

PREA Facility Audit Report: Final

Name of Facility: High Desert State Prison

Facility Type: Prison / Jail

Date Interim Report Submitted: 07/21/2022

Date Final Report Submitted: 01/13/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Jason M. Bennett	Date of Signature: 01/13/2023

AUDITOR INFORMATION	
Auditor name:	Bennett, Jason
Email:	jason.bennett@doc.wa.gov
Start Date of On-Site Audit:	06/06/2022
End Date of On-Site Audit:	06/09/2022

FACILITY INFORMATION	
Facility name:	High Desert State Prison
Facility physical address:	22010 Cold Creek Road, Indian Springs, Nevada - 89070
Facility mailing address:	P.O. Box 650, Indian Springs, Nevada - 89018

Primary Contact	
Name:	Troy Ternes
Email Address:	tternes@doc.nv.gov
Telephone Number:	(725) 216-6616

Warden/Jail Administrator/Sheriff/Director	
Name:	Calvin Johnson
Email Address:	caljohnson@doc.nv.gov
Telephone Number:	(725) 216-6600

Facility PREA Compliance Manager	
Name:	Troy Ternes
Email Address:	tternes@doc.nv.gov
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Benedicto Gutierrez
Email Address:	bgutierrez@doc.nv.gov
Telephone Number:	(725) 216-6686

Facility Characteristics	
Designed facility capacity:	4072
Current population of facility:	3029
Average daily population for the past 12 months:	3157
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	18+
Facility security levels/inmate custody levels:	Medium and Close
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	663
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	18
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	35

AGENCY INFORMATION	
Name of agency:	Nevada Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	3955 W. Russell Road, Las Vegas, Nevada - 89118
Mailing Address:	
Telephone number:	725-216-6000

Agency Chief Executive Officer Information:	
Name:	Charles Daniels
Email Address:	cdaniels@doc.nv.gov
Telephone Number:	725-216-6010

Agency-Wide PREA Coordinator Information			
Name:	Deborah Striplin	Email Address:	dstriplin@doc.nv.gov

SUMMARY OF AUDIT FINDINGS	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
0	
Number of standards met:	
45	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-06-06
2. End date of the onsite portion of the audit:	2022-06-09

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Just Detention International was contacted via email. Signs of Hope, Las Vegas, Nevada.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	4072
15. Average daily population for the past 12 months:	3157
16. Number of inmate/resident/detainee housing units:	12
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	3261
37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	0
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	23
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	32
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	6
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	3
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	48

<p>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</p>	<p>21</p>
<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>13</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>55</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>103</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>The auditor asked for a report of the population characteristics during the audit; White - 43.3 %, Black 37.4 %, Hispanic 0.1%, Asian 2.3%, American Indian 11%, Pacific Island 1.3%, and unknown, 4.7%.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>663</p>

<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>13</p>
<p>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>18</p>
<p>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>Prior to the audit the facility provide staff roster information to the auditor in order to select staff files and interviews in advance. During the first day of the audit, the facility provided updated rosters for staff interviews.</p>

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>25</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None

55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	<p>For inmate interviews, the auditor reviewed the population prior to the onsite review. Random interviews were selected by assigning a number value to each bunk then using a random number generating application developed by UX apps for the living units. These selections were then adjusted to ensure the racial make up of the facility was represented. The average daily population was 3157 (numbers on first day of audit were 3261). The facility maintains 12 housing units excluding the disciplinary unit. The minimum number of interviews required by page 51 of the Auditor Handbook V 2.0 indicates at least 25 Random Interviews. The auditor then reviewed the targeted interview list also requiring a minimum of 25 interviews. After consideration of the targeted interviews the auditor selected a minimum of 4 individuals per living unit to be interviewed. This number is representative of both random and targeted interviews, noting that targeted interviews also include the random protocols.</p>
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

<p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>For inmate interviews, the auditor reviewed the population prior to the onsite review. Random interviews were selected by assigning a number value to each bunk then using a random number generating application developed by UX apps for the living units. These selections were then adjusted to ensure the racial make up of the facility was represented. The average daily population was 3157 (numbers on first day of audit were 3261). The facility maintains 12 housing units excluding the disciplinary unit. The minimum number of interviews required by page 51 of the Auditor Handbook V 2.0 indicates at least 25 Random Interviews. The auditor then reviewed the targeted interview list also requiring a minimum of 25 interviews. After consideration of the targeted interviews the auditor selected a minimum of 4 individuals per living unit to be interviewed. This number is representative of both random and targeted interviews, noting that targeted interviews also include the random protocols.</p>
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Targeted Inmate/Resident/Detainee Interviews

<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>31</p>
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As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

<p>59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:</p>	<p>0</p>
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<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/detainees.</p> <p><input type="checkbox"/> The inmates/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/detainees).</p>	<p>The facility originally indicated that there were no Youthful Offenders incarcerated at the High Desert State Prison. The auditor was able to exam all facility rosters and walk through each living unit with full access to the population.</p>
<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>6</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>6</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>

64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	13
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	10
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	6
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	4
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The auditor reviewed segregated housing against individuals who were listed as potential victims.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>Based on the absence of youthful inmates, the auditor increased the number of other targeted areas including: physically disabled, transgender/intersex inmates, Gay, Bisexual, Blind, Deaf or hard of hearing and Limited English Proficient.</p>

