Prison	Rape Elimination Adult Priso	•	Report
	☐ Interim		
	Date of Report N	November 12, 2018	
	Auditor In	formation	
Name: John Barkley		Email: fiddlinwarden@y	yahoo.com
Company Name: PREA A	uditors of America		
Mailing Address: 14506 L	akeside View Way	City, State, Zip: Cypress,	Texas 77429
Telephone: 803 451 138	2	Date of Facility Visit: Octo	ober 16-18, 2018
	Agency In	formation	
Name of Agency:		Governing Authority or Paren	t Agency (If Applicable):
Virginia Department of Corrections		Click or tap here to enter tex	t.
Physical Address: 6900 Atmore Drive		City, State, Zip: Richmon	d, Virginia 23225
Mailing Address: P.O. Box 26963 City, State, Zip:		City, State, Zip: Richmon	d, Virginia 23261-6369
Telephone: 804 674 3119 Is Agency accredited by any organization? ⊠ Yes □ N		organization? 🛛 Yes 🔲 No	
The Agency Is:	☐ Military	☐ Private for Profit	☐ Private not for Profit
☐ Municipal	☐ County		☐ Federal
accomplish this through providing supervision and which foster positive cha responsibility and constit		men and women in our one and re-entry services in with research-based evi	custody and care by in safe environments dence, fiscal
Agency Website with PREA Inf	ormation: https://vadoc.virgin	iia.gov/about/procedures/docu	ments/030/038-3.pdf
	Agency Chief E	xecutive Officer	
Name: Harold Clarke		Title: Director	
Email: Harold.Clarke@	vadoc.virginia.gov	Telephone : 804 887 80	081
	Agency-Wide PR	REA Coordinator	

Name: Rose Durbin	Title: P	REA/ADA Sup	ervisor			
Email: rose.durbin@vado	nail: rose.durbin@vadoc.virginia.gov			921		
PREA Coordinator Reports to Maria Vargo, Corrections (r PREA Coo Analysts	rdinator 3	nagers who report to the regional PREA/ADA Compliance Managers		
	Facility Information					
Name of Facility: Coffeewood Correctional Center						
Physical Address: 12352	Coffeewood Drive	Mitchells, Virgin	nia 22729			
Mailing Address (if different than	above): P.O. Box	< 500 Mitchells,	Virginia 2272	9		
	329 6483					
The Facility Is:	☐ Military	☐ Private for p	rofit	☐ Private not for profit		
☐ Municipal	☐ County	State ■		☐ Federal		
Facility Type:	☐ Ja	il	\boxtimes	Prison		
Facility Mission: Coffeewood Correctional Center is an adult male Security Level 2 facility that strives to create and nurture an environment where positive change is embraced to create long term public safety through improving the quality of life. We foster positive changes by utilizing sound correctional principles and standards through evidence based practices, growth consistencies and fiscal responsibilities. We encourage staff to challenge the process and offer the opportunity for all voices to be heard.						
Facility Website with PREA Information: https://vadoc.virginia.gov/facilities/central/coffeewood/						
Warden/Superintendent						
Name: I. T. Gilmore			Warden			
Email: Ivan. Gilmore@va	doc.virginia.gov	Telephone: 5	40 317 4102			
Facility PREA Compliance Manager						
Name: Kimberly A. Soutt	er	Title: IOM/Po				
Email: Telephone: 540 317 4 Kimberly.soutter@vadoc.virginia.gov						
	Facility Healt	h Service Admir	nistrator			
Name: Mark Miller		Title: HSA				
Email: mark.miller@vado	oc.virginia.gov	Telephone: 5	40 317 4296			

Facility Ch	aracteristic	s		
Designated Facility Capacity: 1022 Cur	rent Populat	ion of Facility	r: 1011	
Number of inmates admitted to facility during the past 1	2 months			926
Number of inmates admitted to facility during the past 12 facility was for 30 days or more:	months whos	e length of sta	ay in the	773
Number of inmates admitted to facility during the past 12 facility was for 72 hours or more:	months whos	e length of sta	y in the	922
Number of inmates on date of audit who were admitted to	facility prior	to August 20,	2012:	963
Age Range of Population: Youthful Inmates Under 18: None		Adults: 1	9-82 years	old
Are youthful inmates housed separately from the adult population?			□ No	⊠ NA
Number of youthful inmates housed at this facility during t	he past 12 m	onths:		zero
Average length of stay or time under supervision:				N/A
Facility security level/inmate custody levels:			Housing Levels 1,2 and 3	
Number of staff currently employed by the facility who ma	y have conta	ct with inmate	s:	294
Number of staff hired by the facility during the past 12 months who may have contact with inmates:			63	
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:			83	
Physical Plant				
Number of Buildings: 7 Num	nber of Sing	le Cell Housin	g Units: 1	
Number of Multiple Occupancy Cell Housing Units: 1				
Number of Open Bay/Dorm Housing Units: 12				
Number of Segregation Cells (Administrative and Disciplinary:				
Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.): Rapid Eye Camera system placed in all housing units.				
Medical				
Type of Medical Facility:	24 hour	medical obs	ervation un	nit
Forensic sexual assault medical exams are conducted at:		V in Richmo	-	y Washington
Ot	ther			
Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:				

Number of investigators the agency currently employs to investigate allegations of sexual abuse:	2

Audit Findings

Audit Narrative

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-onsite audit, onsite 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 auditor received the PREA audit questionnaire and copies of all relative policies and sexual assault investigations in a timely manner prior to the onsite arrival. This allowed the auditor to review documents and policies to better understand the process and procedures of Coffeewood Correctional Center which is one of the state prisons within the Virginia Department of Corrections. The auditor was at the prison from October 16th through the 18th, 2018. These three full days consisted of a tour of every building in the prison that an inmate would have access too, random one on one interviews with inmates and inmates from specialized inmates as required by the auditors manual. A total of 40 inmates were interviewed during the audit. The auditor also received correspondence from inmates and those inmates were included in random interviews without the knowledge of the prison. Inmates were selected to represent each housing unit wing and this was done through a random number selection in which the auditor counted down on the living unit roster and ask that inmate to talk with the auditor in private. The staff worked with the auditor during the audit and some on site corrections were made at the request of the auditor which will be described later in this audit document. Following the on-site audit the auditor asked for documentation and had some follow up questions for the prison PREA Compliance Manager and the PREA analyst for this region. The working relationship between the two and the responsiveness to the auditor was very helpful in answering questions and quelling any potential concerns that the auditor had following the onsite visit.

Facility Characteristics

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate, resident or detainee 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.

Coffeewood Correctional Center is located in Mitchells, Virginia a community within Culpeper county. Mitchells is 6.8 miles south-southwest of the Town of Culpeper. The prison is a reception and classification facility whose role is to intake offenders from the local jails and classify them into the Department of Corrections. It houses offenders with multiple levels of security. Coffeewood supports the Virgina Adult Reentry Initiative. Coffeewood releases 35 to 40 returning citizen per month. The prison has 44 acres of fenced in land with 7 housing units. Six of the units house up to 160 inmates in each unit with 80 inmates on each side in a barracks style open dorm. Single and double bunks are used within the unit. The officer is in an upper control room which has a visual on each side of the unit along with cameras. The medical unit at Coffeewood is a 24 hour observation unit. The prison has qualified mental health professionals, education to provide GED, vocational trade, and a Virginia Correctional Enterprise that puts together all types of office

furniture. Coffeewood has substance abuse counselors who initiate groups and one on one counseling with inmates. Coffeewood uses the unit manager approach and 2 unit managers have 3 units assigned to them with one unit manager having one unit and other responsibilities.

Summary of Audit Findings

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Number of Standards Exceeded:	0
Click or tap here to enter text.	
Number of Standards Met:	43
Click or tap here to enter text.	
Number of Standards Not Met:	0
Click or tap here to enter text.	

Summary of Corrective Action (if any)

No corrective action was necessary during this audit.

