attitude</li> <li>● Language status</li> </ul> <p>Facility staff are required to conduct progress reviews of each inmate. Progress reviews are conducted whenever there is a significant change in an inmate's legal status, behavior, disciplinary action, programming or work participation to determine if the inmate is</p>

appropriately classified. When there have been no significant changes, the facility is required to conduct a progress review at least every 30 days.

The agency allows staff to discipline an inmate for failing to cooperate and/or failing to complete the classification process. The agency's policy includes exceptions in which an inmate cannot be disciplined for failing to cooperate or complete the classification process. The following exceptions are included in the agency's policy:

- When the inmate has a mental, physical, or developmental disability;
- Not disclosing complete information in response to whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- Not disclosing previously experienced sexual victimization; and
- Not disclosing the inmates own perception of vulnerability.

The agency's, Dissemination of Information/Facility Adjustment Reports policy stipulates an inmate's Case Management File is available to those on a need-to-know basis. Any outside agency requesting information from an inmate's Case Management File must submit a formal written request.

**Evidence Relied Upon:**

Policy - 7-103 Classification Criteria, pg. 5-6

Policy - 7-203 Exceptions to Standard Initial Processing, pg. 4

Policy - 7-306 Progress Review, pg. 3

Policy - 7-308 Dissemination of Information/Facility Adjustment Reports, pg. 4-5

Questionnaire - Initial Housing Assessments

30-Day Reviews

Inmate Activity Logs

Interview with Staff

Interview with Inmates

**Analysis/Reasoning:**

Each inmate that arrives at the Arlington County Detention Facility is escorted into the intake area. During the intake process each inmate is screened by a medical and mental health professional. The Case Manager meets with each inmate upon arrival at the facility. Each inmate is asked questions from the Questionnaire-Initial Housing Assessment form. The screening occurs in the intake area within hours of the inmate's arrival to the facility. The Auditor conducted a review of 30 inmate classification records. Each inmate record maintained a Questionnaire-Initial Housing Assessment form. Each inmate had been appropriately screened within 8 hours of their arrival. The Auditor discovered the following determinations within the 30 records:

- 4 Inmates who reported suffering sexual victimization;

- 3 Inmates who identified as gay, lesbian or bisexual;
- 1 Inmate who identified as transgender;
- 2 Inmates who reported a physical disability;
- 5 Inmates who committed a sex offense;
- 16 Inmates who reported a mental illness;
- 4 Inmates who felt vulnerable; and
- 1 Inmate who was perceived as gay.

Each inmate's file reviewed contained a reassessment of each inmate's risk of sexual victimization or abusiveness within 30 days of their initial intake screening, excluding those who were released prior to the reassessment. The Case Manager conducted the reassessments and input the information in the Daily Activity Log. The Auditor observed the files of inmates who had filed an allegation of sexual abuse while housed at the facility. The Case Manager conducted a reassessment following the allegation of sexual abuse.

The Auditor conducted a formal interview with a Case Manager. The Auditor discussed the risk screening process with the Case Manager. He was asked if he uses his professional judgement when determining an inmate's risk level. The Case Manager stated he does utilize his professional judgement when conducting a risk screening and assessment. The Auditor asked if the Case Manager has received a request or referral to conduct a reassessment of an inmate. The Case Manager had not received such. The Case Manager was asked if he has conducted reassessments of inmates following an allegation of sexual abuse. The Auditor was informed inmates are reassessed following a sexual abuse incident and he had conducted such assessments.

The Auditor asked the Case Manager how he classifies an inmate if the inmate refuses to answer questions related to sexual abuse during the screening process. The Auditor was informed the classification process continues and an appropriate classification decision is made, even if the inmate refuses to answer questions. The Case Manager uses his professional judgement and all provided information to determine the inmate's level of risk. The Auditor asked if the Case Manager disciplines an inmate for refusing to answer questions related to sexual abuse during the risk screening. The Case Manager stated no inmate is disciplined for refusing to answer the risk screening questions.

The Auditor asked various personnel who had access to the information obtained from the risk screening. Staff explained the information obtained from the risk screening is maintained in the inmate's electronic record. Each staff member has a unique username and password. Access to the information obtained from the risk screening is limited to medical and mental health practitioners, classification, supervisors and staff who make housing decisions. ACSO Deputies have access to the risk screening. The Auditor determined deputies have the authority to move inmates from cells within a housing unit. Access to the risk screening is provided to deputies so they can ensure the inmate's safety prior to making a room change. Deputies are bound by agency policy to only share the information with those who have a need to know.

The Auditor conducted formal interviews with inmates. All inmates targeted for interviews and randomly chosen for interviews were asked if they had been asked questions after their arrival to the facility. Inmates stated a Case Manager asked questions after their arrival. The Auditor asked each inmate if anyone at the facility had asked them the same questions after being booked into the facility. Inmates stated they had not been questioned again. The questions

asked align with the requirements of this standard.

The facility does not conduct a reassessment of vulnerability and aggressiveness upon transfer to another facility because the Arlington County Sheriff's Office operates one facility. Inmates who have been in the facility multiple times informed the Auditor they have been asked questions during the booking process each time they have been incarcerated in the Arlington County Detention Facility.

At the time of the Audit there were no inmates detained solely for civil immigration purposes.

**Conclusion:**

The facility's Case Managers are attempting to discover inmate levels of risk of sexual victimization or sexual aggressiveness during the booking process and within 30 days of an inmate's arrival based upon additional information and incidents or referrals. The Auditor reviewed the agency's policies, procedures, questionnaire, inmate records and interviewed staff and inmates to determine the facility meets the requirements of this standard.

The Auditor observed one of the facility's risk screening questions could provide misleading information. The questions asks, "Have you ever been the victim or witness of Sexual Misconduct/Rape/Sexual Assault at a Correctional Facility?" If an inmate answers yes, it could mislead staff to believe the inmate was a victim even though the inmate may have witnessed an incident. The questionnaire does allow staff to include a comment in the comments section when the inmate answers yes to the question. The Auditor discussed this observations with command staff.

115.42	<b>Use of screening information</b>
	<p data-bbox="248 168 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 536 365"><b>Auditor Discussion:</b></p> <p data-bbox="248 405 1485 775">The Arlington County Sheriff's Office has policies in place to use information received from the risk screening to inform housing, bed, work, education, and program assignments. Policy prohibits any form of discriminatory bias concerning race, gender, color, creed, or national origin, political or religious beliefs or economic status during the classification of inmates. The facility uses information obtained from the risk screening to begin its three-phase approach in determining housing, custody levels, emergency needs, treatment programming and services and work assignments. The classification process includes an individual interview between the inmate and Inmate Services Staff. Inmate Services Staff make individual determinations of each inmate.</p> <p data-bbox="248 819 1474 1234">The ACSO policy stipulates all transgender and intersex inmates will be classified and assigned housing based on their safety/security needs, housing availability, gender identity and genitalia. Transgender and intersex inmates are assessed by intake staff for potential vulnerabilities in the general population and referred to the case manager. Policy requires transgender and intersex inmates are processed and housed safely and effectively and conducive to the inmate's needs. Each transgender and intersex inmate is afforded the opportunity to request and receive protective custody and be housed in a single cell in the intake housing unit consistent with the gender identified at intake for no more than 72 hours, excluding weekends, holidays and emergencies, until classification and housing needs can be assessed by the case manager.</p> <p data-bbox="248 1279 1465 1435">The Case Manager is required by policy to conduct a re-classification and custody assessment after each inmate is initially classified. The Case Manager conducts the re-classification assessment every 120 days following the inmate's initial classification, to include transgender and intersex inmates. the re-classification is conducted to:</p> <ul data-bbox="300 1507 1369 1666" style="list-style-type: none"> <li>● Document any status change that has not been otherwise noted;</li> <li>● Ensure the inmate's present classification and custody level assignments are still appropriate; and</li> <li>● Ensure the promotion of a positive ACDF adjustment.</li> </ul> <p data-bbox="248 1711 1474 1868">The Case Manager is required to discuss each inmate's adjustment with at least one Housing Unit Deputy who has regular contact with the inmate. Each inmate is interviewed by the Case Manager during the 120 day re-classification. The Case Manager is required to review the following:</p> <ul data-bbox="300 1939 735 2141" style="list-style-type: none"> <li>● Criminal charges;</li> <li>● Criminal history;</li> <li>● Escape history;</li> <li>● Previous institutional behavior;</li> <li>● Current institutional behavior;</li> </ul>

- Program participation; and
- Housing Unit Deputy observation of the inmate.

**Evidence Relied Upon:**

Policy - 7-102 Classification System, pg. 4

Policy - 7-103 Classification Criteria, pg. 5

Policy - 7-403 Re-Classification, pg. 2-3

Policy - 10-201 Hygiene, pg. 1

Policy - 8-902 Housing Assignments, pg. 3

Questionnaire: Initial Housing Assessments

Interviews with Staff

Interviews with Inmates

Observations

**Analysis/Reasoning:**

The Auditor reviewed 30 inmate classification records. Of the records reviewed there was 1 inmate who identified as transgender and 3 who identified as lesbian, gay or bisexual. The classification records reveal the Case Manager made individualized considerations when determining each inmate's housing, bed, work and other assignments to ensure each inmate was maintained safely in the facility. The assessment form considers an inmate's own views of their safety when determining assignments. A review of records revealed 4 inmates informed the Case Manager they felt vulnerable during their risk assessment. The Auditor observed Case Management is utilizing information obtained from the risk screening to assign facility housing, bed, and work assignments to ensure those inmates are protected. When inmates submit a request to attend programs and educational classes the Case Manager ensure's those at risk of victimization are not placed in a program or work with those identified as potential abusers.

Case Management considers an inmate's own perceptions of their safety before making classification decisions. The Questionnaire-Initial Housing Assessment has a comment section where the staff member documents his/her perception of how the inmate presents him/herself. The Auditor observed 1 inmate was perceived as being gay by a Case Manager when reviewing inmate classification records. The Auditor conducted formal interviews with inmates who identified as gay, lesbian and bisexual. Each was asked if they were housed in a unit that is designated for LGBTI inmates. None were housed in a unit designated as such.

The transgender inmate was released from the facility prior to the Auditor's arrival. The Auditor reviewed the file of the transgender inmate. The Auditor observed a Case Manager met with the transgender inmate on multiple occasions to discuss the inmates status and adjustment in the facility. The Auditor was informed command staff make periodic rounds and talk to the population to address any concerns as well. The Auditor observed the transgender inmate had met with a mental health practitioner while at the facility.

The Auditor formally interviewed a Case Manager. The Auditor discussed the classification process with the Case Manager. The Auditor was informed the each inmate is asked questions regarding their own perception regarding their safety in the facility. The Auditor asked how often the Case Manager meets with transgender inmates. The Case Manager stated he meets with transgenders monthly to conduct a 30 day review. The Case Manager stated he was aware the PREA standards require him to meet with transgender inmates at least two times each year.

The auditor observed all facility housing units during a detailed tour of the facility. While touring, the Auditor observed all shower and restroom areas. Each inmate, including transgenders, can shower, change clothes and use the restroom without staff of the opposite gender seeing them fully naked. Each inmate and randomly chosen staff member interviewed was asked if inmates can shower without staff of the opposite gender seeing them fully naked. All responded "yes."

At the time of the audit the Arlington County Detention Facility was not under a consent decree, legal settlement, or legal judgement for the purpose of protecting lesbian, gay, bisexual, transgender or intersex inmates.

**Conclusion:**

The Auditor concluded Case Management is making individualized determinations when assigning inmate's housing, bed, work, programming and education assignments. The agency has appropriate policies, procedures and practices in place to protect those identified at high risk of victimization. Transgender and intersex inmates can shower separately from other inmates. The Auditor conducted a thorough review of policies, procedures, classification records, risk screenings, made observations and interviewed staff and inmates to determine the facility meets the requirements of this standard.

115.43	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office, Authority to Place policy allows Inmate Services staff and/or the Shift Commander to place an inmate in Protective Custody when placement within the general population would pose a threat to their safety and when no reasonable alternatives are available. Each placement into protective custody must be reviewed and approved by a Classification Committee within 24 hours of placement. Policy states, "Whenever possible, a Classification Committee reviews all placements prior to the inmate's movement into Protective Custody." The staff member placing an inmate into protective custody is required to notify medical and to document the reason for placement.</p> <p>Policy requires inmates placed in special management are provided maximum access to programs and services based upon scheduling or services provided at the Unit. The agency's, Status Review policy stipulates the status of each inmate in Protective Custody is reviewed by Inmate Services, Medical and Mental Health staff within 24 hours of initial placement to Protective Custody. Policy requires the review process to continue every seven days until the inmate is released from Protective Custody.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 8-902 Housing Assignments, pg. 1, 3-4</p> <p>Policy - 8-301 Authority to Place, pg. 1</p> <p>Policy - 7-202 Initial Housing Assessment, pg. 2-3</p> <p>Policy - 5-229 Inmate Sexual Misconduct/Sexual Assault, pg. 27</p> <p>Policy - 7-404 Classification Committee, pg. 4-6</p> <p>Policy - 8-305 Status Review, pg. 6</p> <p>Housing Records</p> <p>Classification Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p>Observations</p> <p><b>Analysis/Reasoning:</b></p> <p>The facility reported no inmates were placed in involuntary segregated housing for their protection as a result of being identified as high risk of sexual victimization. The Auditor reviewed housing and classification records and discovered no evidence an inmate had been</p>

identified at high risk of sexual victimization and placed in involuntary segregated housing as a result of such identification.

The Auditor conducted formal interviews with case management staff. The Auditor discussed the process of placing an inmate identified at high risk of sexual victimization in involuntary segregated housing. The Case Manager informed the Auditor an immediate assessment is conducted to view available housing alternatives. The Auditor was informed the Arlington County Detention Facility has numerous housing units and therefore can separate those identified as high risk of sexual victimization without resorting to involuntary segregated housing. The Auditor asked in the case an inmate was placed in involuntary segregated housing if they can attend programs, education, work and/or receive other privileges. The Case Manager stated inmates do receive such as long as no security concerns exist. The Auditor was informed the facility has a Protective Custody unit and no inmates in protective custody lose privileges. The Case Manager was aware a monthly review must take place if involuntary segregated housing extended beyond 30 days. The Case Manager was also aware the requirement to document restrictions on education, work, programs and privileges. The Auditor was informed the facility conducts a weekly review of all inmates in segregated housing.

The Auditor conducted a formal interview with a deputy who supervises inmates in segregated housing. The deputy was asked if inmates in protective custody receive access to programs, privileges, work and education. The Auditor was informed inmates in protective custody do not lose privileges and opportunities as a result of their placement. He was asked if he documents any restrictions to such. The Auditor was informed restrictions to work, education, programs and privileges are typically documented and forwarded to the housing unit for staff to follow the restrictive order. In the event the deputy restricts access he notifies his supervisor prior to the restriction and documents in the logbook. The Auditor asked the deputy if he has supervised an inmate in segregated housing who had been identified at high risk of sexual victimization and placed in segregated housing for his/her protection. The deputy was unaware of such.