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>25</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>

<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>The auditor noted no barriers present when interviewing staff, the facility provided rosters for the auditor selection and each staff member selected was provided to the auditor for interview. The auditor was able to interview staff from all job classifications and all three shifts.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>40</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

79. Were you able to interview the PREA Compliance Manager?

Yes

No

NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input checked="" type="checkbox"/> Intake staff <input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Disciplinary Hearings Staff Grievance Coordinators External Victim Advocates
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	3
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	3

<p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input checked="" type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p>
<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>The facility provided private areas for each of the interviews, including staff offices and conference rooms. A total of 60 individual staff (includes volunteers and contractors) were interviewed including 25 random and 40 specialized staff. Additional numbers are indicated in the protocols below noting that 9 specialized staff were asked multiple sets of protocols due to overlapping duties.</p> <p>Random staff were selected to provide sample representation from each shift, job class, work location, and seniority or time in service.</p>

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>During the onsite review the audit team tested the phone system calling both the PREA hotline for notification, and calling the Victim’s Advocates. The audit team left a test message on the PREA hotline that was confirmed by the PREA coordinator as being received. When testing the line for the PREA advocate, it was noted that the phone was answered by a live person. This was corroborated during an interview with the advocate staff noting that after hours and weekends someone always carries the contact phone. As part of the observations the team tested the language line. The audit team was able to observe all video monitors. The audit team visited all units observing posters, camera's, showers and telephones.</p>
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Documentation Sampling

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

<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

During the onsite review the auditor noted that the facility employed 633 staff. The auditor selected 33 staff records for review including background checks and training records. This selection included individuals selected in the interview process. The auditor selected records with a concentration on newer staff and varied time in the agency as well as staff who promoted or changed positions in the last year and staff who reached a five year interval for updated background checks As part of the documentation sampling the auditor reviewed 15 investigations;33 Random Staff files including new hires and promotions these files included hiring and corresponding training documentation; The auditor reviewed comprehensive education for 30 inmates, while on site; The auditor reviewed PREA Risk Assessments for 30 inmates while on site; The auditor reviewed 136 individual reviews for transgender individuals including those for 6 month intervals.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	24	18	22	5
Staff-on-inmate sexual abuse	22	13	20	0
Total	46	31	42	5

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	26	0	26	0
Staff-on-inmate sexual harassment	14	0	14	0
Total	40	0	40	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	3	5	0	0	0
Staff-on-inmate sexual abuse	1	0	0	0	0
Total	4	5	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	2	2	16	1
Staff-on-inmate sexual abuse	2	9	10	0
Total	4	11	26	1

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	9	6	10	1
Staff-on-inmate sexual harassment	3	5	6	0
Total	12	11	16	1

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	11
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	4
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

Staff-on-inmate sexual abuse investigation files

103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	7
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

Sexual Harassment Investigation Files Selected for Review

106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	4
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)

Inmate-on-inmate sexual harassment investigation files

108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	3
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<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>1</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>

<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>Sexual harassment is not a criminal offense in Nevada, as such there is no corresponding criminal investigations related to sexual harassment.</p>
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SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

<p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p> <input type="radio"/> Yes <input checked="" type="radio"/> No </p>
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Non-certified Support Staff

<p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>
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<p>a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:</p>	<p>3</p>
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AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input checked="" type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
Identify your state/territory or county government employer by name:	Washington State Department of Corrections
Was this audit conducted as part of a consortium or circular auditing arrangement?	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

<p>115.11</p>	<p>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</p>
<p>Auditor Overall Determination: Meets Standard</p>	
<p>Auditor Discussion</p>	
<p>115.11 (a): Nevada Department of Corrections (NDOC) Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.01, states, “ the Department has a Zero Tolerance policy for any form of sexual misconduct to include staff/ contractor or volunteer on inmate or inmate on inmate sexual harassment, sexual assault, sexual abusive contact and consensual sex. Any staff member contractor or volunteer who engages in, fails to report, or knowingly condones sexual harassment or sexual contact with or between inmates shall be subject to disciplinary action and may be subject to criminal prosecution. The department shall take a proactive approach regarding prevention, detection, response and punishment of any type of sexual contact.” In addition to the agency policy, High Desert State Prison (HDSP) also maintains identical language their local Operating Procedure 421 Prison Rape elimination Act- PREA (revised 11/22/ 2021)</p> <p>The statements provide a clear connection with provision (a)’s zero tolerance requirement. During the onsite review, interviews with random staff indicated that all staff received training and understood the zero-tolerance requirement in policy. Documentation of training is addressed in § 115.31. Interviews with random and targeted inmates indicated that the zero-tolerance of sexual abuse and sexual harassment was understood and education was provided to the population. Interviews with contractors and volunteers also indicated an understanding of the zero-tolerance requirements of the agency.</p> <p>Nevada Department of Corrections (NDOC) Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421. (pg.1) continues to demonstrates the clear connection to prevention, detection and responding to such conduct in that, “ The department shall take a proactive approach regarding prevention, detection, response and punishment of any type of sexual contact.”. This statement provides application of the requirement for response to PREA related incidents.</p> <p>Through classification and assignment, the department identifies opportunities to separate and carefully monitor both sexually abused and vulnerable inmates and sexual abusers and victims to reduce the incidence of sexual misconduct. The local operating procedure provides information relative to prevention and detection. Strategies include Inmates Screening under section 421.07 (Pg. 8) which notes, “all inmates will be assessed by the reception caseworker within 72 hours of arrival for the risk of being sexually abused by other inmates or sexually abusive towards other inmates”.</p> <p>Through continual education the department increases awareness of safe reporting mechanisms and available services to victims and concerned citizens. Creating</p>	

institutional cultures that discourage sexual abuse and sexual harassment and misconduct. Inmate Education as outlined in section 421.06 (pg. 7) which reads, “ during initial reception all it makes transferring to HDSP will receive information explaining the NDOC zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment by the reception caseworker.”