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)

•		he agency have a written policy mandating zero tolerance toward all forms of sexual and sexual harassment? ⊠ Yes □ No		
•		he written policy outline the agency's approach to preventing, detecting, and responding ual abuse and sexual harassment? $\ oxdot$ Yes $\ oxdot$ No		
115.11	(b)			
•	Has th	e agency employed or designated an agency-wide PREA Coordinator? ⊠ Yes □ No		
•	Is the I	PREA Coordinator position in the upper-level of the agency hierarchy? $\ oxtimes$ Yes $\ oxtimes$ No		
•	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? \boxtimes Yes \square No			
115.11	(c)			
•		agency operates more than one facility, has each facility designated a PREA compliance per? (N/A if agency operates only one facility.) \boxtimes Yes \square No \square NA		
•	facility'	he PREA compliance manager have sufficient time and authority to coordinate the s efforts to comply with the PREA standards? (N/A if agency operates only one facility.) \square No \square NA		
Audite	or Over	all Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)		
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The policy as it relates to the PREA standards and the goal to prevent, detect, respond and monitor is clear with directives for the staff to follow. All areas required to be discussed in the PREA standards are covered within the VADOC policy. Through interviews with the agency PREA Coordinator, Coffeewood's PREA Compliance Manager and the PREA analyst for the region where Coffeewood

resides it was made clear that each understand their role, they are supported by their immediate supervisor and the agency. Through an interview with the director of the Virginia DOC it was also clear that he is vested in running safe prisons as it relates to sexual safety of the inmate and treating inmates, no matter their sexual preference, or how they identify in a humane manner that also keeps security as the number one priority.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a

•	or othe obligati or after	agency is public and it contracts for the confinement of its inmates with private agencies or entities including other government agencies, has the agency included the entity's ion to comply with the PREA standards in any new contract or contract renewal signed on a August 20, 2012? (N/A if the agency does not contract with private agencies or other is for the confinement of inmates.) \square Yes \square No \boxtimes NA
115.12	(b)	
•	agency (N/A if	any new contract or contract renewal signed on or after August 20, 2012 provide for γ contract monitoring to ensure that the contractor is complying with the PREA standards? the agency does not contract with private agencies or other entities for the confinement ates OR the response to 115.12(a)-1 is "NO".) \square Yes \square No \boxtimes NA
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Does Not Meet Standard (Requires Corrective Action)

This standard is met because Coffeewood Correctional Center does not have any of their inmates housed within another contract prison.

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)	1	1	5.	.1	3	(a)
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•	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? \boxtimes Yes \square No
•	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No

	programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No \square NA
•	Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
•	Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? \boxtimes Yes \square No
115.13	3 (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.) \square Yes \square No \boxtimes NA
115.13	3 (c)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.13	3 (d)
•	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? \boxtimes Yes \square No
•	Is this policy and practice implemented for night shifts as well as day shifts? $oximes$ Yes \oximin No
•	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? \boxtimes Yes \square No

		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	tions f	or Overall Compliance Determination Narrative
complia conclus not mee	ance or sions. The st	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
during the sound of the wall intervier Coffeet commatthey was surprised.	the tour observa k arour ws with wood ar ander in alked th	viewed the staffing plan for Coffeewood Correctional Center. Using a site map and in the auditor observed where cameras were located in the living units, the sight and ation of the control room in the middle of each living unit and what the officer sees during and of the unit. Through observation of the logs used, interviews with officers, and in shift commanders it was apparent that unannounced rounds are being conducted at and the staff are aware that they are not to let anyone know this is being done. Each shift terviewed had their own style and method to make sure they were not predictable when see yard. It was also obvious to the auditor that during the tour the inmates were not see senior staff on the yard and appeared to be accustomed to their presence. This was the auditor during the random interviews with inmates.
Ctono	dand 4	IAE AA. Varithful immatas
Stand	aara	I15.14: Youthful inmates
All Yes	/No Qu	uestions Must Be Answered by the Auditor to Complete the Report
115.14	(a)	
	sound,	he facility place all youthful inmates in housing units that separate them from sight, and physical contact with any adult inmates through use of a shared dayroom or other on space, shower area, or sleeping quarters? (N/A if facility does not have youthful s [inmates <18 years old].) \square Yes \square No \boxtimes NA
115.14	(b)	
	youthfu	as outside of housing units does the agency maintain sight and sound separation between all inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 bld].) \square Yes \square No \boxtimes NA
	inmate	is outside of housing units does the agency provide direct staff supervision when youthful is and adult inmates have sight, sound, or physical contact? (N/A if facility does not have all inmates [inmates <18 years old].) \square Yes \square No \boxtimes NA

115.14 (c)	
wit	bes the agency make its best efforts to avoid placing youthful inmates in isolation to comply the this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes \square No \boxtimes NA
exe	les the agency, while complying with this provision, allow youthful inmates daily large-muscle ercise and legally required special education services, except in exigent circumstances? (N/A acility does not have youthful inmates [inmates <18 years old].) \square Yes \square No \boxtimes NA
po	youthful inmates have access to other programs and work opportunities to the extent ssible? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes \square No \boxtimes NA
Auditor O	overall Compliance Determination
	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)
Instructio	ns for Overall Compliance Determination Narrative
compliance conclusion not meet th	ive below must include a comprehensive discussion of all the evidence relied upon in making the e or non-compliance determination, the auditor's analysis and reasoning, and the auditor's is. This discussion must also include corrective action recommendations where the facility does the standard. These recommendations must be included in the Final Report, accompanied by in on specific corrective actions taken by the facility.
There are	no inmates under the age of 18 at this facility so this standard is met.
Standa	rd 115.15: Limits to cross-gender viewing and searches
All Yes/No	o Questions Must Be Answered by the Auditor to Complete the Report
115.15 (a)	
bo	bes the facility always refrain from conducting any cross-gender strip or cross-gender visual dy cavity searches, except in exigent circumstances or by medical practitioners? Yes $\ \square$ No
115.15 (b)	

•	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.) \square Yes \square No \boxtimes NA
•	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.) \square Yes \square No \boxtimes NA
115.15	(c)
•	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? \boxtimes Yes $\ \square$ No
•	Does the facility document all cross-gender pat-down searches of female inmates? $\hfill \boxtimes$ Yes $\hfill \square$ No
115.15	5 (d)
•	Does the facility implement a policy and practice 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? \boxtimes Yes \square No
•	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? \boxtimes Yes $\ \square$ No
115.15	(e)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.15	5 (f)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No

Auditor Overall Compliance Determination П **Exceeds Standard** (Substantially exceeds requirement of standards) \boxtimes Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period) **Does Not Meet Standard** (Requires Corrective Action) **Instructions for Overall Compliance Determination Narrative** The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility. There are no female inmates housed at Coffeewood Correctional Center. Staff interviewed are aware of the VA DOC procedure with the pat search and shakedown of a transgender female. At the time of the audit Coffeewood had a least one transgender female inmate. Random interviews with inmates who have identified as transgender supported that the staff at Coffeewood treat them in a respectful manner while performing the role of their security job. During the audit it was brought to the institution's attention that the inmate who was identified as transgender female wanted to shower alone. A screen was brought in, a procedure implemented and the inmate was informed. This was an immediate corrective action initiated by the prison and when the Warden informed the inmate of the procedure the inmate was satisfied. Standard 115.16: Inmates with disabilities and inmates who are limited **English proficient** All Yes/No Questions Must Be Answered by the Auditor to Complete the Report 115.16 (a) 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 □ No

 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,

Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have

low vision? ⊠ Yes □ No

and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? \boxtimes Yes \square No
■ 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 ☐ No
■ 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 ☐ No
■ 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)?
■ Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? Yes □ No
■ 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 □ No
■ 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 □ No
■ 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 □ No
■ 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 □ No
115.16 (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 □ No
 Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☑ Yes □ No
115.16 (c)

typ: obt	es the agency always refrain from relying on inmate interpreters, inmate readers, or other es of inmate assistance except in limited circumstances where an extended delay in aining an effective interpreter could compromise the inmate's safety, the performance of first-ponse duties under §115.64, or the investigation of the inmate's allegations? \boxtimes Yes \square No
Auditor O	verall Compliance Determination
	Exceeds Standard (Substantially exceeds requirement of standards)
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)
Instruction	ns for Overall Compliance Determination Narrative
compliance conclusions not meet th	we below must include a comprehensive discussion of all the evidence relied upon in making the or non-compliance determination, the auditor's analysis and reasoning, and the auditor's s. This discussion must also include corrective action recommendations where the facility does be standard. These recommendations must be included in the Final Report, accompanied by on specific corrective actions taken by the facility.
were aware were identi mental hea about their They felt sa	r is aware of the language line that VADOC has available for staff. During interviews staff of how to use that language line. During the time of the audit there were no inmates who ified as having difficulty understanding English. The auditor interviewed inmates with some alth disabilities but was able to garner from these interviews that the inmates understood safety from sexual abuse and who to contact if they were sexually abused or harassed. afe in the prison but also knew they could talk to theirQMHP (quality mental health provider) any concerns.
Standar	d 115.17: Hiring and promotion decisions
All Yes/No	Questions Must Be Answered by the Auditor to Complete the Report
115.17 (a)	
who	es the agency prohibit the hiring or promotion of anyone who may have contact with inmates o has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, enile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
who fac	es the agency prohibit the hiring or promotion of anyone who may have contact with inmates o has been convicted of engaging or attempting to engage in sexual activity in the community litated by force, overt or implied threats of force, or coercion, or if the victim did not consent was unable to consent or refuse? \boxtimes Yes \square No