The Auditor conducted a detailed tour of the facility. Observations were made of each inmate housing unit. The Auditor observed numerous areas which can house inmates to ensure those identified at high risk of sexual victimization are protected from sexual abusers and without placing the inmate in involuntary segregated housing.

The Auditor conducted an interview with inmates who reported an allegation of sexual abuse within the previous 12 months. The Auditor asked each if his/her housing unit changed after making the allegation. Through interviews, the Auditor determined no inmate was placed in involuntary segregated housing for his/her protection. The Auditor asked each if he/she had any contact with the person who was alleged to have committed the act of sexual abuse. None of the inmates had further contact with their alleged abuser.

**Conclusion:**

The facility has appropriate procedures in place to ensure inmates identified at high risk of sexual victimization who are placed in involuntary segregated housing receive appropriate placement, reviews and other privileges. The Auditor reviewed ACSO policies, procedures, classification records, housing records, made observations and interviewed staff and inmates to determine the ACSO meets the requirements of this standard.

The facility's protective custody housing unit has 8 beds. In the event the protective custody housing unit is full any inmate placed on protective custody status would have to be placed in the special management housing unit. The Auditor recommended the agency consider adding language in its policy that requires the facility document opportunities that are limited, the duration of the limitation, and the reason for limitations for those on Protective Custody for the protection from sexual abuse. The recommendation was made in the event a supervisor or Case Manager places an inmate in Protective Custody in the special management housing unit against his/her will to ensure their protection from sexual abuse. If a staff member refers to policy after placing an inmate in special management for this reason the requirements of documenting any restriction would be clear.

115.51	<b>Inmate reporting</b>
	<p data-bbox="248 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="248 327 536 360"><b>Auditor Discussion:</b></p> <p data-bbox="248 400 1469 689">The Arlington County Sheriff's Office policy is to provide inmates with multiple internal ways to report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Agency policy requires confidential disclosing of incidents of rape, sexual assault, sexual misconduct, sexual contact, sexual abuse and sexual harassment to a Sheriff's Office employee either verbally or in writing. Inmates at the Arlington County Detention Facility may report in the following manners:</p> <ul data-bbox="300 757 1430 1093" style="list-style-type: none"> <li>• Report to any staff member, including medical, counseling, and mental health staff - verbally or in writing;</li> <li>• Telephone - outside victim advocacy group</li> <li>• Mail - Doorways for Women and Families</li> <li>• Virginia Sexual and Domestic Violence Action Alliance</li> <li>• National Sexual Assault Hotline</li> <li>• Grievance</li> <li>• Having a friend or relative use the online reporting system</li> </ul> <p data-bbox="248 1128 1458 1375">The agency's Code of Ethics requires, "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 (this includes rumors and observations), the staff member or contract employee who receives the information shall immediately inform the Director of Corrections or Shift Commander. Failure to do so may result in disciplinary action, up to and including dismissal."</p> <p data-bbox="248 1415 1485 1576">The agency has a policy that requires foreign nationals be provided information how to contact relevant consulate officials. The ACDF maintains a Foreign Consulate Offices handbook to provide to foreign nationals. The handbook includes contact information and for all consulate offices in the United States.</p> <p data-bbox="248 1617 1426 1695">The Arlington County Detention Facility does not house inmates solely for civil immigration purposes.</p> <p data-bbox="248 1736 576 1769"><b>Evidence Relied Upon:</b></p> <p data-bbox="248 1809 1082 1843">Policy - 5-229 Inmate Sexual Misconduct/Sexual Assault, pg. 27</p> <p data-bbox="248 1883 1101 1917">Policy - 2-302 Harassment/Sexual Harassment/Misconduct, pg. 6</p> <p data-bbox="248 1957 1042 1991">Policy - 2-307 Sexual Misconduct Against Inmates, pg. 10-11</p> <p data-bbox="248 2031 804 2065">Policy - 6-116 Diplomatic Immunity, pg. 13</p> <p data-bbox="248 2105 815 2139">Policy - 6-117 Foreign Nationals, pg. 14-15</p>

Memorandum of Agreement with Arlington County Department of Human Services and Doorways for Women and Families

Sexual Misconduct Brochure

Code of Ethics Booklet

Code of Ethics Receipts

Inmate Handbook, pg. 6, 7, 65

Consular Handout

Foreign Consulates in the United States Book

Investigations Tracking

Investigative Records

Inmate Records

ACSO Website

Interviews with Staff

Interviews with Inmates

**Analysis/Reasoning:**

The Auditor reviewed the agency's Inmate Handbook and the sexual assault brochure. Each inmate receives a handbook and a copy of the brochure during booking. Inmates are informed they may report sexual abuse, assault, harassment or staff sexual misconduct. The Auditor observed the following reporting avenues in the Inmate Handbook and sexual assault brochure:

- Directly to the housing unit deputy
- Tell any staff member of the Sheriff's Office to include medical, counselors, or mental health staff
- File an emergency grievance
- Have a friend or relative use the online reporting system locate on the website (website provided)
- Call the victim advocacy group using the inmate phone system by dialing 4848
- Write or mail reports to Doorways for Women and Families (address provided)

Among others, the Inmate Handbook includes the telephone numbers and addresses for Virginia Sexual and Domestic Violence Action Alliance (VSDVAA), National Sexual Assault Hotline, Doorways for Women and Families, American Civil Liberties Union, National Prison Project and Immigration Services.

The Auditor reviewed the Memorandum of Agreement between the Arlington County Sheriff's Office and the Doorways for Women and Families. The MOA stipulates the Doorways for Women and Families maintains a 24-hour crisis intervention counseling hotline. The Auditor

determined the Doorways for Women and Families would not be able to immediately forward reports of sexual abuse to the Arlington County Sheriff's Office. The ACSO is currently in the testing phase of reporting allegations of sexual abuse through the County's Emergency Communications Center (ECC). When an inmate reports an allegation of sexual abuse through the ECC phone number the facility's command staff will be alerted of the notification. The command staff would then forward the allegation to an investigator to ensure the allegation would be investigated.

The Auditor toured each housing unit and service areas in the facility. Posters are strategically located that inform inmates how to report allegations of sexual harassment and sexual abuse. The posters inform inmates to immediately report an allegation of sexual abuse or sexual harassment to the nearest staff member.

The Auditor reviewed facility training records and training curriculum. ACSO employees are provided training that includes the reporting of sexual abuse and sexual harassment, staff neglect, and retaliation for reporting allegations or cooperating with investigators. The training includes the staff's avenues for privately reporting allegations of sexual abuse and sexual harassment. All security and non-security staff received this training. Staff are informed they may privately report abuse by submitting a Harassment Complaint form to his/her supervisor or verbally informing a staff member, Investigator or the PREA Coordinator.

The Auditor reviewed the ACSO website. The website includes the agency's PREA information. The public is informed they may report an allegation on behalf of an inmate directly to the PREA Coordinator. The agency website includes the name of the PREA Coordinator and the telephone number for reporting such.

The Auditor conducted formal interviews with randomly chosen staff. Each staff member was asked if he/she is required to accept any and all reports of sexual abuse, sexual harassment, retaliation and staff neglect. Staff informed the Auditor they are required to accept such reports. Staff stated they are required to report those allegations immediately and include the information on a written Incident Report. Each staff member was asked how they would privately report an allegation of sexual abuse or sexual harassment. The Auditor was informed staff would inform their supervisor or other member of the chain of command, tell the PREA Coordinator or an investigator or use the PREA Hotline.

The Auditor conducted formal interviews with inmates. Inmates were asked to explain how they would report an allegation of sexual abuse, sexual harassment, retaliation, or staff neglect. Collectively, the inmate population stated they would call the PREA Hotline, tell a staff member, write a request, write an emergency grievance, or tell a family member or friend to report the allegation. All inmates interviewed stated they would verbally inform a staff member. Inmates were asked if they could make an allegation without having to give their name. Inmates were aware they could make an allegation anonymously. Inmates informed the Auditor they were confident they could verbally inform a staff member and the allegation would be handled appropriately and be kept confidential.

The Auditor reviewed investigative records. Investigative records reveal staff are accepting verbal reports of sexual abuse and sexual harassment and including the information on a written report. The reports reveal staff are immediately reporting the information to their supervisors. The Auditor questioned staff during interviews regarding accepting verbal and anonymous reports. Staff informed the Auditor they are required to report any and

all knowledge, suspicion or information related to sexual abuse and sexual harassment.

At the time of the audit there were no inmates detained solely for civil immigration purposes.

**Conclusion:**

The Auditor made a recommendation for the facility to consider adding inmates may report allegations of retaliation and staff neglect in its Inmate Handbook or sexual abuse brochure.

The Arlington County Sheriff's Office provides multiple ways for inmates to report allegations of sexual abuse and sexual harassment. The facility is currently working towards a more immediate notification of sexual abuse and sexual harassment by a public entity. The facility requires staff to accept, report and document all allegations of sexual abuse and sexual harassment. The Auditor reviewed the agency's policies, procedures, Inmate Handbook, Posters, Website, MOA, investigative records, and interviewed staff and inmates and determined the facility meets the requirements of this standard.

115.52	<b>Exhaustion of administrative remedies</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 536 360"><b>Auditor Discussion:</b></p> <p data-bbox="252 400 1485 734">The Arlington County Sheriff's Office is not exempt from this standard as it maintains procedures to address inmate grievances alleging sexual abuse. The grievance policy stipulates alleged incidents of sexual misconduct, sexual contact, sexual abuse and sexual harassment are grievable issues. Agency policy does not impose a time limit on any portion of a grievance alleging sexual abuse and does not impose a time limit when an inmate may file a grievance alleging sexual abuse. Inmates are not required to exhaust informal means such as mediations or participate in any process which requires interaction with the alleged perpetrator.</p> <p data-bbox="252 775 1481 981">Any ACDF inmate wishing to submit a grievance alleging sexual abuse against a staff member may do so without submitting the grievance to the staff member who is the subject of complaint. Inmates have the ability to submit a grievance in a grievance box or provide it to a staff member. The policy prohibits an employee who is the subject of complaint from being assigned to the administrative or criminal investigation.</p> <p data-bbox="252 1021 1469 1267">ACSO policy requires the administrative investigation of a grievance be completed no later than 90 days from the filing of the complaint or grievance or within 5 days of filing an emergency grievance. Policy stipulates 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, the inmate may consider the absence of a response to be a denial at that level.</p> <p data-bbox="252 1308 1437 1641">The Arlington County Sheriff's Office allows third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates to assist inmates in filing requests for grievances relating to allegations of sexual abuse and to file such requests on behalf of the inmate. The facility requires a condition of processing the request that the alleged victim agree to have the request filed on his/her behalf. the alleged victim must personally pursue subsequent steps in accordance with the grievance procedure. When an inmate declines to have the request processed on his/her behalf, the agency requires the inmate's decision be documented.</p> <p data-bbox="252 1682 1481 2056">ACSO policy requires inmates to submit allegations of sexual abuse or substantial risk of imminent sexual abuse using the emergency grievance process. Emergency grievances alleging sexual abuse or a substantial risk of imminent sexual abuse are immediately forwarded to the Shift Commander to determine whether the matter is actually immediately harmful of life-threatening. The Shift Commander is required to take immediate action to protect the inmate. The Shift Commander or Director of Corrections is required to issue a first level response within 48 hours and a final decision within 5 calendar days for emergency grievances. Staff responses to the inmate regarding an emergency grievance are required to include the nature of the problem and the steps taken to resolve it.</p> <p data-bbox="252 2096 576 2130"><b>Evidence Relied Upon:</b></p>

Policy - 12-404 Emergency Grievances, pg. 4

Policy - 12-403 Response to Grievances, pg. 2

Policy - 12-402 Filing Grievances, pg. 2

Policy - 2-307 Sexual Misconduct Against Inmates, pg. 12-13

Investigations Tracking

Investigative Records

Inmate Discipline Records

Interviews with Staff

Interviews with Inmates

**Analysis/Reasoning:**

The Auditor conducted formal interviews with inmates. Inmates were asked to explain the various ways of reporting sexual abuse allegations. Each inmate interviewed was aware the facility allows them to report allegations of sexual abuse using an emergency grievance form. One inmate informed the Auditor he made a verbal allegation and submitted an emergency grievance alleging sexual abuse. None of the inmates interviewed by the Auditor had filed an emergency grievance alleging an imminent risk of sexual abuse. The Auditor asked the inmate how quickly staff responded to his emergency grievance. The inmate informed the Auditor he met with an investigator the same day. The Auditor asked if he received a response to the emergency grievance. The inmate did receive a response within a couple days. The allegation was unfounded by the investigator. All inmates interviewed by the Auditor were aware they could file an emergency grievance without including their name.

The Auditor conducted interviews with facility staff. Staff were asked if inmates could submit an emergency grievance alleging sexual abuse and/or alleging an imminent risk of sexual abuse. Each staff member was aware inmates could file such grievances. Supervisors interviewed by the Auditor explained their responsibilities in responding to emergency grievances alleging an imminent risk of sexual abuse. Supervisors informed the Auditor they take immediate action to ensure the inmate's safety. The Auditor asked supervisors to explain what steps they take to ensure the inmate's safety. Responses included they would remove the inmate from the housing unit and investigate further. The Auditor was informed supervisors can make housing changes to ensure the inmate is separated from the likely abuser. Supervisors stated they do not always remove the alleged victim, sometimes they remove the alleged abuser; each situation is handled individually. The Auditor was informed an initial response is provided to emergency grievances within 48 hours and a final decision is rendered within 5 days. The Auditor asked what is included in the final written response. The Auditor was informed they include whether the inmate is at risk and the supervisors actions taken in response to the allegation.

The Auditor reviewed the ACSO Inmate Handbook. The Inmate Handbook includes the ACSO grievance procedures. The Handbook includes a section of grievable issues. The Auditor observed allegations of sexual abuse are considered grievable issues and are submitted as an emergency grievance.

The Arlington County Sheriff's Office reported three inmates submitted a grievance alleging sexual abuse within the previous 12 months. There were no inmates who alleged an imminent risk of sexual abuse on an emergency grievance within the previous 12 months. Each grievance was investigated.

The Auditor reviewed the record of an inmate who filed a grievance alleging sexual abuse against another inmate. The inmate received a disciplinary charge for filing a false allegation. The discipline claimed the allegation was falsely made. The inmate attended a formal disciplinary hearing. At the onset of the discipline hearing the inmate entered a plea of guilty. The investigative record revealed the inmate filed false sexual abuse accusations against another inmate.

**Conclusion:**

The Auditor determined the ACSO has appropriate policies and procedures in place for addressing inmate grievances alleging sexual abuse and emergency grievances alleging an imminent risk of sexual abuse. Facility staff understand those procedures and the inmate population is aware they can submit emergency grievances alleging sexual abuse and/or risk of imminent sexual abuse. The Auditor reviewed the agency's policies, procedures, Inmate Handbook and conducted interviews with staff and inmates to determine the facility meets the requirements of this standard.

The Auditor discussed the element of this standard that allows for an extension up to 70 days if the time to render a decision is insufficient. The Auditor informed the facility if the agency adds the extension in its policy investigators would be clear on the requirements of claiming and extension.

