

To be PREA AUDIT REPORT INTERIM FINAL

JUVENILE FACILITIES

NATIONAL
PREA
RESOURCE
CENTER



BJA
Bureau of Justice Assistance
U.S. Department of Justice

Auditor Information			
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Telephone number: 443-248-9189			
Date of facility visit: July 27&28,2015			
Facility Information			
Facility name: Richmond Juvenile Detention Center			
Facility physical address: 1700 Oliver Hill Way Richmond, VA 23219			
Facility mailing address: <i>(if different from above)</i>			
Facility telephone number: (804) 646-2937			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input checked="" type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input type="checkbox"/> Correctional	<input type="checkbox"/> Detention	<input type="checkbox"/> Other
Name of facility's Chief Executive Officer: Rodney Baskerville			
Number of staff assigned to the facility in the last 12 months: 16			
Designed facility capacity: 60			
Current population of facility: 43			
Facility security levels/inmate custody levels: Detention			
Age range of the population: 10 – 18			
Name of PREA Compliance Manager: Letta Porter Jones		Title:	Asst. Superintendent
Email address: letta.jones@richmondgov.com		Telephone number:	(804)646-3371
Agency Information			
Name of agency: City of Richmond Government			
Governing authority or parent agency: City of Richmond, Virginia			
Physical address:			
Mailing address: <i>(if different from above)</i>			
Telephone number:			
Agency Chief Executive Officer			
Name: Rufus Fleming		Title:	Director of DJS
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Agency-Wide PREA Coordinator			
Name:		Title:	
Email address:		Telephone number:	

AUDIT FINDINGS

NARRATIVE

The Richmond Juvenile Detention Center(RJDC) is a 60-bed detention facility providing services to the City of Richmond for juvenile males and females. Ages of youth at the facility range between 10 and 19. The facility provides services for youth detained and awaiting disposition of their cases, as well as youth who are adjudicated post-disposition and a detention re-entry program. The facility provides supervision of youth in a safe, secure, and humane environment. Services for youth include education, mental health, substance abuse and somatic health care. Medical and Mental Health Services are available to youth seven days a week. Educational services are provided by Richmond City Public Schools. The facility operates with a total of 81 staff who may have contact with residents. A typical day for a youth involves hygiene, meals, school, groups with youth and staff, structured physical and leisure activities and visits from family. On a typical day youth may also receive medical and mental health services including substance abuse counseling for post-dispositional residents. The average length of stay for detention residents is approximately 26 days and residents on post-disposition have an average length of stay of 176 days.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Richmond Juvenile Detention Center is located in the City of Richmond proper. The facility is adjacent to the Juvenile and Domestic Relations District Court building. Youth are able to exit the court facility and enter the juvenile facility's intake area without the need for vehicle transportation. The facility is self-sufficient and is one building with distinct areas of the facility dedicated to housing, medical, intake, education, dietary, leisure, and recreation. The youth have access to outside recreation. Youth in the post-disposition program are able to leave grounds and participate in off grounds structured programming. Security and supervision is heightened and supported by 78 surveillance cameras which are located throughout the interior and exterior of the facility.

SUMMARY OF AUDIT FINDINGS

The notifications of the audit were posted in the facility at least six weeks prior to the on-site audit. The Pre-Audit Questionnaire and the supporting documentation were uploaded to a flash drive and mailed to the auditor, as was a 3-ring binder with hard copies of documentation. All was received prior to the on-site audit. There were several phone calls between the auditor and the compliance manager in reference to the documentation which allowed for a smooth and informed audit. The audit of the Richmond Juvenile Detention Center took place on the dates of July 27th and 28th 2015. The auditor arrived at the facility at 8:00 a.m. on Monday, July 27, 2015 and departed at around 5:00 p.m. and returned that evening to interview staff on the overnight shift at 11:00 p.m. On Tuesday, July 28, 2015 the auditor arrived at the facility at 8:00 a.m. and departed at 2:00 p.m. An entrance conference was held on the morning of July 27, 2015 with facility leadership. A complete facility tour was conducted by the auditor. During the tour, staff members were observed to be interacting with residents and providing direct supervision during activities. 12 randomly selected staff, 29 specialized staff and 11 residents were interviewed. The responses of staff and residents during their interviews confirmed that all had received PREA training. Staff members were interviewed from all shifts. The files of all youth currently assigned to the facility were reviewed. A random sampling of other facility documentation was reviewed. This sampling included, but was not limited to: log books, shift reports, incident reports, policies and procedures, training records, logs, curriculum and video surveillance footage. All personnel were professional, engaged and helpful throughout the audit process. During the on-site portion of the audit and after its completion, additional documentation was provided as requested. The environment witnessed by this auditor was one of professionalism and commitment. The facility was well maintained, very clean and the overall sense of warmth throughout the facility creates an atmosphere of caring and concern for the residents housed there. Staff exhibited a genuine care and concern for the youth that are charged to their custody. There was an overall sense of dignity and respect that was readily apparent between staff and youth.