•	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 question immediately above? ⊠ Yes □ No
•	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)? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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 question immediately above? \boxtimes Yes \square No
115.17	(b)
•	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
115.17	(c)
•	Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.17	(d)
•	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? \boxtimes Yes \square No
115.17	(e)
•	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? \boxtimes Yes \square No
115.17	(f)

•	about	he agency ask all applicants and employees who may have contact with inmates directly previous misconduct described in paragraph (a) of this section in written applications or ews for hiring or promotions? \boxtimes Yes \square No
•	about	the agency ask all applicants and employees who may have contact with inmates directly previous misconduct described in paragraph (a) of this section in any interviews or written valuations conducted as part of reviews of current employees? \boxtimes Yes \square No
•		the agency impose upon employees a continuing affirmative duty to disclose any such aduct? \boxtimes Yes $\ \square$ No
115.17	7 (g)	
•		the agency consider material omissions regarding such misconduct, or the provision of ally false information, grounds for termination? \boxtimes Yes \square No
115.17	7 (h)	
•	harass employ substa	the agency provide information on substantiated allegations of sexual abuse or sexual sment involving a former employee upon receiving a request from an institutional yer for whom such employee has applied to work? (N/A if providing information on intiated allegations of sexual abuse or sexual harassment involving a former employee is ited by law.) \boxtimes Yes \square No \square NA
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
	4.	

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The auditor reviewed the hiring policy, the procedure, the employee application and interviewed the HR manager to learn the new hire process. Headquarters is responsible for performing extensive background checks of all applicants. Once that list is approved the warden has the final say on who is hired at Coffeewood or who comes in as a volunteer or contractor. Staff is aware of their obligation to report an arrest. This was confirmed with interviews with the staff. The prison is on a schedule to have a background check of every employee, contractor and volunteer every 5 years. The auditor saw the schedule with confirmation that the background checks had been completed.

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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•	modific expans if agen facilitie	agency designed or acquired any new facility or planned any substantial expansion or cation of existing facilities, did the agency consider the effect of the design, acquisition, sion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A acy/facility has not acquired a new facility or made a substantial expansion to existing as since August 20, 2012, or since the last PREA audit, whichever is later.) \square No \square NA
115.18	3 (b)	
•	other ragency update technology	agency installed or updated a video monitoring system, electronic surveillance system, or monitoring technology, did the agency consider how such technology may enhance the y's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or ed a video monitoring system, electronic surveillance system, or other monitoring blogy since August 20, 2012, or since the last PREA audit, whichever is later.) \square No \square NA
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

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There have been no upgrades but it was learned that to lay more fiber optic cable for more cameras would require digging and laying new pipe. Anytime that more cameras can be added with the ability to record the activity is an obvious advantage to the safety and security of the inmates and staff. For the purpose of this audit and this standard it is a "meets"

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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115.21 (a)
• 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 □ No □ NA
115.21 (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 □ No □ NA
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 □ No □ NA
115.21 (c)
■ 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 □ No
 Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?
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 ⋈ No
■ Has the agency documented its efforts to provide SAFEs or SANEs? ✓ Yes ✓ No
115.21 (d)

•		ne agency attempt to make available to the victim a victim advocate from a rape crisis ☑ Yes □ No
•	make a	e crisis center is not available to provide victim advocate services, does the agency available to provide these services a qualified staff member from a community-based ration, or a qualified agency staff member? \boxtimes Yes \square No
•		e agency documented its efforts to secure services from rape crisis centers? $\hfill \square$ No
115.21	(e)	
•	qualifie	uested by the victim, does the victim advocate, qualified agency staff member, or ed community-based organization staff member accompany and support the victim in the forensic medical examination process and investigatory interviews? Yes No
•		uested by the victim, does this person provide emotional support, crisis intervention, ation, and referrals? \boxtimes Yes $\ \square$ No
115.21	(f)	
•	agency (e) of the	gency itself is not responsible for investigating allegations of sexual abuse, has the requested that the investigating entity follow the requirements of paragraphs (a) through his section? (N/A if the agency/facility is responsible for conducting criminal AND strative sexual abuse investigations.) \square Yes \square No \boxtimes NA
115.21 •	,	is not required to audit this provision.
115.21	(h)	
•	member to server issues	gency uses a qualified agency staff member or a qualified community-based staff or the purposes of this section, has the individual been screened for appropriateness in this role and received education concerning sexual assault and forensic examination in general? [N/A if agency attempts to make a victim advocate from a rape crisis center lie to victims per 115.21(d) above.] \square Yes \square No \boxtimes NA
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

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If an inmate at Coffeewood Correctional Center requires a sexual assault examine they are taken to Mary Washington Hospital a 451 bed full service hospital in Fredericksburg, Virginia. If this hospital does not have a SANE on duty or available the prison will transport the inmate to MCV Hospital in Richmond, Virginia. The VA DOC has a statewide memo of understanding with Virginia Sexual and Domestic Violence Action Alliance which is an advocacy, membership and service provider organization in Virginia. The auditor has seen a copy of this memo of agreement. The inmates have access to counselors via the inmate phone system. Action Alliance also works with partner sexual assault centers. Safe Journey is the sexual assault center that covers Culpeper County where the Coffeewood Correctional Center is located. The PCM for Coffeewood has begun a dialogue with Safe Journey to see what they can provide for potential groups or individual counseling. Coffeewood Correctional Center also has qualified mental health professionals that can provide resources to the inmates who have had any sexual trauma in their life.

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.22 (a	١
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113.22	z (a)
•	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? \boxtimes Yes \square No
•	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? \boxtimes Yes \square No
115.22	2 (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? \boxtimes Yes \square No
•	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? \boxtimes Yes \square No
•	Does the agency document all such referrals? ⊠ Yes □ No

115.22 (c)

■ If a separate entity is responsible for conducting criminal investigations, does such publication 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 □ No ⋈ NA	
115.22 (d)	
 Auditor is not required to audit this provision. 	
115.22 (e)	
 Auditor is not required to audit this provision. 	
Auditor Overall Compliance Determination	
☐ Exceeds Standard (Substantially exceeds requirement of standards)	
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
□ Does Not Meet Standard (Requires Corrective Action)	
Instructions for Overall Compliance Determination Narrative	
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Coffeewood Correctional Center has an investigator assigned to the prison with an intelligence officer. They are responsible for investigating all sexual assault investigations as well as other potential criminal activity such as contraband entering the prison. The investigator works closely with the Specia Investigative Unit (SIU) based out of VADOC headquarters in Richmond, Virginia. The investigator submits his investigative report to SIU should the case need to be taken to the criminal level. The PREA policy is clear that all allegations of sexual assault and sexual harassment are investigated. The auditor found this to be true when reviewing investigation files.	
TRAINING AND EDUCATION	
Standard 115.31: Employee training	
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report	
115.31 (a)	

•	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.31	(b)
•	Is such training tailored to the gender of the inmates at the employee's facility? $oximes$ Yes \odots 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? \boxtimes Yes \square No
115.31	(c)
•	Have all current employees who may have contact with inmates received such training? \boxtimes Yes $\ \Box$ No

	all emp	the agency provide each employee with refresher training every two years to ensure that ployees know the agency's current sexual abuse and sexual harassment policies and dures? \boxtimes Yes \square No
	-	rs in which an employee does not receive refresher training, does the agency provide ner information on current sexual abuse and sexual harassment policies? \boxtimes Yes \square No
115.31	(d)	
		he agency document, through employee signature or electronic verification, that yees understand the training they have received? \boxtimes Yes \square No
Audito	r Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions	for Overall Compliance Determination Narrative
complia conclus not mee	ance or sions. T et the s	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
The auditor reviewed the lesson plan of the PREA training that is done yearly for what is called "in service" training. Through random interviews with staff the auditor learned that the staff are trained in the appropriate information all prison staff need to help prevent, detect, respond and monitor sexual assault within the prison. The auditor was also able to interview officers who had just graduated from the training academy as a new officer and was able to quiz them on what they knew and had been trained at the academy. All staff interviewed were clearly aware of what to do and their responsibilities should they learn of a sexual assault or sexual harassment allegation. The auditor reviewed documentation to confirm that it was documented when training was received by staff.		
Stand	dard 1	115.32: Volunteer and contractor training
All Yes	s/No Q	uestions Must Be Answered by the Auditor to Complete the Report
115.32	(a)	

been trained on	ensured that all volunteers and contractors who have contact with inmates have their responsibilities under the agency's sexual abuse and sexual harassment ection, and response policies and procedures? \boxtimes Yes \square No	
115.32 (b)		
agency's zero-t how to report so	eers and contractors who have contact with inmates been notified of the olerance policy regarding sexual abuse and sexual harassment and informed uch incidents (the level and type of training provided to volunteers and II be based on the services they provide and level of contact they have with les \(\simega\) No	
115.32 (c)		
_	by maintain documentation confirming that volunteers and contractors training they have received? \boxtimes Yes \square No	
Auditor Overall Compliance Determination		
☐ Exceed	s Standard (Substantially exceeds requirement of standards)	
	standard (Substantial compliance; complies in all material ways with the d for the relevant review period)	
☐ Does N	ot Meet Standard (Requires Corrective Action)	
Instructions for Overall Compliance Determination Narrative		
compliance or non-comp conclusions. This discus not meet the standard.	st include a comprehensive discussion of all the evidence relied upon in making the pliance determination, the auditor's analysis and reasoning, and the auditor's assion must also include corrective action recommendations where the facility does These recommendations must be included in the Final Report, accompanied by corrective actions taken by the facility.	