115.53	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office has a policy to offer and provide inmates with access to outside victim advocates for emotional supportive services related to sexual abuse that occurred in the Arlington County Detention Facility. Policy stipulates the Director of Corrections or designee arrange counseling services, if warranted, to inmates who make allegations of sexual misconduct, sexual contact, sexual abuse or sexual harassment. Inmates are provided mailing addresses and telephone numbers, including the toll-free hotline numbers where available, of local, State, and national victim advocacy or rape crisis organizations, consulate contact information for foreign nationals and Immigration Services.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 2-307 Sexual Misconduct Against Inmates, pg. 15</p> <p>Memorandum of Agreement with Arlington County Department of Human Services and Doorways for Women and Families</p> <p>PREA Reporting Guidelines Notice</p> <p>Inmate Handbook, pg. 6, 7, 65</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the ACSO Memorandum of Agreement with the Doorways for Women and Families. The MOA with the Doorways for Women and Families states the ACSO agrees to the following:</p> <ul style="list-style-type: none"> <li>● Partner with Doorways to train ACSO staff on signs of sexual violence as well as services available to detained victims;</li> <li>● Educate individuals detained in the ACDF on the availability of services for victims of sexual violence;</li> <li>● Provide telephone access to individuals detained in the ACDF who may need sexual abuse/harassment support services;</li> <li>● Request a Doorways counseling advocate for individuals detained in the ACDF who are victims of sexual violence who are experiencing trauma symptoms;</li> <li>● Provide transportation or arrange for transportation for SANE exams and request a Doorways advocate for the individual;</li> <li>● ACSO may attend the Arlington County Project Peace SART (Sexual Assault Response Team) training for additional knowledge and expertise around sexual violence. Law enforcement continuing education credit has been authorized by Northern Virginia</li> </ul>

The Memorandum of Agreement stipulates the Doorways for Women and Families agrees to the following:

- Twenty-four hour telephone crisis intervention counseling via Doorways 24-Hour Hotline;
- Crisis intervention counseling, advocacy, emotional support services related to sexual abuse/harassment, provide information and make referrals for victims of sexual violence who are detained in the Arlington County Detention Facility (ACDF) or in the ACSO's care;
- Twenty-four hour accompaniment support for SANE exams;
- Legal advocacy referrals to victims of sexual violence who participate in protective order hearings, preliminary hearings, trials, sentencing hearings and any other relevant legal proceedings; and
- Partner with ACSO to train, provide technical assistance (TA), and support staff on the signs of sexual violence and available services to detained victims.

The Auditor conducted formal interviews with inmates who filed an allegation of sexual abuse and randomly chosen inmates. Each was asked if they were aware of confidential support services. Most inmates were aware of confidential services. None of the inmates interviewed had contacted the Doorways for Women and Families for services. Inmates were asked if they knew communications with the Doorways for Women and Families would be kept confidential. Inmates understood communications with Doorways would remain confidential. Each inmate was asked if they had seen the posted materials in the housing units. All inmates interviewed were aware of the posted materials. Each was asked if he/she had received an Inmate Handbook and sexual abuse brochure; each had received both.

The Auditor reviewed the Arlington County Sheriff's Office posters, Inmate Handbook and sexual assault brochure. Inmates are informed through the materials they can call the Doorways for Women and Families for emotional supportive services. The materials are provided to each inmate upon arrival and posted in housing units. Materials inform inmates communications with the Doorways for Women and Families is not monitored by the facility. Inmates are informed communications with the Doorways for Women and Families may report information as required by mandatory reporting laws.

The Auditor conducted formal interviews with a facility investigator. The investigator informed the Auditor victims are offered confidential supportive services after an inmate suffers sexual abuse. Medical and mental health professionals informed the Auditor they speak to inmate victims regarding victim advocacy for supportive services.

At the time of the Audit there were no inmates detained solely for immigration purposes

**Conclusion:**

The facility maintains documentation it provides emotional support services for sexual abuse victims through written agreements. Contact information with the organization is provided to each inmate at the facility. The Auditor reviewed the ACSO policies, procedures, Memorandum of Agreement, Inmate Handbook, sexual assault brochure, posters and interviewed staff and inmates and determined the ACSO meets the requirements of this

standard.

115.54	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The facility's Code of Ethics requires the Sheriff's Office report all allegations of sexual abuse and harassment, including third party and anonymous reports, to the Internal Affairs Commander. The facility has a procedure to allow third-parties, including fellow inmates, staff members, attorneys and outside advocates to assist in filing requests for administrative remedies related to allegations of sexual abuse, and are permitted to file the requests on behalf of the inmate.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 12-404 Emergency Grievances, pg. 4</p> <p>Code of Ethics</p> <p>PREA Reporting Guidelines Notice</p> <p>ACSO Website</p> <p>Inmate Handbook</p> <p>Sexual Assault Brochure</p> <p>Investigative Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p>Observations</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the Arlington County Sheriff's Office website. The website informs the public how to make a report of sexual abuse or sexual harassment. The public is provided instructions to call the PREA Coordinator. The PREA Coordinator's name and telephone number are included on the website for third-party reporting. The ACSO Inmate Handbook and Sexual Assault Brochure informs inmates they can have a third-party report sexual abuse and sexual harassment on their behalf. The agency's website address is provided to the inmate population. Each inmate is provided an Inmate Handbook and Sexual Assault Brochure during the intake process.</p> <p>The Auditor participated in a detailed tour of the Arlington County Detention Facility. During the tour the Auditor observed posted materials in all housing units and service areas. The ACSO materials inform inmates they may have a third party make an allegation of sexual abuse and sexual harassment on their behalf.</p>

The Auditor conducted formal interviews with staff. Staff were asked about accepting reports of sexual abuse and sexual harassment. Each staff member stated they were required to accept all reports of sexual abuse and sexual harassment, including third party reports. Staff stated they immediately report the allegation to their supervisor and document the information on an Incident Report.

The Auditor conducted formal interviews with inmates. Each inmate was asked what avenues were available for making an allegation of sexual abuse or sexual harassment. The inmates stated they could tell a staff member, submitting an emergency grievance, report through the phone, or have another person make the allegation on their behalf. Each inmate understood how to have a third party file an allegation on their behalf.

The Auditor reviewed investigative records. Evidence was observed that third party allegations of sexual abuse and sexual harassment were reported to facility personnel. The allegations were immediately forwarded to a supervisor or facility investigator. Each allegation was documented on a written Incident Report. The Auditor formally interviewed a facility investigator. Facility investigators have conducted investigations of third party complaints of sexual abuse and sexual harassment.

**Conclusion:**

The Auditor determined the facility accepts all reports, including third party reports of sexual abuse and sexual harassment. The public is informed through the facility's website how to make a third party report on behalf of inmates. The Auditor reviewed agency policy, procedures, website, Inmate Handbook, Sexual Assault Brochure, investigative records, interviewed staff and inmates and made observations to determine the facility meets the requirements of this standard.

115.61	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>All ACSO staff, contractors and volunteers are required to immediately report any knowledge, suspicion, or information regarding an incident of sexual contact, sexual abuse and sexual harassment. The agency's policy includes, but is not limited to, the following acts as dereliction of duty:</p> <ul style="list-style-type: none"> <li>• Failure of an employee to report a known violation by another employee, either informed of or observed, concerning violations of law, rules, regulations or policies affecting safety or security; and</li> <li>• Failure to make a written report when required to do so by policy or by order.</li> </ul> <p>The policy prohibits staff from conducting independent investigations or inquiries into the circumstances related to an alleged incident, except for those individuals responsible for conducting the investigation.</p> <p>Medical and mental health practitioners are required to report sexual abuse and to inform inmates of their duty to report, and the limitations of confidentiality at the initiation of services. The agency is required to ensure an allegation of an alleged victim under the age of 18 or an inmate considered a vulnerable adult under State or applicable statute, is reported to the appropriate State or local services agency under applicable mandatory reporting laws.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy 2-307 Sexual Misconduct Against Inmates, pg. 10-13, 16</p> <p>Policy 2-301 Code of Ethics/Conduct, pg. 4, 6</p> <p>Policy - 13-106 Sharing of Information/Confidentiality, pg. 8</p> <p>Special Directive</p> <p>Training Records</p> <p>Training Curriculum</p> <p>Investigative Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The agency's policy included a requirement for staff to report allegations of sexual abuse and sexual harassment. The Auditor did not observe a requirement for staff to report retaliation against inmates or staff. Prior to the Auditor's arrival, the Auditor informed the PREA</p>

Compliance Manager. The PREA Compliance Manager discussed the policy with facility command staff. During the audit the facility revised its policy. Policy 2-307 Sexual Misconduct Against Inmates now requires, "All staff shall immediately report retaliation against inmates or staff who reported such an incident." The Director of Corrections issued a Special Directive on August 19, 2020 to all facility personnel regarding the policy revision.

The Auditor reviewed investigative records of inmates who filed an allegation of sexual abuse and sexual harassment. The Auditor observed Incident Reports in investigative records. The Incident Reports included allegations that were made verbally to staff. The auditor observed facility investigators conducted investigations of allegations made anonymously and those made by third parties. Incident Reports reveal staff accepted a verbal report made by inmates and immediately reported the allegation to their supervisor. Supervisors ensured the inmates' safety and the facility investigated each allegation.

The Auditor conducted formal interviews with randomly selected and specifically targeted staff at the Arlington County Detention Facility. Each staff member was asked if they were required to report any and all knowledge, suspicion or information related to sexual abuse or sexual harassment. The Auditor was informed staff was required to report the information immediately to a supervisor. The Auditor asked each staff member if they were required to report knowledge, suspicion or information related to retaliation, staff neglect or a violation of duties which may have contributed to sexual abuse or sexual harassment. All staff informed the Auditor they were required to report such. Staff stated they are required to "report and document everything." Staff informed the Auditor they were required to document such allegations on an Incident Report. Staff informed the Auditor they submit Incident Reports promptly after an allegation or incident.

During interviews with staff the Auditor questioned staff to gain an understanding of staff's ability to maintain confidentiality with any reported information obtained related to sexual abuse or sexual harassment. The Auditor asked staff to explain who they report or discuss details of a sexual abuse or sexual harassment allegation with. Staff informed the Auditor they only discuss details with supervisors, medical and investigators. Staff understood the agency's policy requiring them to discuss information with those with a need to know.

The Auditor conducted formal interviews with Corizon medical and mental health practitioners. Each was asked if they were required 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 of sexual abuse. Each informed the Auditor they were required to report such. The Auditor asked how they would report the information. Medical and mental health practitioners informed the Auditor they immediately report the information to the Shift Commander or Sergeant and submit a report regarding the information. Practitioners stated they are required to inform inmates of their duty to report and the limitations on confidentiality at the initiation of services. Inmates are provided a consent form at the initiation of services.

The Auditor asked medical and mental health practitioners who they report information related to a sexual victimization that occurred in a community setting to. Medical and mental health practitioners stated they do not report community victimization without obtaining written informed consent from the inmate. The Auditor asked each if there has been a situation where they had to report sexual victimization that occurred in a community setting. Medical

and mental health practitioners stated they have not had a need to report such information. Each informed the Auditor they are mandatory reporters for youthful inmates. Practitioners stated they do not house youthful inmates and do not use a different consent form for youthful inmates if the facility did house such.

The Auditor conducted formal interviews with a facility investigator. The Auditor asked if the investigator had conducted investigations of allegations that were reported by third parties. The investigator had conducted an investigation into allegations made by a third party inmate. The Auditor asked if the investigator had conducted investigations that were made anonymously. The investigator had not conducted an investigation of an anonymous allegation. When asked how that investigation would take place, the Auditor was informed it would be investigated like all other allegations. The investigator was asked if an attempt is made to discover if staff actions or lack of actions contributed to an incident of sexual abuse. The Auditor was informed facility investigators do make such attempts.

The Auditor conducted formal interviews with randomly selected and specifically targeted inmates. Each inmate was asked if they were confident in staff's ability to maintain confidentiality of an allegation of sexual abuse after learning of a reported incident. All inmates interviewed stated the staff are responsive and felt confident staff would maintain confidentiality of the information.

The Auditor reviewed facility training curriculum. Training curriculum for staff, contractors and volunteers includes reporting of sexual abuse and sexual harassment allegations. Each staff, contractor and volunteer is required to read the agency's policies related to sexual abuse and sign denoting their understanding. The agency's training includes information how and what information staff, contractors and volunteers must report. The Auditor verified through training records each staff member, contractor and volunteer had received training how to report sexual abuse and sexual harassment information.

The Auditor was not able to interview a facility volunteer as volunteer services have been canceled to comply with facility operational changes due to COVID-19 mitigation practices. The Auditor did observe each volunteer had received training in their reporting requirements.

There were no youthful inmates housed at the facility at the time of the audit.

**Conclusion:**

The Auditor concluded staff, volunteers and contractors are aware of the ACSO requirement to report any knowledge, suspicion or information related to sexual abuse and sexual harassment. Staff understands the requirement to maintain confidentiality with the information obtained of an allegation. Interviews with medical and mental health practitioners reveal they understand the requirements for reporting sexual abuse that occurred in a community setting and for youthful inmates. The Auditor reviewed agency policies, procedures, training records, investigative records, training curriculum and conducted interviews with staff, contractors and inmates to determine the facility meets the requirements of this standard.

115.62	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office policy requires facility staff take immediate action to protect an inmate after learning an inmate is subject to a substantial risk of imminent sexual abuse. The facility assesses each inmate for potential vulnerabilities and tendencies for perpetrating sexual abuse upon arrival at the Arlington County Detention Facility. The agency's objective classification system ensures known abusers are separated from those at high risk of victimization. The agency's policy states, "The Arlington County Sheriff's Office does not condone nor tolerate any type of sexual misconduct, sexual contact, sexual abuse and sexual harassment toward any inmate(s). This Office will aggressively pursue any complaints, suspicions of sexual misconduct, up to and including prosecution under Virginia Code."</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 2-307 Sexual Misconduct Against Inmates, pg. 10</p> <p>Investigative Records</p> <p>Classification Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p>Observations</p> <p><b>Analysis/Reasoning:</b></p> <p>The facility reported no instance in the previous 12 months where facility personnel learned an inmate was identified at a substantial risk of imminent sexual abuse. There was no inmate who alleged an imminent risk of sexual abuse in the previous 12 months.</p> <p>The Auditor conducted a review of investigative records. Investigative records reveal staff take immediate action after learning of a sexual abuse incident. Staff immediately separate the alleged victim from the alleged perpetrator. The Auditor conducted formal interviews with randomly selected staff and staff first responders. Each staff member was asked what actions they would take if learning an inmate was at a substantial risk of imminent sexual abuse. Staff informed the Auditor they would immediately remove the inmate from the potential threat and stay with him/her. Staff stated they would immediately inform their supervisor so an investigation could take place.</p> <p>A review of inmate records reveal no alleged victim had been housed with an alleged perpetrator following an allegation of sexual abuse. The Auditor conducted formal interviews with inmates who made an allegation of sexual abuse at the facility. Each of those inmates were asked if they have been in contact with the alleged perpetrator following the allegation.</p>

Each stated they had not had further contact with the alleged perpetrator. Each was asked how quickly staff responded to their allegation of sexual abuse. The inmates informed the Auditor staff responded immediately. None of the alleged victims were placed in segregated housing as a result of their allegation.