Number of standards exceeded:	0
Number of standards met:	38
Number of standards not met:	0
Number of standards not applicable:	03

Standard 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

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

The RJDC PREA Policy and Procedure Manual page 2 mandates zero tolerance of all forms of sexual abuse and sexual harassment. The agency organizational chart reflects the designation of both a PREA coordinator and PREA manager. The manual provides the required PREA definitions pages 3-7. Additionally, the manual outlines the agency's approach to implementing PREA standards as well as the guidelines and procedures for guidelines for implementing the agency's approach to preventing, detecting and responding to sexual abuse and sexual harassment. It also addresses Conduct and Performance, contains prohibited behaviors for staff, and includes sanctions for employees and youth who have participated in the prohibited behaviors.

Standard 115.312 Contracting with other entities for the confinement of residents

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

This standard is not applicable. The Richmond Juvenile Detention Center has not entered into or renewed a contract for the confinement of inmates since August 20, 2012 and does not contract with other agencies for the confinement of inmates.

Standard 115.313 Supervision and monitoring

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

The facility presented an Annual Staffing Plan. Supervisory personnel, including upper level supervisors and administrators are conducting and documenting unannounced rounds on all shifts. Documentation was reviewed and found to be compliant. Currently, the RJDC maintains a staffing ration of 1:8 ratio during waking hours and a minimum of 1:16 ratio during sleeping hours. The ratios are currently achieved by utilizing security personnel assigned as rovers and supervisory personnel assigned to the shift. Further, the RJDC PREA policy manual requires intermediate and higher level staff to conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The rounds are documented. A review of documentation, video surveillance footage, and staff interviews confirmed the practice.

Standard 115.315 Limits to cross-gender viewing and searches

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

The RJDC PREA policy manual page 65 prohibits cross-gender pat or strip searches. The policy manual further states that body cavity searches may only be conducted by qualified medical personnel and only then when specifically authorized by the facility Superintendent or court. During the past 12 months, there were no cross-gender strip or visual body cavity searches and no cross-gender pat-down searches of residents. Policy prohibits searching or examining a transgender or intersex resident for the sole purpose of determining the resident's genital status. Additionally, policy requires that residents have access to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing; and that staff of the opposite gender shall announce their presence when entering resident housing units or other areas where residents are likely to be showering or performing bodily functions or changing clothing. Interviews with staff and residents verified these practices are in place. Interviews with residents and staff confirm compliance with agency policy and procedures.

Standard 115.316 Residents with disabilities and residents who are limited English proficient

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

The RJDC PREA Policy Manual requires that residents with disabilities or who are limited English proficient are provided meaningful access to all aspects of the facility's efforts to prevent, protect and respond to sexual abuse and harassment. Resident and staff interviews verified the facility does not use resident assistants and there were no instances of resident interpreter or readers being used in the past 12 months. The facility has access to professional interpreting services through the City of Richmond for the provision of services to those youth who are deaf or hard of hearing and youth who have limited English proficiency that have reported sexual abuse.