The auditor reviewed the policy and procedure for training volunteers and contractors working at Coffeewood Correctional Center. Contractors and Volunteers receive the same background check that is done on employees. They are included in the background check done every 5 years. The auditor interviewed the contract employees and volunteers to find out what they had learned and remembered from the training. The volunteer that was interviewed while at the prison at night knew the procedure to follow if an inmate informed them that they had been sexually assaulted or if they were being sexually harassed. They knew who the PCM at Coffeewood was and knew their responsibilities as a volunteer.

Standard 115.33: Inmate education

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.33	s (a)
•	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? \boxtimes Yes \square No
•	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? \boxtimes Yes \square No
115.33	s (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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.33	3 (c)
•	Have all inmates received such education? ⊠ Yes □ No
•	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? \boxtimes Yes \square No
115.33	s (d)
•	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? \boxtimes Yes \square No
•	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? \boxtimes Yes $\ \square$ No
•	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? \boxtimes Yes \square No
•	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? \boxtimes Yes \square No
•	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? ⊠ Yes □ No

115.33	8 (e)	
•		the agency maintain documentation of inmate participation in these education sessions? \Box No
115.33	3 (f)	
•	continu	ition to providing such education, does the agency ensure that key information is uously and readily available or visible to inmates through posters, inmate handbooks, or written formats? \boxtimes Yes \square No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions	for Overall Compliance Determination Narrative
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Every inmate who is transferred to Coffeewood Correctional Center is immediately told about their right to be free from sexual harassment and sexual assault. They are told as soon as they exit the transport vehicle about their rights as it relates to the PREA standards. They sign a document that they have been told about zero tolerance and understand what they have been told. The auditor in random interviews with inmates and through observations of this form learned that the inmates are being told and the inmates understand why they are being told.		
Stan	dard '	115.34: Specialized training: Investigations
All Ye	s/No Q	uestions Must Be Answered by the Auditor to Complete the Report
115.34	l (a)	
•	agency investi (N/A if	ition to the general training provided to all employees pursuant to §115.31, does the y ensure that, to the extent the agency itself conducts sexual abuse investigations, its gators have received training in conducting such investigations in confinement settings? the agency does not conduct any form of administrative or criminal sexual abuse gations. See 115.21(a).) \boxtimes Yes \square No \square NA

115.34 (D)		
■ 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 □ No □ NA		
■ 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 □ No □ NA		
■ 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 □ No □ NA		
■ 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 o administrative or criminal sexual abuse investigations. See 115.21(a).] ☑ Yes □ No □ NA		
115.34 (c)		
 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 □ No □ NA 		
115.34 (d)		
 Auditor is not required to audit this provision. 		
Auditor Overall Compliance Determination		
☐ Exceeds Standard (Substantially exceeds requirement of standards)		
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
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Instructions for Overall Compliance Determination Narrative		

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not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The auditor reviewed the training records of the investigator to learn what classes had been taken. The investigator had taken the course offered by the national institute of corrections on line, the investigator school that is offered by the VA DOC and helps to promote the partnership with the investigator and the Special Investigation Unit. The investigator had also taken supervisor training. All of these courses and the information that is shared is critical in making sure all investigations are handled correctly so that if any were to go criminal the SIU would not have difficulty when working with the commonwealth attorney to prosecute. The VA DOC places emphasis on the investigator and the intelligence officer having the necessary training tools to complete their job as it relates to sexual assault investigations.

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35	(a)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.35	(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.) \square Yes \square No \boxtimes NA
115.35	(c)
	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?

115.35 (d) ■ Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? Yes □ No

•	Do medical and mental health care practitioners contracted by and volunteering for the agenc
	also receive training mandated for contractors and volunteers by \$115.32? ⊠ Yes □ No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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The contractor who provides medical services for the inmates at Coffeewood Correctional Center has over 26 employees. These staff have all taken the same in service courses required by employees of the VADOC. The auditor reviewed the training records to confirm. The mental health employees at Coffeewood Correctional Center are not contract employees and also have taken all of the in service course work associated with PREA. They have taken the NIC course on line that is targeted for mental health employees working in a correctional setting. When fully staffed, there are 4 mental health professionals who provide services to the inmates at Coffeewood Correctional center. Through interviews with medical and mental health it was apparent that they knew the procedure if an inmate disclosed an allegation. The mental health staff understand the seriousness of the zero tolerance policy.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41 (a)

•	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.4	1 (b)
•	Do intake screenings ordinarily take place within 72 hours of arrival at the facility? $\ \ \boxtimes$ Yes $\ \ \Box$ No
115.4	1 (c)
•	Are all PREA screening assessments conducted using an objective screening instrument? \boxtimes Yes $\ \square$ No
115.4	1 (d)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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)? \boxtimes Yes \square No

•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.41	(e)
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? \boxtimes Yes \square No
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? \boxtimes Yes \square No
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse? \boxtimes Yes \square No
115.41	(f)
•	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? \boxtimes Yes \square No
115.41	(g)
•	Does the facility reassess an inmate's risk level when warranted due to a: Referral? $\hfill \boxtimes$ Yes $\hfill \square$ No
•	Does the facility reassess an inmate's risk level when warranted due to a: Request? $\hfill \boxtimes$ Yes $\hfill \square$ No
•	Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse? \boxtimes Yes $\ \square$ No
•	Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? \boxtimes Yes \square No
115.41	(h)
	· ,

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 □ No		
115.41 (i)		
■ 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 □ No		
Auditor Overall Compliance Determination		
☐ Exceeds Standard (Substantially exceeds requirement of standards)		
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
□ Does Not Meet Standard (Requires Corrective Action)		
Instructions for Overall Compliance Determination Narrative		
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A review of the screen instrument used by VA DOC and the staff at Coffeewood Correctional Center provided information to the auditor to show that all necessary questions were being asked and answered to help the prison place the inmate appropriately. VA DOC establishes through their risk assessment whether the inmate is HRSA (high risk sexual abuser) or HRSV (high risk sexual victim). Interviewing one of the staff responsible for the screening when the inmates first arrives provided the auditor with the procedure and the auditor was able to learn how and where this screening occurred. The unit counselors are responsible for making sure that a risk assessment is done within the 30 days of arrival. The PCM has created a spreadsheet and notifies the unit counselor that the time to perform the PREA reassessment is approaching. This is a great checks and balance system established at Coffeewood.		
Standard 115.42: Use of screening information		
Standard 113.42. Use of screening information		
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report		
115.42 (a)		

•	boes 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? \boxtimes Yes \square No	
•	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? \boxtimes Yes \square No	
•	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? \boxtimes Yes \square No	
•	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? \boxtimes Yes \square No	
•	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? \boxtimes Yes \square No	
115.42 (b)		
•	Does the agency make individualized determinations about how to ensure the safety of each inmate? \boxtimes Yes $\ \square$ No	
115.42	2 (c)	
•	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)? \boxtimes Yes \square No	
•	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? \boxtimes Yes \square No	
115.42 (d)		
•	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? \boxtimes Yes \square No	
115.42	? (e)	

■ Are each transgender or intersex inmate's own views with respect to his or her own safety giver serious consideration when making facility and housing placement decisions and programming assignments? ☑ Yes □ No			
115.42 (f)			
 Are transgender and intersex inmates given the opportunity to shower separately from other inmates?			
15.42 (g)			
■ 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? ⊠ Yes □ No			
• 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? ⋈ Yes □ No			
• 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? ⋈ Yes □ No			
Auditor Overall Compliance Determination			
Exceeds Standard (Substantially exceeds requirement of standards)			
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
□ Does Not Meet Standard (Requires Corrective Action)			
nstructions for Overall Compliance Determination Narrative			

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The classification set forth in the PREA risk assessment is not shared with many staff. Only those staff who need to know for inmate placement are allowed access. Coffeewood staff are dealing with the inmates they have who have been identified as transgender in a very professional manner. The staff at Coffeewood are always keeping the safety and security at the forefront and treat the transgender identified inmate in a respectable way. Accommodations are and have been made for these inmates who are transgender. This was supported with interviews with inmates who have identified as transgender female.