The Auditor conducted formal interviews with facility supervisors. Facility supervisors were asked to explain what steps are taken to protect an inmate after learning the inmate was at a substantial risk of imminent sexual abuse. The Auditor was informed the potential victim and potential aggressor would be separated from one another. The facility investigator would immediately be notified so an investigation could begin to determine the risk.

The Auditor conducted formal interviews with randomly selected and specifically targeted inmates. The Auditor asked each if he/she felt safe in the facility. All inmates interviewed stated they felt safe in the facility. The Auditor asked each if they felt confident in staff's ability to maintain their safety. All inmates interviewed were confident in staff's ability to maintain their safety and confidentiality in the facility.

The Auditor participated in a detailed tour of the Arlington County Detention Facility. The Auditor observed the facility has multiple housing units on multiple floors to ensure inmates who are identified at a substantial risk of imminent sexual abuse could be housed safely from a potential aggressor.

**Conclusion:**

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

115.63	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The ACSO policy requires the Director of Corrections notify the head of the facility or appropriate office of the agency where an alleged sexual abuse occurred after receiving an allegation that an inmate was sexually abused while confined at another facility. The policy allows a designee make the notification in place of the Director of Corrections only when the Director of Corrections is on leave from the facility. Policy requires the notification be provided as soon as possible, but no later than 72 hours after receiving the notification. The ACSO policy requires the notification be documented.</p> <p>When the ACSO Director of Corrections or designee receives notification from another facility in regards to an inmate that was sexually abused while confinement at the ACDF, an immediate investigation will commence in compliance with ACSO policies and procedures.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 12-404 Emergency Grievances, pg. 4</p> <p>Investigations Tracking Mechanism</p> <p>Emails</p> <p>Interviews with Staff</p> <p><b>Analysis/Reasoning:</b></p> <p>The Arlington County Sheriff's Office reported there were eighteen (18) allegations received that an inmate had allegedly been sexually abused while confined at another facility. The Arlington County Sheriff's Office received one notification that a former ACSO inmate alleged being sexually abused while incarcerated at the ACDF. The former inmate called the ACDF and notified the facility himself while incarcerated at another facility. The Auditor reviewed notifications made by the Head of the Facility.</p> <p>The Auditor reviewed the record in which an inmate arrived at the ACDF and reported to staff he was sexually abused at another facility. The staff member sent an email to the PREA Coordinator after receiving the allegation. The PREA Coordinator sent an email to the other facility. The notification from the Arlington County Sheriff's Office was sent to the other facility within 24 hours after receiving the allegation from the inmate.</p> <p>The Auditor conducted interviews with ACSO staff. Each staff was asked what actions they take if an inmate alleges to have been sexually abused while confined at another facility. Staff informed the Auditor they would immediately notify their supervisor. Supervisors were asked what actions they would take when receiving such information. Supervisors stated they would inform the PREA Coordinator so the other facility can be notified. The Auditor asked the PREA Coordinator the actions he would take after learning this information. The PREA Coordinator stated he would ensure notification to the Sheriff and the other facility was made.</p>

The Auditor conducted a formal interview with the Director of Corrections. The Director was asked if she has ever made notifications to other facility after learning an inmate alleges he/she was sexually abused at the other facility. The Director informed the Auditor she has made such notifications. When asked how the notification are made, the Director stated she places a phone call to the other facility. The Auditor asked if the Director documents the notification. The Auditor was informed the telephone notification is followed with an email. The Director was asked how notifications are made in her absence. The PREA Coordinator makes notifications to other facilities in the absence of the Director of Corrections. The Director of Corrections informed the Auditor she ensures an investigation is conducted after receiving an allegation from another facility.

**Conclusion:**

The ACSO command staff understand the requirement to report allegations to other confinement facilities and to ensure allegations received are investigated. Staff members at the Arlington County Detention Facility understand the agency's requirement to immediately report allegations of sexual abuse and sexual harassment so allegations can be investigated. The Auditor reviewed the agency's policies, procedures, emails and interviewed staff and determined the agency meets the requirements of this standard.

115.64	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office maintains a policy that requires upon discovery of a credible allegation, staff immediately adhere to the following:</p> <ul style="list-style-type: none"> <li>• Contact and inform the Director of Corrections or designee of the incident;</li> <li>• Determine if the alleged victim requires placement under Protective Custody Status while maintaining constant supervision of the inmate;</li> <li>• Notify medical staff to respond and address any emergency, urgent, or necessary health concerns, while keeping the preservation of evidence intact, if possible;</li> <li>• Secure the area where the assault is alleged to have occurred as a possible crime scene;</li> <li>• Place the alleged perpetrator(s) in Administrative Segregation pending investigation of the complaint. Ensure that the alleged abuser does not take any actions that could destroy physical evidence. To include, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating;</li> <li>• The Sheriff, Chief Deputy or Division Director ensures the Internal Affairs Investigator and the ACPD Sex Offenses Unit have been notified; and</li> <li>• Mental Health staff is made available to provide crisis counseling to the victim and other inmates requesting services.</li> </ul> <p>The agency's Health Care policies require a deputy notify his/her Zone Supervisor, and immediately take the victim from the area of the assault to the medical unit.</p> <p>Non-security first responders in the Arlington County Detention Facility are required to request the alleged victim not take any actions that could destroy physical evidence and immediately notify a security staff member.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 5-229 Inmate Sexual Misconduct/Sexual Assault, pg. 28</p> <p>Policy - 13-202 Emergency Medical and Health Care Service, pg. 3</p> <p>Policy - 2-307 Sexual Misconduct Against Inmates, pg. 10-11</p> <p>Investigations Tracking Mechanism</p> <p>Special Directive</p> <p>PowerPoint Presentation</p> <p>Investigative Reports</p> <p>Interviews with Security Staff</p>

Interviews with Non-Security Staff

Interviews with Inmates

**Analysis/Reasoning:**

The Auditor observed the agency's policy stipulated, "The victim is not permitted to shower, drink, douche or change clothing until otherwise notified by the Medical Unit." The Auditor discussed the standard language with the PREA Compliance Manager and PREA Coordinator. Both were informed the standard requires to "request" the victim not perform those actions. While on site the facility revised its policy. The policy now reads, "Request that the alleged victim not shower, drink, douche or change clothing until otherwise notified by the Medical Unit. The Director of Corrections issued a special directive to all facility personnel on August 19, 2020 regarding the revised policy.

The Auditor reviewed the agency's training documents. Training curriculums include first responder duties. Security staff, contractors and volunteers are trained in their responsibilities as first responders. The Auditor verified each security staff, contractor and volunteers had been trained in their responsibilities as first responders.

The Auditor conducted interviews with security and non-security staff responders. All security first responders were asked to explain the actions they take when responding to a sexual abuse incident. First responders stated they would maintain separation of the victim and abuser and immediately notify the Shift Commander. Security staff stated they would request the victim and ensure the abuser not shower, eat, use the restroom, brush their teeth, drink or take any actions that could destroy physical evidence. The Auditor asked each what action they take regarding the crime scene. Staff stated they ensure the crime scene is secured and only the Arlington County Police Department investigator would be allowed in to process the evidence. During interviews the Auditor observed a pocket card issued to staff. The pocket card includes the required actions to take as a first responder to an incident of sexual abuse.

The Auditor reviewed the ACSO Coordinated Response plan. The coordinated response plan includes the required actions of security and non-security first responders to incidents of sexual abuse. The Auditor reviewed the agency's training records. Training curriculum includes first responder duties of both security and non-security personnel. The Auditor observed staff, contractors and volunteers have been trained to appropriately respond to incidents of sexual abuse.

The Auditor conducted formal interviews with non-security first responders. Non-security first responders informed the Auditor they would immediately notify a security member and ask the victim not take actions that would destroy physical evidence. The Auditor asked non-security first responders if they know what action would lead to the destruction of physical evidence. Each were aware that brushing teeth, using the bathroom, bathing, eating, changing clothes and drinking could potentially destroy physical evidence. Non-security first responders stated they would stay with the alleged victim until security staff arrived.

The facility reported 18 allegations of sexual abuse were received in the previous 12 months. There were no instances in which the first person to learn of the allegation was a non-security staff member. The first responder to all 18 allegations was a security staff member. Of the 18 allegations of sexual abuse received in the previous 12 months, none were alleged within a time frame that would allow for the collection of physical evidence. Records reveal staff

followed their required first responder duties. Staff ensured the immediate safety of each inmate and notified the Shift Commander. Staff were not required to preserve any crime scene following an allegation.

Each staff member interviewed by the Auditor was asked how they preserve evidence of a crime scene. Staff stated if the alleged incident occurred in a cell the cell would be secured. The Auditor asked how they would secure a crime scene in a general area. Staff stated they would stay in that area to protect it and ensure no inmate entered the area. The Auditor was informed all information would be recorded in the unit logbook and an Incident Report. The Auditor asked who would be allowed into the crime scene. Staff stated the Arlington County Police Department investigator would process evidence from the scene.

The Auditor conducted formal interviews with Corizon medical personnel. Medical personnel have been trained to treat an inmate while preserving physical evidence. Medical personnel stated their priority is treating life threatening injuries. The Auditor asked how they treat an inmate with injuries. The Auditor was informed if the injuries are not life threatening treatment would ensue after the forensic examination. Medical personnel get vital signs and otherwise speak to the alleged victim if there are no life threatening injuries.

The Auditor conducted formal interviews with inmates who had alleged suffering sexual abuse. Each inmate informed the Auditor staff immediately responded to the allegation and ensured they were separated from the alleged abuser. Some stated they were escorted to the medical area for an evaluation and none were sent to a forensic examination. The Auditor asked each inmate if they had further contact with their alleged abuser. Each inmate stated they have not been in contact with the alleged abuser since the incident. None of the inmates met with an investigator with the Arlington County Police Department. None of the agency's allegations were reported within a time that would allow for a forensic examination.

**Conclusion:**

The Auditor determined both security and non-security staff are knowledgeable in their duties as first responders to incidents of sexual abuse. The Auditor reviewed agency policy, procedures, Coordinated Response Plan, training records, investigative records, Special Directive, interviewed staff, inmates and determined the facility meets the requirements of this standard.

115.65	<b>Coordinated response</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 536 360"><b>Auditor Discussion:</b></p> <p data-bbox="252 400 1469 562">The Auditor reviewed the agency's Inmate Sexual Misconduct/Sexual Assault policy. The policy includes steps staff are required to take after discovering a credible allegation of sexual assault. The Auditor discovered the policy did not include steps that coordinate the actions in response to an allegation of sexual abuse.</p> <p data-bbox="252 602 574 636"><b>Evidence Relied Upon:</b></p> <p data-bbox="252 676 1125 710">Policy - 5-229 Inmate Sexual Misconduct/Sexual Assault, pg. 28-29</p> <p data-bbox="252 750 619 784">Coordinated Response Plan</p> <p data-bbox="252 824 509 857">Training Curriculum</p> <p data-bbox="252 898 533 931">Investigative Records</p> <p data-bbox="252 972 512 1005">Interviews with Staff</p> <p data-bbox="252 1046 544 1079"><b>Analysis/Reasoning:</b></p> <p data-bbox="252 1120 1474 1323">The Auditor observed the facility's Inmate Sexual Misconduct/Sexual Assault policy was utilized for its Coordinated Response Plan. The policy did not coordinate the actions of personnel as required by this standard. The Auditor addressed this concern to the PREA Compliance Manager and PREA Coordinator. The agency immediately developed a separate distinct Coordinated Response Plan.</p> <p data-bbox="252 1364 1482 1440">The Coordinated Response Plan was approved by the Sheriff and includes actions required by the following:</p> <ul data-bbox="300 1507 699 1924" style="list-style-type: none"> <li>● Volunteers</li> <li>● Contractors</li> <li>● Civilian Staff</li> <li>● Sworn Staff</li> <li>● Shift Commander</li> <li>● Internal Affairs</li> <li>● Medical Professionals</li> <li>● Mental Health Professionals</li> <li>● Investigators</li> <li>● Facility Leadership</li> </ul> <p data-bbox="252 1964 1450 2085">The Coordinated Response Plan includes detailed efforts required of each position above following an incident of sexual abuse. The Coordinated Response Plan also includes efforts required by security and non-security staff who are first responders following an incident.</p> <p data-bbox="252 2125 1450 2159">The Auditor reviewed investigative records. A review of records reveals staff are performing</p>

the requirements as stipulated in the agency's written Coordinated Response Plan. The agency's training includes actions as required in the Coordinated Response Plan.

During interviews with specialized staff members the Auditor asked first responders, medical and mental health practitioners, investigator, and leadership questions regarding their actions in response to an alleged sexual abuse incident. Each specialized staff interviewed by the Auditor was knowledgeable regarding their required actions. The responses received by the Auditor align with the requirements included in the agency's written Coordinated Response Plan. Facility personnel appeared well trained to respond to incidents of sexual abuse.

**Conclusion:**

The Auditor determined the facility has created an appropriate institutional plan that coordinates the actions of personnel following an incident of sexual abuse. The Auditor reviewed agency policies, procedures, Coordinated Response Plan, training curriculum, Investigative Records, interviewed staff and determined the facility meets the requirements of this standard.