115.11 (b) Nevada Department of Corrections (NDOC) Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.02, provides the duties and definition of the Agency PREA Coordinator as “it is the responsibility of the prison rape elimination act (PREA) coordinator to develop implement and oversee the department's compliance with all previous standards. The coordinator or designee will collect accurate, uniform data for every allegation of sexual abuse at institutions/facilities.

A review of the agency’s organizational chart (08/31/2018) indicates that the position reports to the Inspector General with direct access to the Director of Corrections. In a memo to the Auditor from Agency Director Daniels asserts that, “On January 1, 2019, Deborah Striplin was designated as the agency-wide Prison Rape Elimination Act (PREA) Coordinator. As the PREA Coordinator, Ms. Striplin, through the Nevada Department of Corrections' (NDOC) Director and Inspector General, has the authority to oversee the agency's efforts to comply with the PREA standards for the agency and in all its facilities.”

The memo further clarified the PREA Coordinators authority by stating, “This will include providing direction to facility Wardens, Associate Wardens, and PREA compliance managers. The PREA Coordinator has the authority necessary to create and implement agency-wide policies, procedures, and practices. This position is assigned to the NDOC's Office of the Inspector General, and PREA Management Division. The position is supervised by the agency's Inspector General, with direct access to the Director and the agency's executive leadership team.”

As part of the onsite review the PREA coordinator was interviewed, she was asked, if she felt she had enough time to manage all of her PREA related responsibilities. She indicated that she was able to accomplish her duties with a little bit of juggling and multitasking.

115.11 (c) High Desert State Prison (OP) 421, Prison Rape Elimination Act-PREA, section 421.02, provides the definition for PREA compliance manager, noting “the warden will designate a prior compliance manager PCM at the institution to coordinate the institution's compliance with the previous standards. The PCM will have direct access to the agency PREA coordinator, the institution’s warden, associate wardens, lieutenants and correctional caseworker specialists III’s.”

This directive further states, “The PCM will have full access to all relevant information related to HDSP's compliance with the PREA standards (e.g., PREA policies and procedures, data collected regarding the incidence and prevalence of sexual abuse and sexual harassment in the facility, sexual abuse and sexual harassment investigative files, relevant portions of training and personnel file, etc.); and the

influence necessary to lead, coordinate, guide, and monitor successful ongoing implementation of policies and procedures that comply with the PREA standards across all departments/divisions within the facility, with support and in accordance with the PREA standards and interpretative guidance issued by the Department Of Justice (DOJ).” The role of PREA Compliance Manager for High Desert State Prison is filled by Correctional Caseworker Specialist III Troy Ternes. According to the PREA Org Chart for High Desert State Prison Dated 07-01-2019 in the duties of PREA Compliance Manager (PCM), the PCM has direct access to the Warden.

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy 421 “Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination” (effective 01/14/2016)
- High Desert State Prison (OP) 421, Prison Rape Elimination Act-PREA (11/22/2021)
- Agency Organizational Chart
- Facility Organization Chart

2. Interviews:

- PREA Coordinator
- PREA Compliance Manager
- Random Staff

Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.11.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 262 558 293">Auditor Discussion</p> <p data-bbox="256 338 1469 663">115.12 (a-b) Nevada Department of Corrections reports that it presently has no contracts with other entities for the confinement of inmates. Agency PREA Coordinator Deborah Striplin provided written statement dated January 28th, 2021 noting, “the Nevada Department of Corrections (NDOC) had entered into a contract with CoreCivic, Inc. to house NDOC inmates at the Saguaro Correctional Center, Lloyd, Arizona. In November 2020 all in DOC inmates housed at SCC were returned to NDOC. The contract has expired and will not be renewed.” The PREA Coordinator asserts that 115.12 is not applicable.</p> <p data-bbox="256 703 1477 902">As part of the documents review, the auditor reviewed the RFP with CORE CIVIC and noted the requirement for compliance with the PREA Standards, specifically section 2.55.1 stating that, “The awarded vendor shall adopt and comply to the federal Prison Rape Elimination Act (PREA) standards and in accordance with NDOC AR 573 - PREA Screening and Classification.”</p> <p data-bbox="256 943 1458 1476">In keeping with sound correctional practice and as required by the Prison Rape Elimination Act (PREA), §115.11, CoreCivic takes a "zero tolerance" approach to offender sexual abuse and sexual harassment. Since the creation of the first set of proposed national standards to eliminate prison sexual assaults, CoreCivic has taken a leadership position on this important public policy issue. Prior to the issuance of standards by the Department of Justice (DOJ), we proactively adopted - and in many cases exceeded- many of the national PREA standards and best practices. CoreCivic has developed and implemented comprehensive policies and procedures to address the PREA standards and eliminate the sexual abuse of offenders in our custody through our Sexual Abuse Response and Prevention Program. CoreCivic has a Senior Director, PREA, who is responsible for the development, implementation, and oversight essential to demonstrate compliance with the National PREA Standards. This Senior Director also oversees a PREA Compliance Manager at each facility.”</p> <p data-bbox="256 1516 1461 1966">115.12 (b) Prior to the onsite review the auditor interviewed the Agency PREA Coordinator, when asked “How do you monitor new and renewed contracts for confinement purposes to determine if the contractor complies with required PREA practices?” The PREA coordinator noted that there are no current contracts, however she indicated that contacts contain language regarding the ability for the agency to monitor compliance with the PREA standards. The auditor reviewed past contracts with CORECivic and language within the contract. Section 2.56 provides, “ The awarded vendor shall be subject to contract monitoring to ensure compliance with federal PREA standards in accordance with PREA Section 115.12 (b)....CoreCivic acknowledges the information in this Section and will cooperate fully with NDOC contract monitors”.</p>