Standard 115.317 Hiring and promotion decisions

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

The RJDC PREA Policy Manual pages 12-13 and 19, and 25 requires criminal background screening for all new hires and contractors. Policy also requires consulting with child abuse registries before hiring or enlisting services of any contractor who has contact with residents. In the past 12 months, eight people were hired who may have contact with residents who have had criminal background checks. Further, policy requires criminal background checks to be conducted every five years or have a system in place that captures this information. The facility is required to ask all applicants about previous misconduct; material omission regarding misconduct is grounds for termination. The facility uses a disclosure form staff must complete and sign which meets the guidelines of this standard. Interviews with staff and the personnel responsible for Human Resources and hiring and promotion decisions confirm compliance with this standard.

Standard 115.318 Upgrades to facilities and technologies

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

The RJDC has not made any substantial expansions or modifications to the existing facility since August 20, 2012. The RJDC's video monitoring system has 78 cameras, some of which have been installed or updated since August 20, 2012.

Standard 115.321 Evidence protocol and forensic medical examinations

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

The RJDC Policy Manual addresses this standard and in addition to the other requirements, states that forensic medical examinations will be completed at no financial cost to the victim. The exams shall be conducted by Sexual Assault Forensic Examiners or Sexual Assault Nurse Examiners. Additionally, the Policies direct staff to cooperate with investigations. The facility has an agreement with the Medical college of Virginia (MCV) for the provision of medical examinations related to sexual abuse/assault. At the time of the audit the facility was able to produce electronic mail communications which outline an agreement with MCV and the YWCA to provide victim advocacy services that include but are not limited to accompaniment to forensic examinations, counseling, crisis hotline, and training for staff and residents. There have been no forensic examinations conducted during this audit period.

Standard 115.322 Policies to ensure referrals of allegations for investigations

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

The RJDC PREA Policy manual requires the immediate referral of all sexual abuse allegations to Child Protective Services. In the past 12 months, RJDC had no allegations of sexual abuse or sexual harassment. Interviews with the Facility Administrator and other staff verified their knowledge of the policy's requirements.

Standard 115.331 Employee training

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

The RJDC PREA Policy Manual page 9 outlines the agencies requirements for staff training. The training curriculum, staff training records and staff interviews indicates staff receives PREA training during initial training and annually during refresher training. The training curriculum provided was consistent with the elements of the standard. All employees and contractors are trained as new hires regardless of their previous experience. Employees training documentation was reviewed and staff interviews verified staff comprehension of their responsibilities relating to PREA standards.

Standard 115.332 Volunteer and contractor training

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

Contractors and volunteers are provided a manual created specifically for them which outlines their responsibilities and expectations. Contractors and volunteers are also provided the Sexual Misconduct and harassment handbook and they review a PREA video: Keeping our Kids Safe. They are given the opportunity to ask questions about the PREA information provided. A prepared document outlines information concerning PREA and the accompanying responsibilities. Contractors and volunteers acknowledge their understanding of the information. The document includes the reference to the zero tolerance policy, information on how to report incidents of sexual contact; and the document has to be signed and dated.

Standard 115.333 Resident education

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

The RJDC PREA Policy Manual states that during Intake the facility will provide to ALL residents information in an age appropriate fashion, which will include: the agency's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse and sexual harassment. Intake staff reviews the information with the residents and residents sign verifying receipt of the information. Additional training is conducted within ten days of intake that is comprehensive and age-appropriate and includes a video and a review of residents' rights to be free from sexual abuse and sexual harassment, their right to be free from retaliation for reporting incidents and, the agency's policies and procedures related to responding to incidents of sexual abuse and sexual harassment. Documentation of residents' signatures were reviewed and confirmed during resident interviews. All residents interviewed stated they received this information the same day they arrived at the facility and periodically thereafter. The PREA information is presented in a manner that is accessible to all residents. During the facility tour PREA posters and reporting instructions were posted throughout the facility. If needed, the facility has facility staff and an agreement to provide interpreter services as well as hearing and visual impairment services for residents with disabilities or who may have limited English proficiency.

Standard 115.334 Specialized training: Investigations

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

This standard is not applicable. The Richmond Juvenile Detention Center does not conduct administrative or criminal sexual abuse investigations.

Standard 115.335 Specialized training: Medical and mental health care

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

The RJDC PREA Policy Manual addresses this standard. Documentation shows that the medical and mental health staff members have completed on-line specialized training through the National Institute of Corrections. The facility nurses do not conduct forensic medical examinations. Interviews with nurses and facility leadership support the documentation presented.