115.66	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office has not entered into an agreement with any agency for collective bargaining at the Arlington County Detention Facility.</p> <p><b>Evidence Relied Upon:</b></p> <p>Code of Virginia - 40.1-57.2 Prohibition against collective bargaining</p> <p>Investigative Records</p> <p>Interviews with Staff</p> <p><b>Analysis/Reasoning:</b></p> <p>Virginia Code 40.1-57.2 stipulates, "No state, county, municipal, or like governmental officer, agent or governing body is vested with or possesses any authority to recognize any labor union or other employee association as a bargaining agent of any public officers or employees, or to collectively bargain or enter into any collective bargaining contract with any such union or association or its agents with respect to any matter relating to them or their employment or service."</p> <p>The Arlington County Sheriff's Office has not entered into any agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The Auditor reviewed facility records that show inmates alleged to have committed sexual abuse are separated from alleged victims.</p> <p>The Auditor conducted interviews with several command staff members, including the Director of Corrections. During interviews the Auditor was informed staff, contractors and volunteers are removed from contact with inmates when warranted.</p> <p><b>Conclusion:</b></p> <p>The Auditor concluded the ACSO has not entered into any collective bargaining that would restrict its ability to remove staff sexual abusers from contact with inmates. The Auditor determined the facility meets the requirements of this standard.</p>

115.67	<b>Agency protection against retaliation</b>
	<p data-bbox="248 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="248 327 534 360"><b>Auditor Discussion:</b></p> <p data-bbox="248 400 1469 562">The Arlington County Sheriff's Office policy is to ensure the protection of inmates and staff who report sexual abuse, sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other staff or inmates. The agency requires the following protection methods in its policy:</p> <ul data-bbox="300 629 1433 835" style="list-style-type: none"> <li>• Housing changes;</li> <li>• Transfers for inmate victims or abusers;</li> <li>• Removal of alleged staff or inmate abusers from contact with victims; and</li> <li>• Emotional support services for inmates or staff who may fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.</li> </ul> <p data-bbox="248 875 1458 1122">An agency staff member may be placed on administrative leave or be subject to other alternatives such as temporary transfer to another assignment, pending the outcome of an investigation. The agency's policy states the agency does not condone nor tolerate any type of sexual misconduct, sexual contact, sexual abuse or sexual harassment towards inmates. The ACSO practice is to aggressively pursue any complaints or suspicions of sexual misconduct.</p> <p data-bbox="248 1162 1485 1364">The Arlington County Sheriff's Office has a policy that prohibits employees and individuals in a position of authority over inmates from retaliating against an alleged victim, complainant, or witness for making allegations of sexual misconduct, sexual contact, sexual abuse, or sexual harassment. Policy requires staff take immediate action to protect an inmate when it learns an inmate is subject to a substantial risk of imminent sexual abuse.</p> <p data-bbox="248 1404 1473 1695">The agency's Internal Affairs personnel are directed by policy to monitor for acts of retaliation towards staff and inmates. Policy requires for at least 90 days following a report of sexual abuse, Internal Affairs will monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse. The monitoring efforts are conducted to see if there are changes that may suggest possible retaliation by inmates or staff. The monitor is required to act promptly to remedy any such retaliation. Policy lists the following, but not limited to, items be monitored:</p> <ul data-bbox="300 1762 799 1968" style="list-style-type: none"> <li>• Disciplinary reports;</li> <li>• Housing changes;</li> <li>• Program changes;</li> <li>• Negative performance reviews; and</li> <li>• Reassignments of staff.</li> </ul> <p data-bbox="248 2009 1437 2125">Internal Affairs has the ability to continue monitoring beyond 90 days if the initial monitoring indicates a continuing need. Policy requires Internal Affairs conduct periodic status checks with the person being monitored for retaliation. The Sheriff's Office mandates if any other</p>

individual who cooperates with an investigator expresses fear of retaliation, the Sheriff's Office shall take appropriate measures to protect that person from retaliation. Policy stipulate the Internal Affairs will cease monitoring if an allegation is unfounded.

**Evidence Relied Upon:**

Policy - 2-307 Sexual Misconduct Against Inmates, pg. 10-12, 16

Retaliation Monitoring Tracking

Interviews with Staff

Interviews with Inmates

**Analysis/Reasoning:**

The Arlington County Sheriff's Office has an appropriate policy to ensure inmates and staff are monitored and protected from acts of retaliation by staff or other inmates. The ACSO has designated the Internal Affairs Investigators responsible for monitoring for acts of retaliation. The Auditor conducted a formal interview with a staff member responsible for monitoring retaliation. The Auditor asked the staff member to explain how retaliation monitoring is conducted at the facility. The retaliation monitor explained he reviews disciplinary charges, grievances, Incident Reports, classification actions, staff evaluations and shift assignments. The Auditor asked the monitor if he was required to meet with inmates or staff who allege or who are being monitored for retaliation. The monitor stated he does meet with those being monitored for retaliation. The monitor informed the Auditor he initiates contact with the inmate or staff member being monitored.

The Retaliation Monitor informed the Auditor after an inmate is alleged to have suffered sexual abuse or retaliation Internal Affairs initiates contact with the inmate to begin the monitoring period. The Auditor asked how long the person is monitored for. The monitor stated the inmate or staff member will be monitored for a minimum of 90 days or until the investigation determines the outcome of the alleged incident is unfounded. The monitor explained he is currently monitoring several inmates who have submitted allegations and the outcome of the investigation has not yet been determined. The monitor was asked what actions he takes if he determines an inmate or staff member is being retaliated against. The monitor explained he would ensure a housing change, program change, work re-assignment, shift reassignment, post reassignment, or a transfer to another facility if need be.

The Retaliation Monitor records his/her activity on the Investigation Tracking Log. The log requires the inmate's name, the IA Case number, date of activity, comments and information and the staff member's initials/Badge number. All interactions with the inmate or staff member being monitored are recorded in this log. The log is newly created and the Internal Affairs section is just beginning its use. Previous activity was recorded in the electronic Daily Activity Log. The Auditor asked the monitor what is the maximum amount of time he would monitor an inmate or staff member for retaliation. The monitor informed there is no maximum amount of time. Monitoring continues until the threat of retaliation no longer exists.

The Auditor interviewed inmates who made allegations of sexual abuse and sexual harassment. Each was asked if someone periodically met with them after making the allegation. Each informed the Auditor an investigator would periodically meet with them to

determine how they were doing after the incident.

**Conclusion:**

The Auditor determined the facility has appropriate policies and practices in place to ensure staff and inmates are protected from retaliation. The Auditor reviewed the ACSO policies, procedures, tracking mechanism and conducted interviews with staff and inmates and determined the facility meets the requirements of this standard.

115.68	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office maintains policies that require any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse is subject to the requirements of Chapter 8 Special Management Inmates of the agency's policy 8-300 Protective Custody Status. The 8-300 policy includes the following contents:</p> <ul style="list-style-type: none"> <li>● 8-301 Authority to Place</li> <li>● 8-302 Orientation to Unit</li> <li>● 8-303 Reasons for Protective Custody</li> <li>● 8-304 Conditions of Protective Custody</li> <li>● 8-305 Status Review</li> <li>● 8-306 Release from Protective Custody</li> </ul> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 8-301 Authority to Place, pg. 1</p> <p>Policy - 8-303 Reasons for Protective Custody, pg. 2</p> <p>Policy - 8-304 Conditions of Protective Custody, pg. 3</p> <p>Policy - 8-305 Status Review, pg. 6</p> <p>Classification Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p>Observations</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the facility's Special Management Inmates policy. The ACSO policy authorizes placement in Protective Custody when placement within general population would pose a threat to their safety and when no reasonable alternatives are available. All placements into Protective Custody are required to be reviewed and approved by a Classification Committee within 24 hours of placement. Policy requires whenever possible, the Classification Committee reviews all placements prior to the inmate's movement into Protective Custody. Each inmate placed in segregated housing is reviewed every 7 days, to include a 30 day review.</p> <p>Agency policy stipulates inmates in Protective Custody are "provided maximum access to programs and services based upon scheduling or services provided at the Unit." The Auditor was informed by staff that inmate in Protective Custody are not denied access to programs,</p>

privileges, work or education opportunities. The Auditor did not observe the agency's policy required staff to document the basis for the staff members concern when placing an inmate in Protective Custody for protection from sexual abuser. Policy also does not require staff to document other alternative means of separation that were explored and the reason why no alternative means of separation could be arranged. This observation was discussed with the PREA Compliance Manager and PREA Coordinator. The Auditor made a recommendation for the agency to consider adding similar language to its policy in the event the facility places an inmate in Protective Custody involuntarily for protection from sexual abuse.

The agency's policy does require staff submit a report to the Zone Supervisor and forward it to the Director of Corrections with copies to the Shift Commander and Assistant Director of Inmate Services any time an inmate in Protective Custody is deprived of any authorized item or activity.

The Auditor conducted formal interviews with staff who supervise inmates in the Protective Custody unit. The Auditor asked if staff supervised an inmate who has been placed in segregated housing after allegedly suffering sexual abuse for their protection. Each informed the Auditor they had not supervised an inmate in the Protective Custody housing unit strictly for the protection from sexual abuse. Staff were asked if inmates in the segregated housing have access to programs, privileges, education and work opportunities. The Auditor was informed they have access to such if no security considerations exist.

The Auditor conducted formal interviews with supervisors and a Case Manager. The Auditor asked if the reasons for restrictions of programs, privileges, education and work of inmates in Protective Custody are documented. The documentations of such are included on a report and in the inmate's files. The staff member is responsible for maintaining documentation in the inmate's file in the activity log. The Auditor was informed an inmate's status in Protective Custody is reviewed every 7 days. The Auditor was informed the facility has various housing units and therefore does not typically have the need to place an inmate in Protective Custody for the protection from sexual abuse. No staff member interviewed could recall an inmate placed in Protective Custody for the protection from sexual abuse.

The Auditor conducted a review of inmate classification and housing records and discovered no evidence an inmate had been placed involuntarily or voluntarily in Protective Custody for the protection from sexual abuse. The Auditor conducted formal interviews with inmates who filed an allegation of sexual abuse. The Auditor asked them if they were placed in segregated housing to protect them from sexual abuse. No inmate interviewed had been placed in segregated housing for his/her protection from sexual abuse.

The Auditor conducted a detailed tour of the Arlington County Detention Facility. The Auditor observed multiple housing units on multiple floors available to house inmates without having to place them in involuntary segregated housing.

**Conclusion:**

The agency's policy includes the elements of PREA standard 115.43 to ensure sexual abuse victims receive privileges, programs, education and work opportunities if a victim is placed in segregated housing for the protection from sexual abuse. After a thorough review of the agency's policies, procedures, classification records, making observations, interviewing staff and inmates the Auditor determined the agency meets the requirements of this standard.

115.71	<b>Criminal and administrative agency investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Auditor Discussion:</b></p> <p>The agency's policy is that an inmate who reports an incident of sexual misconduct, sexual contact, sexual abuse or sexual harassment may request and be treated as an anonymous informant. The ACSO allows third parties to make an allegation of sexual misconduct, sexual contact, sexual abuse or sexual harassment on behalf of an inmate. The Arlington County Sheriff's Office has a policy to ensure an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. This policy is inclusive of allegations reported anonymously and by a third-party. ACSO investigators conduct administrative investigations of sexual abuse and sexual harassment. Criminal investigations of sexual abuse and sexual harassment are conducted by the Arlington County Police Department.</p> <p>The ACSO has a Memorandum of Agreement with the Arlington County Police Department to conduct investigations of criminal acts of a sexual nature. The memorandum includes the ACPD will utilize investigators who have received specialized training in sexual abuse investigations. The ACSO policy requires its investigators will receive specialized training.</p> <p>Policy requires factual findings be based on a range of evidence, including physical and documentary evidence, witness accounts, and circumstantial evidence. Investigators must judge witness and complainants credibility in an unbiased manner in accordance with established investigation methods. The final investigative report requires, at a minimum, a narrative of the allegations, a comprehensive listing of factual findings, details of the interviews with all parties and witnesses, conclusions and recommendations. ACSO investigators are required to conduct interviews only after consulting with the commonwealth as to whether the interviews may be an obstacle for subsequent criminal prosecution when the investigator learns the quality of evidence appears to support criminal prosecution. The policy stipulates, "Inmates who allege sexual abuse WILL NOT be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such allegation of sexual misconduct/harassment."</p> <p>Agency policy requires investigators continue efforts even if an accused employee terminates employment during the investigation. Any allegation that is found to violate Virginia Code is reported to the Commonwealth Attorney's office and will be subject to criminal prosecution.</p> <p>The facility retains investigative reports in accordance with the Virginia State Library of Record Retention requirements.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 5-229 Inmate Sexual Misconduct/Sexual Assault, pg. 27</p> <p>Policy - 12-404 Emergency Grievances, pg. 4</p> <p>Policy - 2-307 Sexual Misconduct Against Inmates, pg. 13</p>

Policy - 4-102 Records and Reports, pg. 4

MOA with Arlington County Police Department

Library of Virginia General Schedule No. GS-19, 010058-Investigative Reports

Training Records

Investigative Records

Interview with Investigator

Interviews with Inmates

Observations

**Analysis/Reasoning:**

The agency revised policy 2-307 Sexual Misconduct Against Inmates. The Auditor discovered the policy read, "The investigator shall continue the investigation to conclusion, regardless of whether another local, state, or federal agency conducts its own investigation, subject to limitations or restrictions imposed by that agency or the courts." The policy now reads, "The investigator shall continue the investigation to conclusion, regardless of whether another local, state, or federal agency conducts its own investigation, subject to limitations or restrictions imposed by that agency or the courts, after consulting with the prosecutor."

The Auditor conducted a formal interview with a facility investigator. The investigator discussed the procedures utilized when conducting sexual abuse investigations. The Investigator begins by interviewing the victim, witness(s) and alleged abuser. A review of information concerning the alleged victim and abuser is conducted by the Investigator. The Auditor asked what information is reviewed concerning the victim and abuser. The Auditor was informed criminal history, grievances, discipline history, previously provided information, Incident Reports, video footage and telephone records. The investigator was asked how the credibility of a victim, abuser and witnesses is determined. The Auditor was informed credibility is based on a review of documents, information, video, telephone records and testimonies.

The investigator was asked if the facility attempts to discover if staff actions or failure to act contributed to an incident of sexual abuse. The Investigator stated the facility does attempt to determine if staff actions or lack thereof contributed to the incident. Facility Investigators review video footage and housing logs to assist in the determination. The investigator was asked what types of evidence is gathered. The Auditor was informed investigators gather staff reports, housing records, video footage, telephone records, grievances, discipline records, testimonial evidence and any other relevant documents or information. The investigator informed the Auditor they begin investigative efforts immediately. Each supervisor has been trained to conduct sexual abuse investigations in a confinement setting. The facility has an investigator on site 24/7. The investigator was asked if polygraph examinations or other truth telling devices are used. The facility does not use such during sexual abuse investigations.

The Auditor toured the area where investigative records are maintained. All investigative records are maintained in the PREA Coordinator's office. Printed documents and files are maintained in a cabinet in the PREA Coordinator's locked office. Any electronic data is

maintained on a computer. Users have individual usernames and passwords. The PREA Coordinator was asked how long investigative records are maintained. The Auditor was informed that data is maintained for 5 years after the abuser has either been released or is no longer employed by the VBSO.

The Auditor asked the Investigator to explain how investigations that are reported anonymously are conducted. The Auditor was informed anonymously reported investigations are conducted the same as any other investigation. The Investigator stated it doesn't matter how it was reported, the facility investigates to the fullest extent. The Investigator was asked to explain the investigative process if an inmate is released or a staff member terminates employment. The Auditor was informed the Investigator attempts to reach the person by telephone. The Investigator may ask the person to come to the facility for an interview or the facility would inform local law enforcement if needed. The Investigator stated the facility will send an investigator to another facility if the inmate was transferred to another facility.

The Auditor asked the Investigator if facility investigators get involved when the Arlington County Police Department investigates an allegation in the facility. The Investigator stated they cooperate and provide assistance when requested by the ACPD. The facility Investigator shares information and evidence with the ACPD.

The Auditor reviewed investigative records from the previous 12 months. Each investigation was conducted by a facility trained investigator. The Auditor observed investigative reports include physical and circumstantial evidence and documented the investigator's interviews with alleged victims, perpetrators and witnesses. Investigative records include any review of video monitoring and efforts to reveal if staff actions or lack thereof, contributed to an incident of sexual abuse or sexual harassment. The Auditor determined each investigation was conducted promptly, objective and thoroughly. The Auditor observed the reason behind credibility assessments were not consistently documented in investigative reports. The Auditor met with the PREA Coordinator and discussed the finding. The PREA Coordinator informed the Auditor he will ensure Investigators understand how to document and the importance of credibility assessments.

The Auditor conducted interviews with inmates who filed an allegation of sexual abuse and sexual harassment. The Auditor asked each if they met with a facility investigator following the allegation. Each informed the Auditor they had met with a facility investigator. The Auditor asked each how long it was before they were informed of the investigative results. Those who have made allegations that have been completed stated it was a matter of days. One inmate had not been informed of a conclusion as his allegation was still being investigated.