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

1	1	5	.43	(a)
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i r	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? \boxtimes Yes \square No
i	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? \boxtimes Yes \square No
115.43 ((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? \boxtimes Yes \square No
	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? \boxtimes Yes \square No
	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? \boxtimes Yes \square No
	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? \boxtimes Yes \square No
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? \boxtimes Yes \square No
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? \boxtimes Yes \square No
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? \boxtimes Yes \square No

115.43 (c)

•		he facility assign inmates at high risk of sexual victimization to involuntary segregated g only until an alternative means of separation from likely abusers can be arranged?		
		No No		
•	Does s	such an assignment not ordinarily exceed a period of 30 days? Yes No		
115.43	(d)			
•	section	voluntary segregated housing assignment is made pursuant to paragraph (a) of this n, does the facility clearly document: The basis for the facility's concern for the inmate's \boxtimes Yes \square No		
•	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? \boxtimes Yes \square No			
115.43	(e)			
•	risk of	case of each inmate who is placed in involuntary segregation because he/she is at high sexual victimization, does the facility afford a review to determine whether there is a uing need for separation from the general population EVERY 30 DAYS? Yes No		
Audito	r Over	all Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)		
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		
Instru	ctions f	for Overall Compliance Determination Narrative		

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Through interviews with the Warden and senior staff it was learned that placing potential victim in involuntary segregation would be the very last resort. They understand the importance of not having the appearance that the victim was "locked up". If the staff felt like the victim needed to be away from the yard they would work with VA DOC headquarters to have the inmate transferred to another prison. During the tour of the prison there were very few inmates in the Restrictive housing unit and none were there for any sexual assault or victimization. The prison tries to limit the amount of time inmates are placed in restrictive housing for any disciplinary reason or charge.

REPORTING

Standard 115.51: Inmate reporting	
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report	
115.51 (a)	
■ Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? ✓ Yes ✓ No	
■ 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 □ No	
■ 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 □ No	
115.51 (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 ✓ No	
Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? ⋈ Yes □ No	
 ■ Does that private entity or office allow the inmate to remain anonymous upon request? ☑ Yes □ No 	
 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? ☐ Yes ☒ No 	
115.51 (c)	
■ Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? ✓ Yes ✓ No	
 Does staff promptly document any verbal reports of sexual abuse and sexual harassment? ☑ Yes □ No 	
115.51 (d)	

Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? \boxtimes Yes \square No

Auditor Overall Compliance Determination

		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	or Overall Compliance Determination Narrative
complia conclus not me	ance or sions. Ti et the st	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
abuse email s phone. The sta were in accusa the inn	or sexu sent to t The in aff knew nterview ations se nate rep	and Coffeewood Correctional Center have numerous ways for inmates to report a sexual al harassment. The auditor checked the phone line during the audit and was shown the he PREA Coordinator within 15 minutes of when the auditor left the message on the imates interviewed knew how to report and knew that their family could report for them. If how to report if they did not feel comfortable with reporting to their supervisor but all who wed knew the importance of reporting and knew that their supervisor would take the eriously. The staff all knew that a thorough incident report should be filled out following corting to them of the allegation. The inmates knew that the third party reporting was not DC and that it was confidential if the inmate chooses to remain anonymous.
Stand	dard 1	115.52: Exhaustion of administrative remedies
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.52	(a)	
•	have a does n ordinar explicit	agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not dministrative procedures to address inmate grievances regarding sexual abuse. This ot mean the agency is exempt simply because an inmate does not have to or is not rily expected to submit a grievance to report sexual abuse. This means that as a matter of a policy, the agency does not have an administrative remedies process to address sexual \square Yes \square No \square NA
115.52	(b)	
•	without portion	he agency permit inmates to submit a grievance regarding an allegation of sexual abuse t any type of time limits? (The agency may apply otherwise-applicable time limits to any of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is t from this standard.) \boxtimes Yes \square No \square NA

•	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.) \boxtimes Yes \square No \square NA
115.52	(c)
•	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.) \boxtimes Yes \square No \square NA
•	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.) \boxtimes Yes \square No \square NA
115.52	2 (d)
•	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.) \boxtimes Yes \square No \square NA
•	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.) \boxtimes Yes \square No \square NA
•	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.) \square Yes \boxtimes No \square NA
115.52	: (e)
•	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 □ No □ NA
•	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.) \boxtimes Yes \square No \square NA
•	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.) \boxtimes Yes \square No \square NA
11E E2) (A)

Instru	ctions f	or Overall Compliance Determination Narrative
		Does Not Meet Standard (Requires Corrective Action)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Exceeds Standard (Substantially exceeds requirement of standards)
Audito	r Overa	all Compliance Determination
•	do so (gency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it DNLY where the agency demonstrates that the inmate filed the grievance in bad faith? agency is exempt from this standard.) \boxtimes Yes \square No \square NA
115.52	(g)	
•		he agency's final decision document the agency's action(s) taken in response to the ency grievance? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•		he initial response document the agency's action(s) taken in response to the emergency nce? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	whethe	he initial response and final agency decision document the agency's determination or the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt is standard.) \boxtimes Yes \square No \square NA
•	decisio	eceiving an emergency grievance described above, does the agency issue a final agency on within 5 calendar days? (N/A if agency is exempt from this standard.) \Box No \Box NA
•		eceiving an emergency grievance described above, does the agency provide an initial se within 48 hours? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	immine thereof immed	eceiving an emergency grievance alleging an inmate is subject to a substantial risk of ent sexual abuse, does the agency immediately forward the grievance (or any portion that alleges the substantial risk of imminent sexual abuse) to a level of review at which iate corrective action may be taken? (N/A if agency is exempt from this standard.). □ No □ NA
•	inmate	e agency established procedures for the filing of an emergency grievance alleging that an is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from andard.) \boxtimes Yes $\ \square$ No $\ \square$ NA

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not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The auditor reviewed the grievance process and the types of grievances that have been filed by inmates at Coffeewood Correctional Center. There have been no grievances regarding sexual abuse or harassment. If a grievance were to be used, once the grievance was received and documented it would be sent to the PCM who would then in consultation with the Investigator at Coffeewood and SIU open up a case. The inmate would be apprised that a case was ongoing and when the case was closed the inmate would be told the outcome of the investigation. Once any allegation of sexual assault is brought to the attention of any staff it is immediately investigated.

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

11	5	.53	(a)

•	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? \boxtimes Yes \square No
•	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? \square Yes \boxtimes No
•	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? \boxtimes Yes \square No
115.53	(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? \boxtimes Yes \square No
115.53	(c)
•	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? \boxtimes Yes \square No
•	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? \boxtimes Yes \square No

Auditor Overall Compliance Determination

		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	
Instru	ctions f	or Overall Compliance Determination Narrative	
complia conclus not me	ance or sions. Ti et the st	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does and and an arranged the second panied by specific corrective actions taken by the facility.	
The auditor reviewed the Memo of Understanding that VA DOC has with Virginia Action Alliance to provide counseling over the phone to inmates should they call on the inmate phone system. These calls are not recorded and this is posted throughout the living units. The PCM at Coffeewood Correctional Center has also reached out to the provider of their county, Safe Journey, to see if they will be willing to hold groups and provide support since the prison is in their county. The auditor performed a test call to make sure that a counselor was reached via the inmate phone system and the auditor was successful. The auditor learned from Action Alliance that they tell the inmate many times that the information they receive is confidential.			
Stan	dard 1	15.54: Third-party reporting	
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report	
115.54	(a)		
•	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? \boxtimes Yes $\ \square$ No		
•	■ Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? ✓ Yes ✓ No		
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	

Does Not Meet Standard (Requires Corrective Action)

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The VA DOC publishes on their website the procedure for someone to report on behalf of an inmate. There are phone numbers published on posters in the visitation area at Coffeewood so that visitors know how they can report on behalf of an inmate. The Coffeewood staff clearly knows that all allegations are to be taken seriously no matter the source.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

and management decisions? ⊠ Yes □ No

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

11	5	.61	(a)

113.01	(a)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.61	(b)

115.61 (c)