Section 2.56.2 further reads, “2.56.2 NDOC shall perform quarterly on-site audits to ensure the awarded vendor's compliance with all contracted services.....2.56.2.1 Any NDOC travel outside of the quarterly audits required as a result of the awarded vendor's non-compliance will be at the awarded vendor's expense.”

While the contract is no longer in effect, the auditor noted that the state of Nevada did house inmates with a private contractor since their last audit, as a copy of the CORECIVIC audit report (Final 05/06/2021) was reviewed and the link is provided below:

[https://www.corecivic.com/hubfs/_files/PREA/Facilities/2021%20Sagua
ro%20PREA%20Audit%20%20Final%20Report%2004%202021%20\(2\).pdf](https://www.corecivic.com/hubfs/_files/PREA/Facilities/2021%20Sagua%20PREA%20Audit%20%20Final%20Report%2004%202021%20(2).pdf)

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy 421 “Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination” (effective 01/14/2016)
- RFP with CORE CIVIC

2. Interviews:

- Agency PREA Coordinator

Based on the auditor’s observation, review of documentation, and interviews, High Desert State Prison is in full compliance with all elements of standard 115.12.

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.13 (a) NDOC AR 326 “Postings of Shifts/Overtime,” section 326.04 (pg. 4) states, “At least once every year the institutions and facilities in collaboration with the PREA Coordinator, review the staffing plan to see whether adjustments are needed in the following areas: A. The Staffing plan; B. The deployment of monitoring technology, C. The allocation of Agency/Institution or Facility resources to commit to the staffing plan to ensure PREA Compliance.</p> <p>The auditor noted that the 2020 was completed August 10, 2021. The signed report provides the elements of the provision directly from the standard including: Generally accepted detention and correctional practices; any judicial findings of inadequacy; any findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated); the composition of the inmate population; the number and placement of supervisory staff; Institution programs occurring on a particular shift; any applicable State or local laws, regulations, or standards; the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and any other relevant factors.”</p> <p>Each of these sections are addressed with a summary statement about the assessment area. For example “Generally accepted detention and correctional practices: HDSP operates on a style of inmate unit management that incorporates all supervisory staff members of the facility/institution, including the Associate Wardens to have daily interaction with the inmate population. Each unit has a casework staff member assigned who work with assigned custody staff members and the inmates within the unit to make sure the inmates are getting their basic needs met. This includes housing needs, casework staff, programming and education. Each Associate Warden is the immediate Supervisor for their respective areas of control. HDSP Warden meets with his Associate Wardens to discuss daily operations, needs and when applicable individual staff or inmates. As documented in HDSP OP 421, supervisory staff of the institution make and document their unannounced supervisory tours of the institution, wings, units and offices.”</p> <p>The plan notes that the facility has resources available to ensure adherence to the staffing plan, noting, “High Desert State Prison (HDSP) houses medium qualified inmates, in most circumstances, in 12 housing units. The approximate inmate bed capacity of approximately 3800, contained within 12 housing units. There are two styles of units, 1 through 8 are of an older bow tie type of unit and units 9 through 12 consists of newer constructed units. Units 1 through 8 have two separate wings assigned to each unit A through D, while units 9 through 12 have 6 associated internal wings A through F.” additionally, the facility indicates that, “HDSP has four hundred ninety two (492) sworn custody staff members that include four hundred fifteen (415) Correctional Officers, forty six (46) Senior Correctional officers.</p>

Supervisory custody staff members consisting of thirteen (13) Lieutenants and eighteen (18) Sergeants. There are currently 34 Correctional Officers, 1 Senior Correctional officer, 2 Sergeant vacancies. An important factor is that the institution does not fall below the established minimum staffing level as directed by NDOC because overtime is hired to prevent that from occurring. Additionally, there are also pull down and shut down positions. HDSP has some video monitoring capability which doe assist staff in the supervision of the inmate population.

115.13 (b) The facility indicated that there were no deviations to the staffing plan during the audit period. They provided documentation with copies of exception reports showing movement and noted that if there were deviations they would be included in similar reports.