The Auditor conducted a review of the Arlington County Sheriff's Office training records. Each investigator had received specialized training how to conduct sexual abuse investigations in a confinement setting.

No Department of Justice component is responsible for conducting investigations in the Arlington County Detention Facility.

The Auditor determined the agency's policy to maintain investigative records in accordance with the Virginia State Library Record Retention schedule was less restrictive than the requirements of this standard. The Virginia State Library schedule requires investigative records be maintained for "3 years after last action." The Auditor informed the agency of the

finding. The agency revised its policy to maintain investigative records "for as long as the alleged abuser is incarcerated or employed by the agency, plus 5 years."

**Conclusion:**

The Auditor determined facility investigators are conducting appropriate investigations into allegations of sexual abuse and sexual harassment. The Auditor conducted a review of the agency's policies, procedures, investigative records, MOA, training records and conducted interviews with staff and inmates. The Auditor concluded the agency meets the requirements of this standard.

115.72	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office has a policy that imposes no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 1-208 Investigations - Internal, pg. 9</p> <p>Interview with Investigator</p> <p>Investigative Records</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor conducted formal interviews with a facility sexual abuse investigator. The investigator informed the Auditor the agency's policy requires the use of preponderance as the standard of evidence to substantiate an allegation of sexual abuse or sexual harassment. The Auditor asked the investigator to explain the meaning of preponderance of evidence. The Auditor was informed a preponderance means there is more evidence to support the decision.</p> <p>The Auditor reviewed agency investigative records. A review of the records revealed investigators are using a preponderance of evidence to substantiate thier findings when investigating allegations of sexual abuse and sexual harassment.</p> <p><b>Conclusion:</b></p> <p>The Auditor was able to determine investigative decisions are based on a preponderance as the basis for the outcome. The Auditor reviewed the agency's policies, procedures, investigative records and interviewed a facility investigator and determined the facility meets the requirements of this standard.</p>

115.73	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office policy requires inmates be notified whether a sexual abuse allegation has been determined to be substantiated, unsubstantiated or unfounded following an investigation. Policy requires when an outside agency investigates an allegation the Sheriff's Office will request the relevant information from the investigating agency. When a staff member has committed sexual abuse against an inmate, unless the determination is unfounded, the Sheriff's Office informs the inmate whenever:</p> <ul style="list-style-type: none"> <li>• The staff member is no longer posted within the inmate's unit;</li> <li>• The staff member is no longer employed with the Arlington County Sheriff's Office;</li> <li>• The Sheriff's Office learns that the staff member has been indicted on a charge related to sexual abuse within the detention facility; or</li> <li>• The agency learns that the staff member has been convicted on a charge related to sexual abuse within the detention facility.</li> </ul> <p>The ACSO policy requires when another inmate has been sexually abused another inmate the Sheriff's Office will inform the alleged victim when:</p> <ul style="list-style-type: none"> <li>• The Sheriff's Office learns that the alleged abuser has been indicted on a charge related to sexual abuse within the detention facility; or</li> <li>• The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the detention facility.</li> </ul> <p>Agency policy requires all notifications or attempted notifications to the inmate is documented.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 2-307 Sexual Misconduct Against Inmates, pg. 16-17</p> <p>Allegation of Sexual Abuse - Report to Inmate</p> <p>Investigations Tracking Mechanism</p> <p>Investigative Records</p> <p>Notifications to Inmates</p> <p>Interview with Investigator</p> <p>Interview with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor conducted a formal interview with a facility sexual abuse investigator. The Investigator informed the Auditor they make the notifications to inmate victims at the</p>

conclusion of an investigation. The Auditor asked the investigator who notifies the inmate following an indictment and criminal charges. The investigator stated either the PREA Coordinator or the Internal Affairs investigator will most likely notify the inmate. The Internal Affairs investigator communicates with the Arlington County Police Department in an effort to learn the information.

The Auditor reviewed facility investigative records. Each investigative record included a copy of the notification of the investigative results to the alleged inmate victim. The notifications were typed on a facility memorandum and signed by the staff member making the notification. Each notification was made after the conclusion of the investigation. The facility had no incidents which required an inmate be notified of an indictment or conviction of an inmate or a staff member.

The Auditor interviewed inmates who made an allegation of sexual abuse and sexual harassment. The Auditor asked each if he/she met with a facility investigator. Each had met with a facility investigator following the allegation. The Auditor asked each what the outcome of their investigation was. Each, excluding one, informed the Auditor of their investigative result. The Auditor determined the one inmate had filed an allegation that had not been concluded at the time of the audit.

**Conclusion:**

The Auditor concluded the Arlington County Sheriff's Office informs inmates of investigative results following the conclusion of an investigation. The Auditor reviewed agency policy, procedures, investigative records, reports to inmates, interviewed staff and inmates and determined the agency meets the requirements of this standard.

115.76	<b>Disciplinary sanctions for staff</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 536 360"><b>Auditor Discussion:</b></p> <p data-bbox="252 405 1484 864">The Arlington County Sheriff's Office personnel are subject to disciplinary sanctions up to and including dismissal for violating the agency's sexual abuse or sexual harassment policies. The ACSO makes termination the presumptive disciplinary measure for those who have engaged in sexual abuse. The ACSO practice is that disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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. The policy states, "Supervisors take into consideration the employee's record and any mitigating and aggravating circumstances which may be ascertained during the disciplinary process...In all cases, supervisors have the responsibility to use discretion in determining discipline."</p> <p data-bbox="252 909 1484 1066">It is the policy of the Arlington County Sheriff's Office to notify the proper law enforcement agencies and relevant licensing bodies of terminations for violations of sexual abuse or sexual harassment policies, or of a resignation by a staff member who would have been terminated if not for their resignation, unless the activity was clearly not criminal.</p> <p data-bbox="252 1111 574 1144"><b>Evidence Relied Upon:</b></p> <p data-bbox="252 1178 1002 1211">Policy - 2-307 Sexual Misconduct Against Inmates, pg. 13</p> <p data-bbox="252 1256 906 1290">Policy - 2-702 Disciplinary Action Guidelines, pg. 2</p> <p data-bbox="252 1335 501 1368">Employee Records</p> <p data-bbox="252 1413 513 1447">Interviews with Staff</p> <p data-bbox="252 1491 545 1525"><b>Analysis/Reasoning:</b></p> <p data-bbox="252 1559 1477 1962">The Auditor conducted formal interviews with ACSO staff. Each was asked regarding what actions would be taken against them if they were found to have violated the agency's sexual abuse policies. Each staff member stated they would be terminated. Staff questioned were aware of the ACSO policy that makes termination the presumptive disciplinary sanction for violating the agency's sexual abuse policies. Staff were also aware the Sheriff's Office reports criminal violations to relevant licensing bodies. The agency has a zero-tolerance approach and disciplines staff for violating the agency's sexual abuse policies. Command staff informed the Auditor they would recommend termination for anyone who committed an act of sexual abuse. Recommendations for violations of other acts would depend on the specific circumstances of the incident.</p> <p data-bbox="252 2007 1439 2119">The Internal Affairs section investigates staff violations of the sexual abuse and sexual harassment policies. The Auditor conducted an interview with an agency investigator. The Investigator informed the Auditor if the act was criminal in nature the investigator would</p>

contact the Arlington County Police Department for a criminal investigation. The investigator ceases efforts once the ACPD Investigator is notified. The Investigator coordinates with the ACPD investigator. The Auditor asked how the investigation is handled if the act was clearly not criminal in nature. The Investigator continues the investigation until a determination is made. The results of the investigation are shared with command staff so appropriate disciplinary action can be sanctioned if warranted. The Investigator does not recommend specific disciplinary sanctions.

The Auditor discussed the process of notifying relevant licensing bodies of staff found to have engaged in a criminal act of sexual abuse. The Auditor was informed the Virginia Department of Criminal Justice Services would be notified if a deputy is found to have engaged in a criminal act of sexual abuse. When nursing staff are discovered to have engaged in such acts, the Virginia Department of Health Professionals, Board of Nursing would be notified of the criminal act. The facility notifies other relevant licensing bodies for persons in other positions who hold a specific license.

The facility reported no staff member was disciplined for violating the agency's sexual abuse and/or sexual harassment policies within the previous 12 months.

**Conclusion:**

The Arlington County Sheriff's Office has appropriate policies to ensure staff who violate agency sexual abuse policies are terminated from employment. The agency makes termination the presumptive disciplinary sanction and considers other factors when disciplining those who violate sexual harassment policies. The Auditor reviewed the agency's policies, procedures, and interviewed staff to determine the agency meets the requirements of this standard.

115.77	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office has policies that mandate contractors and volunteers who engage in sexual abuse are prohibited from contact with inmates. Policy stipulates those found to have engaged in sexual abuse will be reported to law enforcement agencies, unless the act was clearly not criminal, and to relevant licensing bodies. ACSO policy requires appropriate remedial measures be taken with consideration to whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 16-610 Termination of Volunteer Status, pg. 9</p> <p>Policy - 16-709 Termination of Contractor Status, pg. 4</p> <p>PowerPoint Presentation</p> <p>Interviews with Staff</p> <p>Interviews with Contractors</p> <p><b>Analysis/Reasoning:</b></p> <p>The Arlington County Sheriff's Office reported there were no incidents in which a volunteer or contractor engaged or was alleged to have engaged in sexual abuse or sexual harassment in the previous 12 months. The Auditor conducted formal interviews with contract personnel. Each contractor interviewed was aware of the agency's discipline sanctions for violating sexual abuse or sexual harassment policies. Each was aware they would be removed from contact with inmates following an allegation of sexual abuse and will be removed from facility access if found to have engaged in such acts. Each understood the facility reported criminal violations of the ACSO sexual abuse policy to appropriate law enforcement agencies and relevant licensing bodies.</p> <p>Volunteers and contractors are made aware of the ACSO sexual abuse and sexual harassment policies during their initial training and prior to providing services in the Arlington County Detention Facility. Each volunteer and contractor sign a form of their understanding of the training they received from the facility. The Auditor verified through training records each active volunteer and contractor in the facility had received such training. The Auditor was unable to interview a facility volunteer as the ACSO has made adjustments to its operational procedures to mitigate risks of COVID-19.</p> <p>The ACSO leadership is aware of the requirement to notify relevant licensing bodies following a contractor or volunteer's participation in a criminal act of sexual abuse. Command staff informed the Auditor a contractor or volunteer would be prohibited from inmate contact if determined to have participated in an act of sexual abuse. The Auditor was informed the</p>

ACSO does not notify law enforcement agencies or relevant licensing bodies if the volunteer or contractor engaged in an act of sexual abuse that was clearly not criminal in nature. The Auditor asked what types of relevant licensing bodies would be notified. Staff stated the Virginia Board of Nursing and any other body that holds the license for those who are licensed.

Command staff were asked if a contractor or volunteer had been disciplined within the previous 12 months for violating the ACSO sexual abuse or sexual harassment policies and procedures. The Auditor was informed no contractor or volunteer had been found in violation of those policies. The Auditor was informed a contractor or volunteer would be removed from inmate contact pending the result of the investigation of a violation of sexual harassment policies.

**Conclusion:**

The Arlington County Sheriff's Office maintains appropriate policies to ensure contractors and volunteers at the ACDF are removed from inmate contact after committing an act of sexual abuse or sexual harassment of an inmate. The Auditor reviewed the agency's policies, procedures, training records and conducted formal interviews with staff and contractors to determine the facility meets the requirements of this standard.

115.78	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The ACSO policy is to subject inmates to disciplinary sanctions for participating in an act of inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Inmate disciplinary sanctions are pursuant to a formal disciplinary process conducted by the Disciplinary Hearing Board. ACDF staff discipline inmates for sexual contact with staff if the agency finds the staff member did not consent to the sexual contact with the inmate.</p> <p>The ACSO contracts medical and mental health services with Corizon Correctional Healthcare. Corizon Correctional Healthcare practitioners offer therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for abuse. The facility does not require the inmate's participation in such interventions as a condition of access to programming or other benefits.</p> <p>Sexual activity between inmates at the Arlington County Detention Facility is prohibited. Inmates found to have participated in sexual activity (even consensual) are subject to disciplinary action. If sexual activity between inmates is found to have been consensual the facility does not consider the sexual activity as an act of sexual abuse.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 5-229 Inmate Sexual Misconduct/Sexual Assault, pg. 27</p> <p>Policy - 11-508 Conduct of Disciplinary Hearings, pg. 9</p> <p>Policy - 11-509 Sanctions for a Guilty Plea or Finding of Guilty in a Disciplinary Hearing, pg. 9-10</p> <p>Policy - 11-100 Rules of Conduct, pg. 4, 6-8</p> <p>Policy 2-307 Sexual Misconduct Against Inmates, pg. 15</p> <p>Investigative Records</p> <p>Disciplinary Hearing Records</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor conducted formal interviews with a facility investigator. The investigator informed the Auditor disciplinary charges are placed following a substantiated allegation. The Investigator does not place charges on an inmate if the investigative determination is unfounded or unsubstantiated. The investigator was asked if charges are placed on inmates if</p>

an act is consensual. The Auditor was informed disciplinary charges are placed on the inmates for participating in sexual activity but the inmates would not be charged for sexual abuse.

The Auditor conducted formal interviews with medical and mental health practitioners. The Auditor was informed the facility offers counseling, therapy and other interventions and treatments to inmates. The Auditor asked mental health practitioners if inmates are required to participate in any meetings or sessions. Mental health practitioners stated inmates are not forced to participate. Inmates request or agree to services provided by mental health professionals.

The Auditor interviewed inmates who filed an allegation of sexual abuse. The Auditor asked each if he/she had been disciplined for filing the allegation of sexual abuse. One inmate interviewed stated she was disciplined for making an allegation. The Auditor requested and was provided the disciplinary record of the inmate. The disciplinary documents revealed the inmate filed a false allegation of sexual abuse against another inmate. The inmate entered a plea of guilty during her disciplinary hearing. The Investigative record revealed the inmate filed a false allegation. The facility reported no inmate has been found guilty of a criminal charge of sexual abuse in the previous 12 months. No allegation of sexual abuse within the previous 12 months has been substantiated.

**Conclusion:**

The Auditor discovered the agency maintains policies that align with PREA standard 115.78 Discipline Sanctions for Inmates. Facility personnel ensure the policy is applied when choosing whether to discipline an inmate for reporting or participating in an act of sexual abuse. The Auditor reviewed the facility's policies, procedures, discipline records, investigative records and interviewed staff and inmates. The Auditor determined the facility meets the requirements of this standard.