Standard 115.341 Screening for risk of victimization and abusiveness

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

The RJDC PREA Policy Manual addresses this standard. A screening for risk of victimization and abusiveness is completed on each resident within 72 hours of intake. All residents entering the facility within the last 12 months whose length of stay in the facility was 72 hours or more was screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their entry into the facility. Staff and resident interviews and a review of every resident record confirm that the screening for risk of sexual abuse victimization and sexual abusiveness toward other residents is being conducted.

Standard 115.342 Use of screening information

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

The RJDC PREA Policy Manual addresses compliance with this standard. Policy prohibits considering lesbian, gay, bisexual, transgender, or intersex (LGBTI) identification or status as an indicator of likelihood of being sexually abusive, further, policy prohibits placing LGBTI residents into particular housing, bed or other assignments solely on the basis of such identification or status. Any resident at risk of sexual victimization who is subsequently held in isolation will be afforded a review every 30 days to determine whether there is a continuing need for separation from the general population. There have been no residents placed in isolation in the last 12 months because he or she was at risk of sexual victimization. A review of youth files revealed youth were classified and housed at the appropriate levels of supervision and assigned to the appropriate housing units.

Standard 115.351 Resident reporting

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

The RJDC PREA Policy Manual addresses compliance with this standard. There are multiple internal ways a resident may report allegations of sexual abuse; sexual harassment; retaliation for reporting; and staff neglect or other violations that may contribute to abuse. A resident may report to staff, use the grievance process, call the PREA hotline by dialing 7, or a third party may report allegations. Residents may also call the rape crisis center hotline to report sexual assault. No residents are detained solely for civil immigration purposes. Residents receive reporting information at Intake and in the resident handbooks. Interviews with staff and residents support an understanding of the process and compliance with this standard.

Standard 115.352 Exhaustion of administrative remedies

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

The RJDC Policy Manual pages 13-15 addresses compliance with this standard. The facility has an administrative process for responding to resident grievances. Residents are not required to use an informal grievance process or to attempt to resolve with staff alleged instances of abuse. In addition to receiving this information at Intake, the resident handbook and behavior management handbook contains information regarding the grievance system. Each grievance is reviewed administratively and all grievances are investigated by an objective Detention Center employee who is not a subject of the grievance. There is no time limit for a resident to submit a grievance regarding an allegation of sexual misconduct. There were no grievances alleging sexual abuse during the last twelve months. There were no regular or emergency grievances alleging a substantial risk of imminent sexual abuse filed in the past 12 months.

Standard 115.353 Resident access to outside confidential support services

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

An MOU with the YWCA of Richmond has been developed and is waiting to be finalized. The agreement also includes Virginia Commonwealth University Medical Center. The MOU is anticipated to include victim advocacy services, including accompanying victims to the hospital as well as counseling services, and referral services for victims. Youth have access to the phone number and mailing address to the Virginia Child Abuse Hotline through posters located on the housing units, in school and Intake and strategic areas throughout the facility. Youth are also able to reach the free hotline by dialing the number 7 on the phones in their housing units. Youth interview confirmed that they knew how to make contact with the Child Abuse Hotline if needed. Youth were also aware of the services provided. Staff and youth interviews confirmed that youth have reasonable and confidential access to their attorneys, other legal representation, as well as parents and legal guardians.

Standard 115.354 Third-party reporting

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

The City of Richmond Government website provides the public with information regarding third-party reporting of sexual abuse or sexual harassment on behalf of a resident. Staff and resident interviews revealed all were aware of a youth's right to report sexual abuse or sexual harassment to others outside of the facility including their parents/legal guardians.

Standard 115.361 Staff and agency reporting duties

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

All Richmond Juvenile Detention Center staff are mandated reporters and are required by the RJDC PREA Policy Manual page 8 to immediately report any knowledge, suspicion or information they receive regarding sexual abuse and harassment, retaliation against residents or staff who report any incidents, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Interviews with staff supported compliance with this standard.