Interviews with the warden, the PREA coordinator and the facility PREA compliance manager indicated the facility took steps to minimize deviations to the staffing plan. During the interview with the Superintendent he stated, that they had no deviations and he uses overtime to cover all post. He further described the ability to close areas as needed to maintain staffing. The warden noted that if there were occasion to deviate from the staffing plan that he would be notified. AR 326 outlines processes for normal operations and staffing including the ability to close specific post and authorize overtime.

115.13 (c) AR326 ““Postings of Shifts/Overtime,” section 326.04 (pg. 4) Requires that, “At least once every year the institutions and facilities in collaboration with the PREA Coordinator, review the staffing plan to see whether adjustments are needed...” The Staffing Review will be submitted to the Deputy Director of Operations who will provide a copy to the PREA Coordinator for review. This Staffing Review will be submitted for all Institutions and Facilities. The auditor was provided copies of the staffing plan review for 2020 (completed August 2021) and 2019 (completed September 2020). The plan is approved by the Agency Director, and annotates, signatures from the Warden, PREA Compliance Manager, and PREA Coordinator.

115.13 (d) NDOC Policy AR 400 “General Security/Supervision Guidelines,” provides the policy directive for management rounds and inspection tours, including but note limited to , “PREA mandated unannounced rounds as designated by the PREA Manager (Warden). High Desert operationalizes the policy in OP 400 effective 10/25/2018 page 3, which states, “the designated shift commander for each shift will ensure that the lieutenants and sergeants are touring different units.” This directive further requires that, “all administrative officers will tour at least one inmate housing unit and or inmate services building and will sign the supervisors log books.” This policy also states that they, “will conduct and document unannounced rounds to identify and deter inmate and staff sexual abuse and sexual harassment. Tour shall be annotated in NOTIS for general PREA entry.

As part of the review for this provision and the determination of intermediate supervisor, the auditor reviewed the facility organizational chart noting that security ranks included correctional officer, senior correctional officer, sergeant, and lieutenant. Based on the rank structure and organizational charts the auditor

determined that lieutenant and above would be required for this provision. The auditor found regular visits by staff members of the rank of lieutenant and above. These visits varied by personnel, area and shift, in addition to intermediate level supervisors the logs indicated regular visits by sergeants as well.

Unannounced rounds are documented in the logs and via NOTIS, documentation is completed for each of the housing and program areas. The agency provided documentation of these rounds in the initial proof documents. While onsite the auditor reviewed documentation in the housing units. The documents evidenced routine visits by intermediate supervisors, with supervisory signatures noted. Informal interviews were conducted with both staff and the population during the site visits; staff indicated that they routinely saw upper level supervisors and managers visiting their areas.

Interviews conducted with 7 intermediate and higher-level facility staff of the ranks between Assistant Warden and lieutenant. Each supported that unannounced rounds are conducted in all areas of the facility in compliance with agency policy and the provision of the standard. Interviewed supervisors indicated that they alternated rounds based on facility needs, providing for random visits to areas of the facility during all shifts at varied hours. Supervisors indicated that they had also provided direction to control rooms not to provide advance notice to areas that they were conducting rounds. Supervisors noted that evidence of compliance with this directive through their general observations of unit staff. During the interviews the supervisors stated they document these rounds using both the unit logs and, on a computer, tracking sheet.

The following documentary evidence was analyzed in making the compliance determination:

- Agency Policy AR421 "Prison Rape Elimination Act-PREA " (effective 01/14/2016)
- Agency Policy AR 326 "Posting of Shifts/Overtime" (effective 09/16/2014)
- Agency Policy AR 301 "Shift, Post, and Leave Bidding" (effective 12/28/2018)
- Agency Policy AR 400 General Security/Supervision Guidelines (effective 03/19/2013)
- Operating Procedure OP 400 "General Security Supervision" (effective 10/25/2018)
- Staffing Plan 2020 Signed 08/10/2021
- Staffing Plan 2019 Signed 09/23/2020

The following interviews were conducted and considered in making the compliance determination:

- Prison Superintendent
- PREA Coordinator
- PREA Compliance Manager
- Agency Director/Designee

- Intermediate or Higher-Level Facility Staff

The following site review observations were considered in making the compliance determination:

- Informal interviews during site review
- Staffing in accordance with rosters

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.13.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.14 (a-c) High Desert State Prison does not house youthful offenders. High Desert State Prison does not house any inmates under the age of 18 years old. According to a memo provided by the Facility PREA Compliance Manager, “High Desert State Prison does not house youthful inmates. Youthful inmates sentenced in the southern part of the state are taken by special transportation to Lovelock correctional center LCC by the Nevada Department of Corrections transportation division. All inmates sentenced to prison from the southern part of Nevada that are under 18 are transferred directly to Lovelock State Prison.”</p> <p>Interviews with the facility Superintendent, agency PREA coordinator and facility PREA compliance manager also indicated compliance with the state law and standard. During the onsite review the auditor reviewed facility rosters and noted no indicators of individuals under the age of 18 being housed at the High Desert State Prison. According the Rosters on 06/09/2022 the youngest inmates at High Desert State Prison were 18 and their was 12 on that date.</p> <p>The following documentary evidence was analyzed in making the compliance determination:</p> <ul style="list-style-type: none"> • Population Rosters <p>The following interviews were conducted and considered in making the compliance determination:</p> <ul style="list-style-type: none"> • Prison Superintendent • PREA coordinator • PREA compliance manager <p>The following site review observations were considered in making the compliance determination:</p> <ul style="list-style-type: none"> • Informal interviews and observations during site review. <p>Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.14.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.15 (a) HDSP Operational Procedure 422 “Search and Seizure Standards,” Section 422.02 (Pg 3) states, “Correctional personnel will not conduct unclothed body searches of an inmate of the opposite sex except in an emergency, i.e., riot, escape, etc. If such an emergency exists, the search must be documented in NOTIS..” The facility reported in the OAS that there were no instances of cross gender strip searches or cross-gender visual body cavity searches (defined by the agency as unclothed searches). During the selection of staff for interview protocols -Non-Medical staff involved in Cross Gender Strip or visual searches, the PREA compliance manager reiterated that there had been no instances of staff involved in this type of search. The question from this protocol was added to 10 random interviews by the auditor, when asked, “What urgent circumstances would require cross--gender strip searches and visual body cavity searches?” Random Staff (with the added protocol) demonstrated a knowledge of the policy in that, only in the most serious emergencies, would cross gender searches occur, even then they noted that there were no circumstances they could think of where it would occur as there was always sufficient staff available.</p> <p>115.15 (b) The facility asserts that High Desert State Prison does not house female inmates, this was confirmed by the auditor through a review of the inmate rosters and observations through the on-site review.</p> <p>115.15 (c) HDSP Operational Procedure 422 “Search and Seizure Standards,” (Pg 1) states, “Correctional personnel will not conduct unclothed body searches of an inmate of the opposite sex except in an emergency, i.e., riot, escape, etc. If such an emergency exists, the search must be documented in NOTIS..” The requirements of the operational procedure reiterate the requirements found in the provision of 115.15 (c). As noted in provision (b) of this standard High Desert State Prison houses male inmates.</p> <p>115.15 (d) HDSP Operational Procedure 400 “General Security Provision,” Section 422.02 (Pg 3) states, “in accordance with PREA standard 115.15 (d) 1:Staff of the opposite gender shall announced thier presence when entering/reentering an inmate housing unit. Custody staff shall also announced the presence of opposite gender and document the announcement in NOTIS under shift log with a PREA subtitle. High Desert State Prison Staff shall ensure inmates are able to shower perform bodily functions and change clothing without non medical staff of the opposite gender viewing (including video cameras) their breasts buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental such as room checks.” During the site review, the audit team observed the regular announcement of the presence of female staff that accompanied the group. The audit team also conducted informal interviews with the population asking if female staff routinely announce their presence on the unit, with little exception the population stated that female staff did</p>

announce or someone announced them. During formal interviews with random staff, 100% staff members stated that female staff did make the required announcement. 54 inmates were asked the random interview protocols. During formal interviews with inmates, when asked if the female staff announced their presence, the adults in custody routinely noted that the announcements did occur, , three individuals indicated most of the time or 90% of the time, and on individual indicated that they thoughts so. As part of the onsite review the auditor walked through each living unit observing, toilet areas, inmate cells, cameras, monitoring locations, windows, and mirrors. The auditor noted that there were limited cameras in the unites and they were focused away from sleeping areas. The housing units are designed with wet cells so all toilets are located within the cells themselves. All twelve housing units were identical, Showers were end of the tier. Shower entrance is in line of sight of the officers duty station. The shower areas have curtains to provide some discretion, but some visibility for safety of the population.

115.15 (e) HDSP Operational Procedure 422 “Search and Seizure Standards,” (Pg 1), “Searches of trans gender or intersex inmates will be conducted in a professional and respectful manner and will not be used to determine gender status. If the inmate's gender status is unknown, it may be determined 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.” Interviews with random staff indicated an understanding of this policy requirement and compliance with the policy. There were no documented searches of transgender or intersex offenders for this purpose. The facility reported that they had 9 transgender and intersex adults in custody. During interviews with the adults in custody who identified as transgender or intersex, indicated that they had not been searched for this purpose or were not aware that they were searched for this purpose.”

115.15 (f) The facility asserts that all staff have received training how to conduct cross-gender pat-down searches. In a memo to the auditor Agency PREA Coordinator noted that, “All custody staff receive training on the agencies Universal Pat Search procedure. This style of pat search is conducted in the same fashion for all inmates by utilizing back of the hand/blade of the hand around the breast/chest area.” The auditor was provided and reviewed the training for searches noting, “The training power point, handouts and training acknowledgment form demonstrates, to staff, how to properly conduct a pat down search of transgender and intersex inmates.

The training provides the step by step instruction on how to conduct a universal pat search on all inmates including those who are transgender and intersex. With specific instruction around the chest and groin areas instructing staff to, “Run your hand between and then under the breast area using the ridge side of your hand (back of the hand toward the breast) against the inmate. Every reasonable attempt will be made so the nipple isn’t touched. If the inmate is wearing a bra the inmate will reach up under the bottom elastic of the bra pull the elastic away from the skin and shake the bra with enough force to dislodge any contraband. Then reach to the center line of the inmate just below the chin, again using the ridge hand portion of the hand, feel across the upper breast area back to the arm pit.” The agency provided current

training curriculum, "Searches of Offenders," the training covered standard search techniques for Universal Searches noting applicability for All inmates regardless of gender or sexual identity shall be searched in the same manner. The training also noted that, "Staff will conduct clothed and unclothed searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs."