115.81	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office policy requires staff offer a follow-up meeting with a medical or mental health practitioner that must occur within 14 days of arriving at the facility to any inmate who informs staff he/she was previously victimized by sexual abuse. This policy applies to any inmate who reported victimization whether the abuse occurred in an institutional setting or in the community.</p> <p>The agency's policy stipulates information related to sexual victimization or abusiveness that occurred in an institutional setting 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, work, education, and program assignments, or as otherwise required by Federal, State, or local law.</p> <p>Medical and mental health practitioners at the Arlington County Detention Facility are required to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 7-103 Classification Criteria, pg. 6</p> <p>Policy - 13-206 Physical Examination of Inmates, pg. 6</p> <p>Policy - 13-105 Records and Reports, pg. 7</p> <p>Policy - 13-106 Sharing of Information/Confidentiality, pg. 8</p> <p>Inmate Activity Logs</p> <p>Medical Records</p> <p>Consent Form</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor randomly selected 15 inmate records and specifically selected 15 records to review. Of the 30 records reviewed the Auditor discovered 4 inmates reported suffering sexual abuse during their initial risk assessment in booking. The Auditor reviewed the records of the inmates who reported suffering sexual victimization. A review of records reveal they were offered a follow-up with a mental health practitioner. Each inmate who answered yes on the intake screening is screened by a Corizon mental health professional upon arrival. Each</p>

inmate was screened and provided the opportunity to continue mental health treatment.

The Auditor conducted formal interviews with Corizon medical and mental health practitioners. Corizon medical practitioners stated they screen each inmate who enters the facility during the booking process. The Auditor was informed by nursing staff when inmates answer yes to the victimization questions during booking the mental health practitioners are notified. The Auditor asked mental health practitioners if they meet with sexual abusers. Mental health practitioners stated they do meet with sexual abusers if abusers request mental health services. Each medical and mental health practitioner was asked who they share their information with. The Auditor was informed they only discuss the information with those who have a need to know. The Auditor asked medical and mental health personnel if they obtain written informed consent prior to sharing information related to sexual victimization suffered in the community. The Auditor was informed they do obtain informed consent but have not had a need to report such information. The Auditor observed the consent form utilized by medical and mental health practitioners. There is a specific consent form and an additional consent form where medical and mental health practitioners can include specific written consenting information.

Mental health services in the facility are provided by Corizon mental health professionals and mental health professionals with the Arlington County Department of Human Services (DHS). Corizon mental health professionals screen inmates while DHS mental health professionals treat inmates. The Auditor conducted an interview with a DHS mental health professional. The mental health professional was asked if she treats victims of sexual abuse. The Auditor was informed DHS does work with victims if they request services. The mental health professional stated she works with sexual abusers if they request services.

The Auditor asked medical and mental health practitioners who they discuss information regarding a sexual victimization or abusiveness that occurred in an institutional setting with. The Auditor was informed they report such information to security supervisors if they are the first to be alerted of such abuse. Any treatment information will only be shared with those who have a need to know. The Auditor asked who has access to the inmate's medical record. Only medical and mental health practitioners have access to medical and mental health records.

The Auditor conducted formal interviews with inmates who reported suffering sexual victimization during the booking process. Each was asked if they were offered a follow-up with a medical or mental health practitioner. Each inmate informed the Auditor they met with a mental health practitioner. The inmates were asked how long it took before a mental health practitioner met with them. The Auditor was informed the meeting was within their first couple days. They reported they were asked if they wished to continue mental health services.

The Auditor reviewed medical records of the inmates who reported suffering sexual victimization. Records reveal each met with a mental health professional and was given the opportunity to continue services. Several inmates opted to continue services with the DHS mental health professional. Records reveal the mental health professional routinely meets with those inmates. The DHS mental health professional was asked if she creates treatment plans. The Auditor was informed mental health professionals do create and follow treatment plans.

The facility has not housed an inmate under the age of 18 during this audit cycle.

**Conclusion:**

The Auditor concluded inmates are offered a follow-up with a medical or mental health practitioner after reporting they have suffered sexual victimization. Medical and mental health practitioners inform only those with a "need to know" of information related to sexual victimization or abusiveness. The Auditor reviewed the agency's policies, procedures, classification records, medical records and conducted interviews with staff and inmates. After a thorough review the Auditor concluded the facility meets the requirements of this standard.

115.82	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office policy requires inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Policy requires the Deputy to notify his/her Zone Supervisor and immediately take the sexual abuse victim from the area of assault to the Medical Unit. The nature and scope of treatment and services are determined by the medical and mental health practioners according to their professional judgement. The ACSO offers victims of sexual abuse timely information about and timely access to sexually transmitted infections prophylaxis as medically appropriate.</p> <p>Security first responders are required to take preliminary steps to protect the alleged victim and shall immediately notify the appropriate medical and mental health practitioners if no qualified medical or mental health practitioners are on duty at the time of the incident. The Arlington County Sheriff's Office maintains 24/7 medical coverage at the Arlington County Detention Facility.</p> <p>ACSO policy states, "Treatment services shall be provided to the victim without financial cost and regarless of whether the victim names the abuser or cooperates with any investigation arising out of the incident."</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 2-307 Sexual Misconduct Against Inmates, pg. 10, 13-15</p> <p>Policy - 13-202 Emergency Medical and Health Care Service, pg. 3</p> <p>Policy - 13-401 Administration, pg. 2</p> <p>Policy - 13-101 General, pg. 3</p> <p>MOA with Inova Ewing Forensic Assessment &amp; Consultation Teams Department</p> <p>MOA with Doorways for Women and Families</p> <p>Investigative Records</p> <p>Interview with SANE</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor conducted formal interviews with medical and mental health practitioners. Each was asked if they feel medical and mental health services offered at the Arlington County</p>

Detention Facility are consistent with a community level of care. Each informed the Auditor they do feel services are consistent with those offered in the community. Each was asked if there was ever a time when no medical staff are present in the facility. The Auditor was informed there is never a time when medical staff are not on duty because Corizon provides 24/7 coverage in the facility. Deputies at the ACDF are required to maintain certification in CPR and First Aid in the event they are required to render emergency aid before medical help arrives.

ACSO staff and Corizon medical/mental health practitioners informed the Auditor inmates receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The Auditor asked nursing staff if they offer timely information and access to sexually transmitted infection prophylaxis to inmates who are victimized by sexual abuse. Nursing staff informed the Auditor inmates do receive such as ordered by the Physician. Nursing staff informed the Auditor sexually transmitted infection prophylaxis is offered during a forensic examination as well. Nursing staff stated if an inmate refuses a forensic examination they will offer the sexually transmitted infection prophylaxis when ordered by the Physician.

The Auditor asked medical practitioners if emergency contraception is offered to female victims of sexual abuse. The Auditor was informed Corizon personnel do not offer such. The Auditor asked medical practitioner to explain how emergency contraception is offered. Medical practitioners stated emergency contraception is offered at the time of the forensic examination. The Auditor asked medical practitioners how it is offered if the inmate refuses the forensic examination. Medical practitioners stated the facility would schedule an emergency appointment with an outside gynecologist. Medical and mental health practitioners were asked if inmates are charged a fee for treatment services related to a sexual abuse victimization. The Auditor was informed all services related to sexual abuse victimization are free to the victim.

The Auditor conducted a telephone interview with the Sexual Abuse Nurse Examiner. The Auditor asked the SANE if sexually transmitted infection prophylaxis are offered to inmate victims of sexual abuse. The SANE informed the Auditor prophylaxis is offered at the time of the forensic examination. The Auditor asked the SANE if inmates are directly billed for the forensic examination. The Auditor was informed the inmate is not billed for the examination. The SANE stated her department receives a telephone call prior to the inmate's arrival at the hospital. The Auditor asked if emergency contraception is offered to female victims. The SANE stated females are offered emergency contraception.

The Auditor conducted a telephone interview with a victim advocate from the Doorways for Women and Children. The advocate confirmed the MOA with the Arlington County Sheriff's Office. The advocate stated the victim is accompanied during a forensic exam when the advocate's presence is requested by the victim. The Auditor asked what other services are provided by Doorways. The advocate stated Doorways provides emotional support service, crisis intervention, information, referrals and counseling to victims.

The Auditor reviewed the ACSO Memorandum of Agreement with the Inova Ewing Forensic Assessment & Consultation Teams Department (FACT). The memorandum stipulates the FACT agrees to provide forensic medical examinations, crisis intervention and emotional support resources, offer emergency contraception and treatment for the prevention of sexually transmitted infections and pregnancy.

The Auditor reviewed the ACSO Memorandum of Agreement with Doorways for Women and Families. The memorandum stipulates the Doorways agrees to provide 24-hour crisis intervention counseling, advocacy, emotional support services, information and referrals for victims of sexual violence. Doorways also agrees to provide accompaniment support during SANE exams.

The Auditor reviewed security staff training records. Security staff are provided training in CPR and first aid in the event first responder treatment is needed. The Auditor conducted formal interviews with security staff. Each informed the Auditor they take immediate steps to ensure victims are protected and receive emergency medical care in the event needed. Security staff immediately notify their supervisor and medical personnel following an incident of sexual abuse. Security supervisors were asked what actions they take to ensure the safety of the inmate following a sexual abuse incident. The Auditor was informed the inmate is immediately provided medical attention.

The Auditor conducted formal interviews with inmates. Each inmate interviewed by the Auditor was aware treatments related to sexual victimization are provided at no cost to the victim. The Auditor reviewed inmate records to verify no inmate who was alleged to have been victimized at the facility was charged a fee for medically related services.

**Conclusion:**

The Auditor determined the facility provides inmates access to timely and unimpeded access to emergency medical services. Medical practitioners provide inmate victims with sexually transmitted infections prophylaxis. The Auditor reviewed the agency's policies, procedures, medical records, investigative records, MOAs, and interviewed staff, SANE, victim advocate and inmates. The Auditor determined the agency meets the requirements of this standard.

115.83	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The ACSO policy is to offer medical and mental health evaluations and treatment services to inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. ACSO evaluations and treatments include:</p> <ul style="list-style-type: none"> <li>• Follow-up services;</li> <li>• Treatment plans; and</li> <li>• Referrals for continued care following transfer to, or placement in other facilities or release from custody, when necessary.</li> </ul> <p>Agency policy requires inmate victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests. If pregnancy results from a sexual abuse, the Arlington County Detention Facility provides victims timely and comprehensive information about and timely access to lawful pregnancy-related medical services.</p> <p>All medical and mental health treatment services are provided to inmate victims of sexual abuse without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 2-307 Sexual Misconduct Against Inmates, pg. 15</p> <p>Policy - 7-103 Classification Criteria, pg. 6</p> <p>Policy - 5-229 Inmate Sexual Misconduct/Sexual Assault, pg. 27</p> <p>Medical Records</p> <p>Interviews with Staff</p> <p>Interview with SANE</p> <p>Interviews with Inmates</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor conducted formal interviews with medical and mental health practitioners. Mental health practitioners do not stipulate a minimum or maximum time they meet with victims of sexual abuse. Mental health practitioners stated they meet with victims and abusers if the victim or abuser requests such meeting or if medically necessary. Treatments and evaluations occur as needed or until treatment plans determine a need no longer exists. The Auditor asked what kind of services are offered to victims of sexual abuse. The Auditor was informed counseling sessions, referrals if appropriate and follow-up services, when needed. Medical and mental health practitioners stated they do create and follow treatment plans.</p>

The Auditor asked medical and mental health practitioners if they felt their services were consistent with a community level of care. Each informed the Auditor they feel their services are consistent with services offered in the community. The Auditor discussed the practice of offering sexually transmitted infection prophylaxis and pregnancy tests. These are offered at the time of the forensic examination. In the event the inmate requests such at a later time they are offered such when ordered by the Corizon Physician. The Auditor asked medical and mental health practitioners how much money the victim pays for their services related to a sexual abuse victimization. The Auditor was informed there are no costs for evaluations and treatments related to sexual victimization.

There were no allegations of sexual abuse during this audit period that required an inmate be sent for a forensic examination. The Auditor conducted formal interviews with inmates who made an allegation of sexual abuse. The Auditor asked each inmate if he met with a mental health professional after the alleged incident. Each inmate informed the Auditor they were offered a chance to meet with a mental health professional following the allegation. A review of inmate records revealed a follow-up was offered and several inmates chose to meet with a mental health professional following the allegation. The meeting occurred within 14 days of the alleged incident. Each inmate was asked if they paid for any services related to the alleged sexual abuse. None of the inmates were charged a fee related to the provided services. None of the allegations involved penetration that would require sexually transmitted disease test be offered.

The Auditor conducted a formal interview with the Sexual Assault Nurse Examiner. The SANE was asked if female inmates are offered a pregnancy test at the time of the forensic examination. The SANE stated pregnancy tests are offered when medically appropriate. The Auditor asked the SANE if she charges a fee to inmates for services related to the forensic examination. No inmate is directly billed for such services. The SANE informed the Auditor victims are offered tests for sexually transmitted infections at the time of the forensic examination. The Auditor asked how many inmates had been sent for a forensic examination within the previous 12 months. The SANE informed the Auditor there have no inmates sent to the hospital for a forensic examination in the last 12 months from the Arlington County Detention Facility.

Facility medical practitioners were asked to discuss the process if a sexual abuse of a female inmate results in pregnancy. Medical practitioners stated female inmates are offered a pregnancy test when ordered by the Physician. When sexual abuse of a female inmate results in pregnancy the female inmate is offered information about lawfully related pregnancy services. Medical practitioners stated they do not offer female victims the "morning after pill" following a sexual abuse. If the female victim requires such, an emergency appointment is made with a community gynecologist. The Auditor was informed such service is offered at the time of the forensic examination.

**Conclusion:**

The facility's medical and mental health practitioners offer counseling, treatment, sexually transmitted infection prophylaxis and make referrals for continued care when necessary. The services provided to inmate victims are consistent with a community level of care. The Auditor reviewed policies, procedures, medical records, interviewed inmates, SANE, medical and mental health practitioners to determine the facility meets the requirements of this standard.

115.86	<b>Sexual abuse incident reviews</b>
	<p><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office policy is to conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation where the allegation was substantiated or unsubstantiated, unless the allegation has been determined to be unfounded. The policy requires the review ordinarily occur within 30 days of the conclusion of the investigation. The ACSO policy requires the review team consist of the following:</p> <ul style="list-style-type: none"> <li>● Upper-level management officials;</li> <li>● Input from line supervisors;</li> <li>● Input from investigators; and</li> <li>● Input from medical or mental health practitioners.</li> </ul> <p>The ACSO has a policy that requires the review team:</p> <ul style="list-style-type: none"> <li>● Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;</li> <li>● consider whether the incident or allegation was motivated by race; ethnicity, gender identity, lesbian, gay, bisexual, transgender or intersex identification, status or perceived status, gang affiliation, or was motivated or otherwise caused by other group dynamics within the ACSO;</li> <li>● Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;</li> <li>● Assess the adequacy of staffing levels in that area during different shifts;</li> <li>● Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and</li> <li>● Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to this [standard] and any recommendations for improvement and submit such report to the Sheriff and PREA Compliance Manager.</li> </ul> <p>The ACSO is required by policy to implement the recommendations for improvement with approval of the Sheriff, or shall document its reasons for not doing so.</p> <p><b>Evidence Relied Upon:</b></p> <p>Policy - 2-307 Sexual Misconduct Against Inmates, pg. 15-16</p> <p>Sexual Abuse Incident Review Form</p> <p>Investigative Tracking Mechanism</p> <p>Investigative Records</p> <p>SAIRT Meeting Minutes</p>

Interview with Staff

**Analysis/Reasoning:**

The Auditor met with the PREA Coordinator. The PREA Coordinator and Auditor reviewed the agency's investigative tracking mechanism. In the previous 12 months from the day of the audit the facility received 53 allegations. There were 13 allegations of sexual abuse. Twelve of the allegations were unfounded and 1 was unsustainable. The facility was required to conduct 1 Incident review following the allegation. The Auditor conducted a review of the 30-Day Incident Review Report. The Incident Review Team uses a formatted report. The Sexual Abuse Incident Review report includes the following:

- Investigative Determination
- Need to Change Policy or Practice
- Assessment of Physical Scene
- Adequacy of Staffing Levels
- Motivation of Incident or Allegation
- Assessment of Monitoring Technology
- Recommendations for Improvements
- Submission
- Recommendations Implemented
- Reasons for not Implementing

The PREA Coordinator and Director of Corrections are required to sign the Sexual Abuse Incident Review. The Investigative record is reviewed by the Incident Review Team.