Standard 115.362 Agency protection duties

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

The RJDC PREA Policy Manual requires staff to take immediate action to protect a resident when he/she is identified as being subject to substantial risk of imminent sexual abuse. There were no residents identified as being at risk for sexual abuse in the past 12 months. Interviews with staff and the Superintendent confirmed compliance with this standard.

Standard 115.363 Reporting to other confinement facilities

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

The RJDC PREA Policy Manual pages 28 & 29 supports compliance with this standard. Policy requires the Superintendent to notify the head of the other facility; city of Richmond Department of Social Services (RDSS)/child Protective Services (CPS) as well as the City of Richmond Police Department and the Department of Juvenile Justice within 72 of receiving an allegation that a resident was sexually abused while confined at another facility. During the past 12 months, there were no allegations received that a resident was abused while confined to another facility nor were there allegations of sexual abuse received by Richmond Juvenile Detention Center from other facilities.

Standard 115.364 Staff first responder duties

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

The RJDC PREA Policy Manual pages 12 – 14 requires staff to take specific steps to respond to a report of sexual abuse including; separating the alleged victim from the abuser; preserving any crime scene within a period of time that still allows for the collection of physical evidence; request the alleged victim not take any action that could destroy physical evidence; and ensure that the alleged abuser does not take any action to destroy physical evidence, if the abuse took place within a time period that still allows for the collection of physical evidence. There were no allegations of sexual abuse during the past 12 months. Staff interviews revealed A clear understanding of the actions to be taken upon learning that a resident was sexually abused.

Standard 115.365 Coordinated response

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

The procedures in the RJDC PREA Policy Manual pages 12 – 14 outline the written plan that coordinates actions to be taken in response to an incident of sexual assault among staff first responders, medical, and facility leadership. The plan was reviewed and is in compliance with this standard. Interviews with the Superintendent and other staff revealed that they are knowledgeable of their duties in response to an allegation of sexual abuse and in keeping with the facility's coordinated response plan.

Standard 115.366 Preservation of ability to protect residents from contact with abusers

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

Richmond Juvenile Detention Center is not a collective bargaining agency, therefore this standard is not applicable.

Standard 115.367 Agency protection against retaliation

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

The RJDC PREA Policy Manual page 28 addresses compliance with this standard. The Assistant Superintendents and the Superintendent ensure the protection of residents and staff who have reported sexual abuse or harassment or who have cooperated in a sexual abuse or sexual harassment investigation. The agency has multiple protection measures to employ in its efforts to protect staff and residents. The monitoring will take place for a period of 90 days or longer, as needed. The Assistant Superintendents and Superintendent have the responsibility of monitoring retaliation. There were no incidents of retaliation in the past 12 months.

Standard 115.368 Post-allegation protective custody

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

In accordance with the TASK Behavior Management Program and the RJDC PREA Policy Manual the facility will only restrict a resident to a room as a last measure to keep a resident who alleges sexual abuse safe and then only until an alternative means for keeping the resident safe can be arranged. No resident has alleged sexual abuse in the past 12 months, protective custody has not been necessary.

Standard 115.371 Criminal and administrative agency investigations

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

The RJDC PREA Policy Manual page 7 requires criminal investigations to be conducted by the City of Richmond Police Department and Virginia State Police. Administrative inquiries will be documented and forwarded to law enforcement if substantiated. Policy further requires staff members to cooperate with all investigations. There have been no sustained allegations of abuse or harassment since August 20, 2012.

Standard 115.372 Evidentiary standard for administrative investigations

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

The RJDC PREA Policy Manual page 7 demonstrates compliance with this standard. The policy states the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations are substantiated in administrative investigations.

Standard 115.373 Reporting to residents

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

The RJDC PREA Policy Manual pages 16 – 17 requires that after an allegation of sexual abuse the resident shall be informed as to whether the allegation was substantiated, unsubstantiated or unfounded. If an outside entity conducts the investigation the agency requests the relevant information from the investigative entity in order to keep the resident informed as to the outcome of the investigation. All such notifications and attempts of notifications shall be documented. In the last twelve months there were no investigations of alleged sexual abuse and not requirement for resident notifications.