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 □ No

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

 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?
115.61 (d)
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 □ No
115.61 (e)
■ 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 □ No
Auditor Overall Compliance Determination
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The PREA policy clearly informs the staff of their duty and obligation to report. Through training and staff meetings it is shared with staff the zero tolerance approach and their responsibility as staff. This was confirmed with the auditor during staff interviews. Staff knew to never be dismissive of an allegation no matter where the allegation came from. Staff were aware that the PCM was responsible for monitoring retaliation to inmates or staff who reported.
Standard 115.62: Agency protection duties
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.62 (a)
■ 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 □ No

Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
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Instru	ctions f	or Overall Compliance Determination Narrative
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separa most li	ted fron kely the	ving units are in an open barracks style if any inmate needed to be immediately nother inmates they could place him in the one unit that has single or two to a cell but prison would request assistance to have the inmate transported to another facility. This is learned during interviews and by reviewing procedures.
Stan	dard 1	15.63: Reporting to other confinement facilities
All Ye	s/No Qu	uestions Must Be Answered by the Auditor to Complete the Report
115.63	(a)	
•	facility,	eceiving an allegation that an inmate was sexually abused while confined at another does the head of the facility that received the allegation notify the head of the facility or riate office of the agency where the alleged abuse occurred? \boxtimes Yes \square No
115.63	(b)	
•		notification provided as soon as possible, but no later than 72 hours after receiving the ion? \boxtimes Yes $\ \square$ No
115.63	(c)	
•	Does t	he agency document that it has provided such notification? $oxtimes$ Yes \oxtimes No
115.63	(d)	
•		he facility head or agency office that receives such notification ensure that the allegation stigated in accordance with these standards? \boxtimes Yes \square No
Audito	r Overa	all Compliance Determination

		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
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Instru	ctions f	or Overall Compliance Determination Narrative
complia conclus not me	ance or sions. The st	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does and and an arrangementations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
there to what the together	he Ward ne inma er to ope	no is transported from another VA DOC prison discloses that he was sexually assaulted den or designee calls that prison and sends an email to that prison providing details of the alledges. Since they are both VA DOC prisons the investigators and SIU would work en a case and investigate. If this occurs at another prison not under the jurisdiction of the a formal letter is sent from the Warden of Coffeewood to the facility head of that prison or
Stan	dard 1	15.64: Staff first responder duties
All Yes	s/No Qu	uestions Must Be Answered by the Auditor to Complete the Report
115.64	(a)	
•	membe	earning of an allegation that an inmate was sexually abused, is the first security staffer to respond to the report required to: Separate the alleged victim and abuser? \Box No
•	membe	earning of an allegation that an inmate was sexually abused, is the first security staffer to respond to the report required to: Preserve and protect any crime scene until riate steps can be taken to collect any evidence? \boxtimes Yes \square No
•	member actions changi	earning of an allegation that an inmate was sexually abused, is the first security staff or respond to the report required to: Request that the alleged victim not take any that could destroy physical evidence, including, as appropriate, washing, brushing teeth, ng clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred 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,

	_	ng clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred a time period that still allows for the collection of physical evidence? \boxtimes Yes \square No
115.64	(b)	
•	that the	rst staff responder is not a security staff member, is the responder required to request alleged victim not take any actions that could destroy physical evidence, and then notify y staff? \boxtimes Yes \square No
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions f	or Overall Compliance Determination Narrative
complia conclus not me	ance or l sions. Th et the st	nelow must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does andard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
Coffee staff we	wood ha ere all a	interviewed at Coffeewood were clear of the procedure if they were the first to the scene. as had little to no incidents where these procedures have had to be used but the security ware of them. The staff also knew what to do if an inmate approached them and that they were being sexually harassed.
Stand	dard 1	15.65: Coordinated response
All Yes	s/No Qu	uestions Must Be Answered by the Auditor to Complete the Report
115.65	(a)	
•	respon	e facility developed a written institutional plan to coordinate actions among staff first ders, medical and mental health practitioners, investigators, and facility leadership taken onse to an incident of sexual abuse? \boxtimes Yes \square No
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)

		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions	or Overall Compliance Determination Narrative
complia conclus not me	ance or sions. T et the s	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
abused notified sexual	d. This i d. Thro assault	cedure in place for who to contact and who the inmate needs to see if he was sexually s a very well thought out coordinated plan to ensure that all who need to know are ugh interviews with staff it was clear that they communicate with each other not just about but as a whole in their day to day activity. This communication is vital if a sexual assault at the prison.
	dard ′ abuse	115.66: Preservation of ability to protect inmates from contact
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.66	(a)	
•	on the agreer abuser	th the agency and any other governmental entities responsible for collective bargaining agency's behalf prohibited from entering into or renewing any collective bargaining nent or other agreement that limits the agency's ability to remove alleged staff sexual reference from contact with any inmates pending the outcome of an investigation or of a sination of whether and to what extent discipline is warranted? Yes No
115.66	(b)	
•	Audito	r is not required to audit this provision.
Audito	r Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
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There are no unions within the VA DOC so this standard is met.	

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

	11	5	.67	(a)
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- 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

 ✓ No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? ⋈ Yes □ No

115.67 (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?

115.67 (c)

- 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 residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ⋈ Yes □ No
- 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 □ No
- 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 □ No

•	for at lea	in instances where the agency determines that a report of sexual abuse is unfounded, ast 90 days following a report of sexual abuse, does the agency: Monitor any inmate ary reports? No
•	for at lea	in instances where the agency determines that a report of sexual abuse is unfounded, ast 90 days following a report of sexual abuse, does the agency: Monitor inmate housing s? \boxtimes Yes \square No
•	for at lea	in instances where the agency determines that a report of sexual abuse is unfounded, ast 90 days following a report of sexual abuse, does the agency: Monitor inmate or changes? ⊠ Yes □ No
•	for at lea	in instances where the agency determines that a report of sexual abuse is unfounded, ast 90 days following a report of sexual abuse, does the agency: Monitor negative ance reviews of staff? \boxtimes Yes \square No
•	for at lea	in instances where the agency determines that a report of sexual abuse is unfounded, ast 90 days following a report of sexual abuse, does the agency: Monitor reassignments \boxtimes Yes \square No
•		e agency continue such monitoring beyond 90 days if the initial monitoring indicates a ng need? \boxtimes Yes $\ \square$ No
115.67	' (d)	
•	In the ca ⊠ Yes	ase of inmates, does such monitoring also include periodic status checks?
115.67	(e)	
•		ther individual who cooperates with an investigation expresses a fear of retaliation, does ncy take appropriate measures to protect that individual against retaliation?
115.67	(f)	
•	Auditor	is not required to audit this provision.
Audito	r Overa	II Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

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Coffeewood Correctional center and the VA DOC have provisions in place to ensure there is no retaliation to inmates or staff who report. All allegations are closely monitored by the PCM of Coffeewood and all of this information is conveyed in writing via reports to the appropriate PREA analyst. This allows for the prison and headquarters to monitor the alleged victim and or reporter to ensure that there is no retaliation regarding work assignment, bed placement or in the case of a staff person no retaliation as in regards to promotions of assignment posts. The auditor reviewed the documents that provide instructions for allegations and the monitoring of such accusers. There have been very few accusations at Coffeewood but the PCM was clear in their responsibility as it relates to monitoring.

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

11	5	.68	(a)

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
✓ No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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Coffeewood Correctional Center and the VA DOC use protective custody/restricted housing on a limited basis. Placing an inmate in a restricted environment for their safety would be the last resort

taken. The primary goal would be to separate the accuser from the alleged victim without penalizing the victim. This was evident in interview with the Warden and senior staff as well as the PREA Coordinator for the VA DOC and the PREA analyst responsible for Coffeewood Correctional Center.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.71 (a)

115.71 (a)
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 no responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ⋈ Yes □ No □ NA
■ 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 □ No □ NA
115.71 (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 ✓ No
115.71 (c)
■ Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? ⊠ Yes □ No
 ■ Do investigators interview alleged victims, suspected perpetrators, and witnesses? ☑ Yes □ No
■ Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? ⊠ Yes □ No
115 71 (d)

115.71 (d)

 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? \boxtimes Yes \square No

115.71 (e)

•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.71	(f)
•	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.71	(g)
•	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? \boxtimes Yes \square No
115.71	l (h)
•	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? \boxtimes Yes $\ \Box$ No
115.71	l (i)
•	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? \boxtimes Yes \square No
115.71	(j)
•	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? \boxtimes Yes \square No
115.71	l (k)
•	Auditor is not required to audit this provision.
115.71	l (I)
•	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).) \square Yes \square No \boxtimes NA

Auditor Overall Compliance Determination				
		Exceeds Standard (Substantially exceeds requirement of standards)		
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		
nstruc	tions f	or Overall Compliance Determination Narrative		
complia conclus not me	ance or sions. The et the si	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.		
The investigator and the intelligence officer for Coffeewood Correctional Center have received training on investigating sexual assaults within a confined setting. These trainings have occurred at the VA police academy and also nationally. The Coffeewood investigation team works closely with the SIU iaison. This ensures that should the case become criminal that all procedures are followed to provide a strong case for the Commonwealth Attorney. The auditor reviewed the few cases that had been opened at Coffeewood to verify all important questions had been answered in the investigative report. There is open communication between the prison investigator and the SIU. This is vital when making sure that all cases are investigated and that the inmates see the importance of these investigations.				
Stand	dard 1	115.72: Evidentiary standard for administrative investigations		
All Yes	/No Qu	uestions Must Be Answered by the Auditor to Complete the Report		
115.72	(a)			
•	eviden	e that the agency does not impose a standard higher than a preponderance of the ce in determining whether allegations of sexual abuse or sexual harassment are ntiated? \boxtimes Yes \square No		
Audito	r Over	all Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)		
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		

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The training that the investigator receives and the policy that dictates all investigations ensures that this is followed. The investigations are deemed substantiated, unsubstantiated or unfounded. This was verified by the auditor in the review of investigations.