24 Random staff were asked, "Have you received training on how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs?" 11 of 12 custody staff who were interviewed confirmed they had received this training. The facility noted this training is provided during new employee orientation and 100% of staff received this training was also placed into New Employee Training. A copy of the training was included as supporting documentation. As part of the review, the auditor request and training records for custody staff to indicated that the staff at HDSP have been trained in these search techniques. At the time of the interim report this training request had not been received, as such the auditor could not confirm full compliance with 115.15

Recommendation:

Following Best Practices the agency should incorporate policy and procedure that includes and operationalizing the responses from the PREA Resource Center in regards to strip searches of transgender inmates as noted the frequently asked questions posted from December 2nd 2016: "Operationally, four options are in current practice for searches of transgender or intersex inmates/residents/detainees: 1) searches conducted only by medical staff; 2) pat searches of adult inmates conducted by female staff only, especially given there is no prohibition on the pat searches female staff can perform (except in juvenile facilities); 3) asking inmates/residents/detainees to identify the gender of staff with whom they would feel most comfortable conducting the search, and 4) searches conducted in accordance with the inmate's gender identity." In instances where the facility is unable to search an individual by their gender identity, the facility should document the search in accordance with 115.15 (c).

The facility indicated that 100 percent of staff were compliant with the training requirements, however by the completion of the interim audit report they were unable to produce the training records to evidence completion.

On August 29, 2022 the facility uploaded documentation demonstrating completion of the required training by staff.

<p>115.16</p>	<p>Inmates with disabilities and inmates who are limited English proficient</p>
<p>Auditor Overall Determination: Meets Standard</p>	
<p>Auditor Discussion</p>	
<p>115.16 (a) Nevada Department of Corrections (NDOC) Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.07 (page 4) provides the direction that, “All inmates will be afforded education in formats accessible to everyone, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills..” The provided policy language speaks directly towards the ability to provide services including agency PREA initiatives to prevent, detect and respond to sexual abuse and sexual harassment. During the onsite review seven individuals were interviewed with the protocols for inmates with disabilities and inmates who are limited English proficient. When asked, “Does the facility provide information about sexual abuse and sexual harassment that you are able to understand?” Five cognitively disabled and limited English proficient adults in custody stated yes, two individual stated no. The agency noted that the video is provided with audio for those with who are blind or have low vision. The facility also provides a transcript for those who are hearing impaired.</p> <p>(NDOC) Administrative Regulation (AR) 658, “Reasonable Accommodation for Inmates with Disabilities, section 658.05 (page 5)” The Department will make reasonable efforts to identify inmates during the intake process who may have a disability, to include but not limited to medical, mental health, sight, mobility, deaf or hearing impaired. Additional assessments may be done by healthcare staff who notice any perceived disability, receive a request by the inmate for review, and/or receive a referral from a NDOC staff person for an evaluation by healthcare staff. The determination of ADA requires medical to determine the disability and reasonable accommodations to be done by a team of medical, the ADA coordinator and classification (caseworker).” The policy speaks directly to ensuring it’s programs, services and activities are provided to the population without discrimination. As part of the onsite review the Agency Director was interviewed, when asked, “Has the agency established procedures to provide inmates with disabilities and inmates who are limited English proficient 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?” He affirmed that educational information including posters are provided in Spanish; and the agency makes interpreters and language lines available.</p> <p>Section 658.07 Access to Auxiliary Visual, Hearing aids and services, provides additional clarification of services noting “For those inmates identified with a visual impairment or hearing impairment, the ADA Coordinator, with the assistance of the medical staff, will ensure that visually-impaired and hearing-impaired inmates are provided access to auxiliary aids and services when required for effective communication in accessing and participating in department programs, services</p>	

and activities.” Subsection H. specifically notes, “PREA reporting and/or follow-up with any PREA concerns.”

115.16 (b) NDOC provides several options to support individuals with the ability have meaningful access to NDOC’s efforts to prevent, detect and respond to sexual abuse and sexual harassment. The agency maintains a contract for services with “Corporate Translation Services DBA Language Link.” The contract was provided to the auditor, noting that the contract was currently in effect through 09/30/2023. Access to the language line was restricted to Caseworkers, Shift Supervisors, and above.

In addition to the contracted language line the facility will use staff as interpreters as needed. During the onsite review the audit team successfully tested the language line. Interviews with inmates with disabilities or who have limited English proficiency were interviewed as part of the process. When asked, “Does the facility provide information about sexual abuse and sexual harassment that you are able to understand?” Five individuals responded yes and two individual responded no.

115.16 (c) HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, section 421.06 (page 7) states that, “NDOC prohibits the use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under§ 115.64, or the investigation of the inmate's allegations. In limited circumstances, any use of inmate interpreters, inmate readers, or other types of inmate assistants must be justified and documented in NOTIS.”

This language meets the requirements of the provision, in limiting the use of inmate interpreters to circumstances that could compromise the inmate’s safety. The facility reported that it has no incidents in which inmates were used to interpret for each other in these circumstances. The audit team interviewed 24 random staff during the onsite review, when asked, “Does the agency ever allow the use of inmate interpreters, inmate readers, or other types of inmate assistants to assist inmates with disabilities or inmates who are limited English proficient when making an allegation of sexual abuse or sexual harassment?” staff generally understood the policy requirement that limited the use of inmate interpreters. Of those interviewed four staff said they would use an inmate for interpretation, if necessary, they noted they have never done so or it would be a last resort.