Standard 115.376 Disciplinary sanctions for staff

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

The RJDC PREA Policy Manual page 26 outlines the agency’s disciplinary response related to violations of PREA policies by staff. Specifically, disciplinary sanctions for staff may include termination. The policy specifically states that the presumptive disciplinary sanction for staff who engages in sexual abuse will be termination. In the past 12 months, no staff has been terminated or has resigned for violating the facility’s PREA policies.

Standard 115.377 Corrective action for contractors and volunteers

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

The RJDC PREA Policy Manual states that any contractor or volunteer engaging in sexual abuse of residents will be prohibited from contact with residents and will be referred to local law enforcement and relevant licensing bodies. During the past 12 months, no contractor or volunteer has been reported to law enforcement or any agency for allegations of sexual abuse.

Standard 115.378 Disciplinary sanctions for residents

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

The RJDC PREA Policy Manual pages 26 – 27 states that residents may receive disciplinary sanctions following an administrative finding or a criminal investigation that a resident engaged in youth-on-youth sexual abuse and sanctions shall be commensurate with the nature and circumstances of the sexual abuse, the resident’s disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories. There were no administrative or criminal findings of guilt for resident-on-resident sexual abuse in the past 12 months.

Standard 115.381 Medical and mental health screenings; history of sexual abuse

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

The RJDC PREA Policy Manual pages 17 – 18 supports compliance with this standard. Residents who disclose prior sexual victimization or who disclose previously perpetrating sexual abuse during an intake screening will be offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. The facility staff obtains informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18. Staff interviews confirmed compliance with this policy.

Standard 115.382 Access to emergency medical and mental health services

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

The RJDC PREA Policy Manual pages 18 – 19 requires timely and unimpeded access to emergency medical treatment, crisis intervention services and victim advocacy services. The nature and scope of these services are determined by medical and mental health practitioners according to their professional judgement. Resident victim will be afforded a forensic examination at no cost to the victim. Interviews with specialized staff confirmed a clear understanding and expectation of this standard.

Standard 115.383 Ongoing medical and mental health care for sexual abuse victims and abusers

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

The RJDC PREA Policy Manual page 19 addresses ongoing medical and mental health care for sexual abuse victims and abusers. It also provides for the appropriate tests to be provided and that the facility will attempt to obtain a mental health evaluation within 60 days of learning of resident-on-resident abusers and offer treatment deemed appropriate by a mental health practitioner.

Standard 115.386 Sexual abuse incident reviews

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

The RJDC PREA Policy Manual pages 21 - 22 outlines compliance with this standard and provides information regarding the incident review team and its role. The Policy details the make-up of the sexual abuse incident review team and the elements to be considered in their assessments of incidents. Interviews with staff revealed that they understand the purpose of the incident review team and the process.

Standard 115.387 Data collection

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

The RJDC PREA Policy Manual page 22 demonstrates compliance with this standard. Richmond Juvenile Detention Center uses a standardized instrument with definitions to collect accurate, uniform data for every allegation of sexual assault. The instrument includes the data necessary to answer all questions from the most recent version of the Survey of Sexual violence conducted by the Department of Justice. Interviews with the administrative staff revealed that they understand the purpose of adherence to this standard.

Standard 115.388 Data review for corrective action

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

The RJDC PREA Policy Manual page 22 addresses this standard. The PREA Coordinator will review the collected and aggregated data to assess and improve the effectiveness of the PREA related efforts and initiatives; all corrective actions will be approved by the Superintendent. The Policy also states that the annual report will be made available to the public through the agency website. Interviews with the administrative staff revealed that they understand the purpose of adherence to this standard.

Standard 115.389 Data storage, publication, and destruction

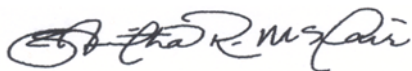
- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The RJDC PREA Policy Manual requires that data is collected and securely retained for 10 years unless applicable laws require otherwise. The aggregated PREA data is reviewed and all personal identifiers are removed. Interviews with the administrative staff revealed that they understand the purpose of adherence to this standard.

AUDITOR CERTIFICATION

I, Johnitha Rothell McNair, 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 resident or staff member, except where the names of administrative personnel are specifically requested in the report template.



August 26, 2015

Auditor Signature

Date