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

4	1	_	7	2	1	a)
1	1	5	. /	.5	(a

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 □ No

115.73 (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 □ No ⋈ NA

115.73 (c)

- 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 posted within the inmate's unit? ☑ Yes ☐ No
- 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 □ No
- 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 □ No
- 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

	whene	nt has been released from custody, does the agency subsequently inform the resident ever: The agency learns that the staff member has been convicted on a charge related to a buse within the facility? \boxtimes Yes \square No
115.73	3 (d)	
•	does to	ring an inmate's allegation that he or she has been sexually abused by another inmate, he agency subsequently inform the alleged victim whenever: The agency learns that the d abuser has been indicted on a charge related to sexual abuse within the facility? \Box No
•	does to	ring an inmate's allegation that he or she has been sexually abused by another inmate, he agency subsequently inform the alleged victim whenever: The agency learns that the d abuser has been convicted on a charge related to sexual abuse within the facility? \Box No
115.73	8 (e)	
•	Does t	the agency document all such notifications or attempted notifications? $oxtimes$ Yes \odots No
115.73	3 (f)	
•	Audito	r is not required to audit this provision.
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions	for Overall Compliance Determination Narrative

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All inmates are notified in writing by the SIU the outcome of the investigation. This was verified by the auditor by reviewing the documents. This information is also shared/copied to the PREA Coordinator for VA DOC. It was noted that there was at least one case where an inmate who had been released was notified in writing. The correspondence was sent to the address that they inmate left with the prison. All notifications are kept with the file that is held by the prison investigator. This allows him to know what has been done and can used for future reference.

DISCIPLINE

Stan	Standard 115.76: Disciplinary sanctions for staff			
All Yes	s/No Qu	uestions Must Be Answered by the Auditor to Complete the Report		
115.76	(a)			
•		off subject to disciplinary sanctions up to and including termination for violating agency abuse or sexual harassment policies? \boxtimes Yes \square No		
115.76	(b)			
•	Is term	ination the presumptive disciplinary sanction for staff who have engaged in sexual $$		
115.76	(c)			
-	harass circum	sciplinary sanctions for violations of agency policies relating to sexual abuse or sexual ment (other than actually engaging in sexual abuse) commensurate with the nature and stances of the acts committed, the staff member's disciplinary history, and the sanctions ed for comparable offenses by other staff with similar histories? \boxtimes Yes \square No		
115.76	(d)			
•	resigna	terminations for violations of agency sexual abuse or sexual harassment policies, or ations by staff who would have been terminated if not for their resignation, reported to: aforcement agencies (unless the activity was clearly not criminal)? \boxtimes Yes \square No		
•	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? \boxtimes Yes \square No			
Audito	or Overa	all Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)		
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
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The Virginia DOC in their policies and in their practice take a strong stance towards any employee who is found to have engaged in any sexual abuse or harassment. There have been no recent cases at Coffeewood but through interviews with the PREA Coordinator and PREA Analyst it has occurred in other prisons and these cases have led to termination and in some cases prosecution. Staff interviewed at Coffeewood were keenly aware of the hard line that needed to be drawn to be a corrections professional. The auditor noted that staff at Coffeewood are engaging with the inmates which is a useful tool to keep the lines of communication open but the professionalism line between inmate and staff was clear.

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77	(a)					
•	•	contractor or volunteer who engages in sexual abuse prohibited from contact with s? $oxed{\boxtimes} {\sf Yes} oxed{\square} {\sf No}$				
•	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? \boxtimes Yes \square No					
•	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? ⊠ Yes □ No					
115.77 (b)						
•	contrac	case of any other violation of agency sexual abuse or sexual harassment policies by a ctor or volunteer, does the facility take appropriate remedial measures, and consider or to prohibit further contact with inmates? \boxtimes Yes \square No				
Auditor Overall Compliance Determination						
		Exceeds Standard (Substantially exceeds requirement of standards)				
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)				

Instructions for Overall Compliance Determination Narrative

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The policy and procedure is very clear with contractors and volunteers. They are trained and informed of their responsibilities as it relates to the PREA standards and they are informed of the criminal potential of engaging in a sexual relationship with an inmate while working as a volunteer. The VA DOC informs the volunteers and contractors through training that sexual activity will not be tolerated and at the very least the volunteer/contractor would be prohibited from working in any VA DOC facility.

Standard 115.78: Disciplinary sanctions for inmates

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All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.78 (a)
■ 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 □ No
115.78 (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 ✓ No
115.78 (c)
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 □ No
115.78 (d)
• If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? ⋈ Yes □ No
115.78 (e)

staff member did not consent to such contact? \boxtimes Yes \square No

Does the agency discipline an inmate for sexual contact with staff only upon a finding that the

115.76) (T)	
•	upon a	e purpose of disciplinary action does a report of sexual abuse made in good faith based a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an an or lying, even if an investigation does not establish evidence sufficient to substantiate egation? \boxtimes Yes \square No
115.78	3 (g)	
•	to be s	he agency always refrain from considering non-coercive sexual activity between inmates sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) \square No \square NA
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\square	Moets Standard (Substantial compliance: complies in all material ways with the

standard for the relevant review period)

Does Not Meet Standard (Requires Corrective Action)

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The VA DOC does not open a sexual assault case if two inmates admit that they are in a consensual sexual relationship but this is a disciplinary violation administered by the agency. In interviewing the investigator it is important to note that just because an inmate had been in a consensual relationship with an inmate does not mean that they could not be sexually assaulted or harassed in the future. Their past relationships have no bearing on the current case. Before any inmate is charged administratively a QMHP determines whether they can be charged as it relates to their mental health. QMHP's at Coffeewood are available for inmates who have had any sexual assault history in their background while at a prison or charges from the state. The VA DOC rarely pursues false allegations by inmates. They believe that to keep the communication line open with inmates it is best for inmates to see that all allegations are taken seriously and there are no repercussions for reporting.

MEDICAL AND MENTAL CARE

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

445 70 (6)

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report 115.81 (a) 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? ⊠ Yes □ No 115.81 (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.) \boxtimes Yes \square No \square NA 115.81 (c) 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? \boxtimes Yes \square No 115.81 (d) 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? 115.81 (e) 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? \boxtimes Yes \square No **Auditor Overall Compliance Determination**

 \boxtimes

Does Not Meet Standard (Requires Corrective Action)

standard for the relevant review period)

Exceeds Standard (Substantially exceeds requirement of standards)

Meets Standard (Substantial compliance; complies in all material ways with the

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Through interviews with mental health it was confirmed that before talking to the inmate they obtain informed consent. Interviews with those who conduct the PREA risk assessment and the unit counselors who conduct the reassessment it was confirmed and the auditor verified with documentation that the mental health professional at Coffeewood was notified via email that an inmate had disclosed that they had been sexually assaulted prior to incarceration or at another prison facility. Because of the QMHP being notified via email as soon as the inmate discloses it is well within 14 days before the inmate is called to be seen and offered the services of the mental health professional. The communication line between those conducting the PREA risk screenings and the mental health professionals at Coffeewood is open. The auditor learned during interviews that the mental health professionals at Coffeewood want to provide the best service for the inmate.