A review of the Sexual Abuse Incident Review reports reveal the team is considering the elements of this standard as required. The Auditor observed evidence of recommendations made by the committee. The Auditor did not observe any recommendations for improvement in any incident review reports. The agency does have a formatted section for such recommendations. The facility conducts incident reviews within 30-days following investigative determination.

The Auditor conducted a formal interview with a staff member who serves on the Incident Review Team. The staff member discussed the process of the review with the Auditor. The staff member explained at the initiation of the meeting the investigator discusses the allegation. The team member informed the Auditor the team follows the format of the Sexual Abuse Incident Review Report to ensure all elements of this standard are complied with. The team member stated the team does discuss recommendations for improvement and include those recommendations on the final report, when determined. The team member informed the Auditor the team meets every month to discuss closed cases. The team reviews all investigations, including unfounded cases.

The Auditor reviewed the Sexual Abuse Incident Review Team (SAIRT) meeting minutes. The monthly minutes include a summary of all cases reviewed from the month. The Auditor observed the team consisted of, but not limited to, the PREA Coordinator, Medical Practitioner, Mental Health Practitioner, and upper-level staff. Facility investigators and line supervisors provide input in the reviews.

**Conclusion:**

The Auditor determined the facility is conducting incident reviews within 30 days of the conclusion of each substantiated and unsubstantiated sexual abuse investigation. The Incident Review Team documents the performance of each incident review. The Auditor reviewed the ACSO policies, procedures, Investigative Records, Sexual Abuse Incident Reviews, Investigative Tracking Mechanism, SAIRT Meeting Minutes and conducted interviews with staff. After review the Auditor determined the facility exceeds the requirements of this standard. The Incident Review Team meets monthly and conducts a review of each case, including those that have been determined unfounded and sexual harassment cases. This standard requires the review team conduct reviews of substantiated and unsubstantiated sexual abuse cases only. The review team is an integral aspect in reviewing the agency's efforts towards prevention, detection and response to sexual abuse.

115.87	<b>Data collection</b>
	<p data-bbox="248 168 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 536 365"><b>Auditor Discussion:</b></p> <p data-bbox="248 405 1477 562">The Arlington County Sheriff's Office policy requires the Internal Affairs Investigator collect data for the purposes of documenting incidents and investigation findings of rape, sexual assault, or sexual misconduct to comply with reporting mandates of the Prison Rape Elimination Act. The Internal Affairs Investigator aggregates the incident-based data annually.</p> <p data-bbox="248 645 574 680"><b>Evidence Relied Upon:</b></p> <p data-bbox="248 721 1082 757">Policy - 5-229 Inmate Sexual Misconduct/Sexual Assault, pg. 29</p> <p data-bbox="248 797 799 833">Policy - 4-102 Records and Reports, pg. 3</p> <p data-bbox="248 873 464 909">Agency Website</p> <p data-bbox="248 949 528 985">PREA Annual Report</p> <p data-bbox="248 1025 719 1061">2018 Survey of Sexual Victimization</p> <p data-bbox="248 1102 512 1137">Interviews with Staff</p> <p data-bbox="248 1178 544 1214"><b>Analysis/Reasoning:</b></p> <p data-bbox="248 1249 1414 1357">The Auditor reviewed the ACSO 2019 PREA Annual Report published on its website. The public can access the report on the Detention Facility main page. The Auditor observed definitions of the following included in the annual report:</p> <ul data-bbox="300 1424 746 1581" style="list-style-type: none"> <li>• Inmate-on-inmate sexual abuse</li> <li>• Staff-on-inmate sexual abuse</li> <li>• Sexual harassment</li> <li>• Voyeurism</li> </ul> <p data-bbox="248 1626 1477 1957">Data in the agency's annual report was aggregated from January 1, 2019 to December 31, 2019. The Auditor reviewed the Bureau of Justice's, Survey of Sexual Victimization submitted by the agency for 2018 data. The report was completed by the ACSO PREA Compliance Manager and submitted to the U. S. Department of Justice in May 2019. The Survey of Sexual Victimization for 2018 is the most recent survey the facility has been required to complete. The Auditor compared the Survey of Sexual Victimization to the data collected by the ACSO. The Data from the agency's PREA Annual Report is sufficient to answer questions on the Survey of Sexual Victimization.</p> <p data-bbox="248 2002 1477 2157">The Auditor interviewed staff responsible for obtaining and maintaining data at the facility. All data collected is maintained by investigators and the PREA Coordinator. Investigators maintain their files from investigations and forward to the PREA Coordinator. The PREA Coordinator maintains records for reporting purposes. The Auditor asked where data is</p>

compiled from. The Auditor was informed data is received from Incident Reports, Grievances, Discipline Reports, Investigative Records, Incident Reviews and any other relevant documents.

The facility maintains electronic records of sexual abuse and sexual harassment information received for reporting purposes. The electronic data is maintained on individual computers that require a username and password to access the data. Data is accessible to investigators, PREA Compliance Manager and the PREA Coordinator.

**Conclusion:**

The Auditor observed evidence the facility is collecting and aggregating sexual abuse data annually. The reported data utilizes a standardized set of definitions. The Auditor reviewed the agency's policies, procedures, website, PREA Annual Report, Survey of Sexual Victimization and interviewed staff and determined the agency meets the requirements of this standard.

115.88	<b>Data review for corrective action</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 536 360"><b>Auditor Discussion:</b></p> <p data-bbox="252 400 1481 521">The Arlington County Sheriff's Office policy requires a review of collected and aggregated data in order to assess and improve the effectiveness of the agency's sexual abuse prevention, detection and response policies, practices and training. The data review is conducted to:</p> <ul data-bbox="300 589 1107 707" style="list-style-type: none"> <li>• Identify problem areas;</li> <li>• Take corrective action on an ongoing basis; and</li> <li>• Prepare an annual report of findings and corrective actions.</li> </ul> <p data-bbox="252 745 1465 1037">ACSO policy requires the annual report include a comparison of the current year's data and corrective actions with those from prior years and to provide an assessment of the agency's progress in addressing sexual abuse. The policy requires the annual report be approved by the Sheriff and made readily available to the public through the agency's website. The ACSO may redact specific material from the report when publication would present a clear and specific threat to the safety and security of the ACDF or lockups. Any redacted material from the report must indicate the nature of the material redacted.</p> <p data-bbox="252 1077 571 1111"><b>Evidence Relied Upon:</b></p> <p data-bbox="252 1151 826 1184">Policy - 4-102 Records and Reports, pg. 3-4</p> <p data-bbox="252 1225 699 1258">Corrective Action Checklist Report</p> <p data-bbox="252 1299 528 1332">PREA Annual Report</p> <p data-bbox="252 1373 464 1406">Agency Website</p> <p data-bbox="252 1447 512 1480">Interviews with Staff</p> <p data-bbox="252 1520 544 1554"><b>Analysis/Reasoning:</b></p> <p data-bbox="252 1594 1445 1841">The Auditor reviewed the Arlington County Sheriff's Office website. The agency maintains annual reports that include its findings and corrective actions for the Arlington County Detention Facility. Annual reports are accessible on the home page of the Detention Facility tab. After accessing this page the public can gain access by clicking the link for the specific report. Each report is hyperlinked by year. The 2019 Annual Report includes data collected and aggregated from 2018 through 2019.</p> <p data-bbox="252 1881 1453 2128">A review of the agency's annual reports reveals the agency attempts to discover problem areas within the agency based on a review of data collected. The agency's annual report includes any corrective actions taken by the ACSO. The 2019 annual report notated no changes in policies or practices were required, no physical barriers were identified and the agency's staff was adequate. The report stipulates the Incident Review Team is a means of identifying need for change. The report states, "The Arlington County Sheriff's Office will</p>

ensure that appropriate changes to policies and practices are made when necessary to ensure a safe, secure environment for inmates, staff and the community."

The Auditor discussed the annual reporting process with the PREA Coordinator and PREA Compliance Manager. The information for the annual report is derived from investigative reports, Incident Reviews and other relevant documents. Corrective actions are enacted when needed as the Incident Review Team recommends corrective actions when warranted. Any corrective actions taken will be documented in the agency's annual report. When problem areas are discovered, facility staff recommend a solution to address the problem area and include the specifics in the annual report.

The Sheriff approves the facility's annual report prior to publishing the report on the agency's website. The Auditor did not observe any redacted materials from any of the ACSO published reports.

**Conclusion:**

The Auditor concluded the agency completes an annual review of collected and aggregated sexual abuse data. The annual report addresses problem areas and corrective actions taken and is approved by the Sheriff prior to publishing on the agency's website. The Auditor reviewed the agency's policies, procedures, website, PREA Annual Report and interviewed staff to determine the agency meets the requirements of this standard.

115.89	<b>Data storage, publication, and destruction</b>
	<p data-bbox="252 168 901 201"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 246 526 280"><b>Auditor Discussion</b></p> <p data-bbox="252 324 534 358"><b>Auditor Discussion:</b></p> <p data-bbox="252 392 1476 638">The Arlington County Sheriff's Office policy is to ensure all data relevant to sexual abuse are securely retained. The Sheriff's Office policy is to make all aggregated sexual abuse data readily available to the public at least annually through its website. Policy requires personal identifiers be removed before making aggregated sexual abuse data public on the agency's website. Agency sexual abuse data is maintained for at least ten years after the date of initial collection.</p> <p data-bbox="252 683 574 716"><b>Evidence Relied Upon:</b></p> <p data-bbox="252 750 805 795">Policy - 4-102 Records and Reports, pg. 4</p> <p data-bbox="252 828 526 862">PREA Annual Report</p> <p data-bbox="252 896 462 929">Agency Website</p> <p data-bbox="252 974 518 1008">Interviews with Staff</p> <p data-bbox="252 1041 430 1075">Observations</p> <p data-bbox="252 1120 550 1153"><b>Analysis/Reasoning:</b></p> <p data-bbox="252 1198 1484 1444">The Auditor conducted a formal interview with personnel responsible for maintaining facility data. Information for the agency's annual report is maintained by the PREA Coordinator and is derived from investigative files, Incident Reviews and other applicable reports. Agency data is maintained electronically on a computer that requires a username and password to gain access to the data. The PREA Coordinator maintains the electronic data on his computer and other relevant documents locked in his office.</p> <p data-bbox="252 1478 1476 1825">The Auditor reviewed the agency's website. The website included annual sexual abuse data collection in an annual report. The Auditor observed data collected and aggregated from previous years in the agency's reports. There were no personal identifiers included in any agency annual reports. The Auditor was informed sexual abuse and sexual harassment data is maintained by the PREA Coordinator for a minimum of 10 years after collection. A username and password are required to gain access to the computer used by the PREA Coordinator. The Auditor observed the office of the PREA Coordinator. The PREA Coordinator is in a single lockable office and has lockable cabinets for printed records.</p> <p data-bbox="252 1859 430 1892"><b>Conclusion:</b></p> <p data-bbox="252 1926 1332 2004">The Auditor reviewed the agency's website, collected data, made observations and interviewed staff to determine the agency meets the requirements of this standard.</p>

115.401	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office operates one facility. The ACDF was last audited in August 2017 during the first year of the last three-year audit cycle. The agency ensured this audit was conducted during the first year of the current audit cycle.</p> <p><b>Evidence Relied Upon:</b></p> <p>Previous PREA Report</p> <p>Facility Tour</p> <p>Interactions with Staff</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor was provided and reviewed all relevant agency policies, procedures, documents and other applicable reports to assist with rendering a decision on the agency's level of compliance with relevant standards. The Auditor reviewed a relevant sampling of documentation from the previous 12 month period. The facility allowed the Auditor to conduct formal interviews with inmates and staff. Facility personnel provided the auditor with a detailed tour, allowing the Auditor access to all facility areas.</p> <p>During the audit the facility provided additional documents that were requested by the Auditor to aid in a determination of the agency's level of compliance. The Auditor observed video monitors while in the facility's control center to review camera placements. The inmate population was allowed to correspond through written confidential correspondence with the Auditor prior to the Auditor's arrival.</p> <p>The Auditor reviewed the facility's previous PREA audit report and observed the facility complied with all standards without the requirement of corrective action. The previous audit determined the facility exceeded four standards. The agency allowed the Auditor the ability to tour all facility areas, conduct interviews with staff and inmates and provided facility documents during the previous audit. During the previous PREA audit the facility allowed inmates to confidentially correspond with the Auditor.</p> <p>The Auditor communicated with the Sexual Assault Nurse Examiner and a victim advocate with the community-based rape crisis center regarding relevant conditions.</p> <p>On June 23, 2020, the Auditor sent a letter to be posted in all inmate living areas that included the Auditor's address. The Auditor sent the facility an English and Spanish version of the notice. The Auditor received no correspondence from an inmate prior to arriving on site for the audit. While touring the facility, the Auditor observed the confidential correspondence notices posted in all inmate housing units. The PREA Compliance Manager posted the notices in all housing units on July 2, 2020. The notices were posted for six weeks prior to the audit.</p>

The Department of Justice did not send a recommendation to the Arlington County Sheriff's Office for an expedited audit of the Arlington County Detention Facility during this audit period.

**Conclusion:**

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

115.403	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Auditor Discussion:</b></p> <p>The Arlington County Sheriff's Office has its previous PREA Audit Report published on its website.</p> <p><b>Evidence Relied Upon:</b></p> <p>Agency Website</p> <p>Previous PREA Audit Report</p> <p><b>Analysis/Reasoning:</b></p> <p>The Auditor reviewed the ACSO website which includes a link to access its previous PREA audit final report. The agency website includes the final report from the second three-year audit cycle. The audit was conducted in August 2017.</p> <p><b>Conclusion:</b></p> <p>The Auditor determined the agency meets the requirements of this standard.</p>

<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	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
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for	yes

	adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes

<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

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

<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
<b>115.16 (a)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual	yes

	abuse and sexual harassment, including: inmates who are blind or have low vision?	
	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

<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes

<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	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
<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	no
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

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

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

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

<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	no
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

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

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

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

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

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

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

<b>115.51 (b)</b>	<b>Inmate reporting</b>	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	no
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	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
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from 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
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes

<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

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

<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of 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
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes

<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations 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
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

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

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

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

<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

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

<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

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

<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

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