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

1	1	5	.82	(a)
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115.82	. (a)
•	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? \boxtimes Yes \square No
115.82	2 (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? \boxtimes Yes \square No Do security staff first responders immediately notify the appropriate medical and mental health practitioners? \boxtimes Yes \square No
115.82	2 (c)
•	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? \boxtimes Yes \square No

115.82 (d)

 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 □ No 				
Auditor Overall Compliance Determination				
☐ Exceeds Standard (Substantially exceeds requirement of standards)				
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)				
□ Does Not Meet Standard (Requires Corrective Action)				
Instructions for Overall Compliance Determination Narrative				
The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.				
Inmates who are sexually assaulted are provided a Sexual Assault exam at a hospital with a SANE. The Coffeewood inmates would receive that same treatment and care that is afforded any citizen in Virginia. The auditor confirmed by reviewing policies, procedures and documentation that the victim of sexual abuse would not be charged for the hospital visit or any necessary medication prescribed to them. The inmate at the hospital would also be provided sexual assault counseling from a trained professional at the hospital.				
Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers				
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report				
115.83 (a)				
■ 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 □ No				
115.83 (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 □ No				
115.83 (c)				

		ne facility provide such victims with medical and mental health services consistent with nmunity level of care? \boxtimes Yes $\ \square$ No			
115.83	(d)				
		nate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy (N/A if all-male facility.) \square Yes \square No \boxtimes NA			
115.83	(e)				
•	receive	hancy results from the conduct described in paragraph § 115.83(d), do such victims timely and comprehensive information about and timely access to all lawful pregnancy-medical services? (N/A if all-male facility.) \square Yes \square No \boxtimes NA			
115.83	(f)				
•		nate victims of sexual abuse while incarcerated offered tests for sexually transmitted ons as medically appropriate? $oxinesize$ Yes \oxinesize No			
115.83	(g)				
	 ■ 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 □ No 				
115.83	(h)				
	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.)				
Audito	r Overa	all Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)			
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
		Does Not Meet Standard (Requires Corrective Action)			
Instruc	tions f	or Overall Compliance Determination Narrative			

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not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

If an inmate is transferred to Coffewood and is a known abuser mental health schedules a time to meet with the inmate. This is done long before 60 days because the communication between those who process inmates and know of their arrival are quick to notify the PCM and the mental health professionals.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)	11	5	.86	(a)
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115.86 ((a)
ir	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse nvestigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? \boxtimes Yes \square No
115.86 ((b)
	Does such review ordinarily occur within 30 days of the conclusion of the investigation? $oximes$ Yes \oximin No
115.86 ((c)
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? \boxtimes Yes \square No
115.86 ((d)
• [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 □ No
- 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 □ No
- 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? \boxtimes Yes \square No
- Does the review team: Assess the adequacy of staffing levels in that area during different

■ Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes □ No			
■ 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 □ No			
115.86 (e)			
 Does the facility implement the recommendations for improvement, or document its reasons for not doing so?			
Auditor Overall Compliance Determination			
☐ Exceeds Standard (Substantially exceeds requirement of standards)			
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
□ Does Not Meet Standard (Requires Corrective Action)			
Instructions for Overall Compliance Determination Narrative			
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The auditor interviewed members who are to sit on the incident review meeting. There have not been many reasons for the committee to meet because there have been few sexual assaults that were found to be substantiated or unsubstantiated. The members of the committee were aware of the reason and importance of them meeting. The use of after action reports is a common practice among the VA DOC. The members of this committee are the same employees through other positions in the prison take a proactive approach to make sure situations don't occur. The Coffeewood leadership practices preventing sexual assault.			
Standard 115.87: Data collection			
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report			
115.87 (a)			

•		he agency collect accurate, uniform data for every allegation of sexual abuse at facilities is direct control using a standardized instrument and set of definitions? \boxtimes Yes \square No
115.87	(b)	
•	Does th ⊠ Yes	ne agency aggregate the incident-based sexual abuse data at least annually?
115.87	(c)	
•	from the	be incident-based data include, at a minimum, the data necessary to answer all questions a most recent version of the Survey of Sexual Violence conducted by the Department of $\mathbb{Z} \otimes \mathbb{Z} = \mathbb{Z} \otimes \mathbb{Z}$
115.87	(d)	
•		be agency maintain, review, and collect data as needed from all available incident-based ents, including reports, investigation files, and sexual abuse incident reviews? \Box No
115.87	(e)	
•	which it	be agency also obtain incident-based and aggregated data from every private facility with contracts for the confinement of its inmates? (N/A if agency does not contract for the ment of its inmates.) \square Yes \square No \boxtimes NA
115.87	(f)	
•	Departn	be agency, upon request, provide all such data from the previous calendar year to the ment of Justice no later than June 30? (N/A if DOJ has not requested agency data.) \square No \square NA
Audito	r Overa	II Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions fo	or Overall Compliance Determination Narrative

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The PREA coordinator and the PREA analysts under that position collect and maintain data of all the 38 VA DOC prisons. This information is stored and readily available as they track any trends and as they keep up with the allegations that are brought to the attention of the staff. The incident report, investigation, notification to the inmate and the incident review are all kept together to make a complete report of each allegation.

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report			
115.88 (a)			
■ 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 □ No			
■ 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 □ No			
■ 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 □ No			
115.88 (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 □ No			
115.88 (c)			
■ 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 □ No			
115.88 (d)			
 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 □ No 			
Auditor Overall Compliance Determination			

Exceeds Standard (Substantially exceeds requirement of standards)

		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		
nstru	ctions	for Overall Compliance Determination Narrative		
complia conclui not me	ance or sions. T et the s	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.		
DOJ. T nvesti	his info	nnual report provides yearly data and the VA DOC reports their statistics to the BJS of the ormation in the annual report shows full transparency of the number of allegations, opened and outcome of those investigations. The data collected and compiled by the VA to the PREA Coordinator and the regional directors of prison operations.		
Standard 115.89: Data storage, publication, and destruction				
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report		
115.89	(a)			
•		he agency ensure that data collected pursuant to § 115.87 are securely retained?		
115.89	(b)			
•	and pr	he agency make all aggregated sexual abuse data, from facilities under its direct control ivate facilities with which it contracts, readily available to the public at least annually h its website or, if it does not have one, through other means? \boxtimes Yes \square No		
115.89	(c)			
•		he agency remove all personal identifiers before making aggregated sexual abuse data y available? $oxtimes$ Yes \oxtimes No		
115.89	(d)			
•	years a	he agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 after the date of the initial collection, unless Federal, State, or local law requires rise? \boxtimes Yes \square No		
Audito	r Over	all Compliance Determination		

	Exceeds Standard (Substantially exceeds requirement of standards)		
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
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Instructions	for Overall Compliance Determination Narrative		
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This data is found in the annual report with a comparison and is held for access by the PREA Coordinator.			
AUDITING AND CORRECTIVE ACTION			
Standard 115.401: Frequency and scope of audits			
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report			
115.401 (a)			
therea organ	g the three-year period starting on August 20, 2013, and during each three-year period after, did the agency ensure that each facility operated by the agency, or by a private ization on behalf of the agency, was audited at least once? (N/A before August 20, 2016.) \square NO \square NA		
115.401 (b)			
one-th			
ino ag	g each one-year period starting on August 20, 2013, did the agency ensure that at least hird of each facility type operated by the agency, or by a private organization on behalf of jency, was audited? ⊠ Yes □ No		
115.401 (h)	hird of each facility type operated by the agency, or by a private organization on behalf of		
115.401 (h) • Did th	hird of each facility type operated by the agency, or by a private organization on behalf of		
115.401 (h) • Did th	aird of each facility type operated by the agency, or by a private organization on behalf of pency, was audited? ⊠ Yes □ No e auditor have access to, and the ability to observe, all areas of the audited facility?		

■ Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? ☐ Yes ☐ No
115.401 (m)
 Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? ☑ Yes □ No
115.401 (n)
■ 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 ✓ No
Auditor Overall Compliance Determination
☐ Exceeds Standard (Substantially exceeds requirement of standards)
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
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The auditor was allowed to go into all areas of the prison. The auditor received mail from inmates from

The auditor was allowed to go into all areas of the prison. The auditor received mail from inmates from the signs posted announcing the days of the audit and the mailing address of the auditor. The auditor selected the inmates randomly and was allowed to interview each inmate separately in a private office.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. 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 that there has never been a Final Audit Report issued.) \boxtimes Yes \square No \square NA		
Audito	or Overa	all Compliance Determination	
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
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The last audit of the Coffeewood Correctional Center is published on the agency website and the auditor was able to read over that audit prior to arrival to the prison.

AUDITOR CERTIFICATION

I certify that:

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

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission. Auditors are not permitted to submit audit reports that have been scanned. See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

John Barkley	<u>November 12, 2018</u>
·	
Auditor Signature	Date

¹ See additional instructions here: https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110.

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.