Noting the prohibition is already noted in the policy and guidance is provided in the annual training, It is recommended that the facility should provide a reminder to staff about the limitation of inmate interpreters in regards to PREA.

The following documentary evidence was analyzed in making the compliance determination:

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)

- Agency Policy (AR) 658, “Reasonable Accommodation for Inmates with Disabilities” (Effective 05/15/2018)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)

The following interviews were conducted and considered in making the compliance determination:

- Prison Warden
- Agency Head/Designee
- Random Staff
- Inmates who are Limited English Proficient

The following site review observations were considered in making the compliance determination:

- Informal interviews during site review
- Staffing in accordance with rosters

Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.16.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.17(a) Agency Administrative Regulation 300 “Recruitment and Hiring” (effective 08/30/2017) Section 12, Page 4 states, “Each candidate interviewed must complete the Consent for Release of Criminal History form, and pre-interview documents (Essential Job Functions, Work Performance Standards, Variable Work Schedule, and PREA disclosure form) prior to the interview.” Sub section (A) continues, “The agency shall not hire anyone who may have contact with inmates who: Have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; Have been convicted of engaging in or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats a force, or coercion, or if the victim did not consent or was unable to consent or refuse; or Have been civilly or administratively adjudicated to have engaged in the activity described in paragraph (2) of this section. Applicants are required to complete a form DOC 1957 which ask questions specific to the above behavior and requires an affirmative response. The form indicates that, “Providing false or misleading statements, including material omissions regarding such misconduct shall be grounds for termination of the conditional offer of employment or promotion will be rescinded.” NDOC “Prison Rape Elimination Act Manual,” (pg. 6) further clarifies the applicability of this policy to contractors and volunteers in that, “All departmental divisions shall implement policies and procedures to insure the Department does not hire or promote anyone, or utilize the services of any contractor or volunteer, who: Has engaged in sexual abuse in a prison.....” The auditor requested and reviewed files for 33 staff members, demonstrating compliance with this policy.</p> <p>115.17 (b) NDOC “Prison Rape Elimination Act Manual,” (pg. 6) states that, “All departmental divisions shall consider any incidents of sexual harassment in determining whether to hire or promote anyone or enlist the services of any contractor, who may have contact with inmates..” During the interview with Human Resources Staff, when asked, “Does the facility consider prior incidents of sexual harassment when determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates?” The human resources staff affirmed that the agency/facility did consider these types of incidents, noting that they were not an automatic disqualification, but they are considered.</p> <p>115.17 (c) NDOC “Prison Rape Elimination Act Manual,” (pg. 6) requires that, “Before hiring any new staff member or utilizing the services of a contractor or volunteer, a criminal background records check shall be performed..” This requirement is further clarified in AR 300 “Recruitment and Hiring,” (Pg.6) which states, “All applicants considered for appointment must pass the mandated PREA related background check, as defined in PREA § 115.17, including but not limited to, an NCIC background check. Background checks are conducted by staff of the Office of the Inspector General.” The policy includes internal promotions noting, “ All applicants considered for promotion must pass the NCIC background check as a condition of employment”. The facility</p>

reported that 73 new staff were hired during the previous 12 months. The auditor completed a random sample of 33 staff that included new hires and promotions, the auditor reviewed available documentation including logs and background screenings to indicate the required reviews.

115.17 (d) NDOC “Prison Rape Elimination Act Manual,” (pg. 6) states that, ““All departmental divisions shall implement policies and procedures to insure the Department does not hire or promote anyone, or utilize the services of any contractor or volunteer, who: Has engaged in sexual abuse in a prison.....”.” The facility indicated that they had 18 contractors within the previous 12 months. The auditor did not receive documentation of background checks for volunteers prior to the completion of the interim report.

115.17 (e) NDOC “Prison Rape Elimination Act Manual,” (pg. 7) states that, “HR and IG shall perform a criminal background records check of all current employees every three years, beginning the first year of each PREA audit cycle.” The policy exceeds the standard requirement which requires background checks every 5 years. This policy also covers contractors noting, “All applicable agency divisions shall perform a criminal background records check of all current contractors every year, unless the contractor is a State of Nevada employee. State of Nevada employees who contract with the Department will have a criminal background records check every three years.” This policy also addresses volunteers noting, “Inmate Program staff shall perform a criminal background records check of all current volunteers every two years.

During the onsite review the auditor was provided documentation of criminal background checks for all staff, noting background checks were completed in 2020 for this cycle. During the interview with human resource staff they were asked, “What system does the facility presently have in place to conduct criminal record background checks of current employees and contractors who may have contact with inmates?” The human resources staff were also asked, “Are these background checks conducted at least once every five years?” The human resources staff noted that they were. The PREA compliance manager was able to provide documentation with dates for all staff within the previous 5 years.

115.17 (f) NDOC “Prison Rape Elimination Act Manual,” (pg. 7) Provides direction that, “ The agency shall ask all applicants and employees who may have contact with inmates directly about previous misconduct, specifically stating, “HR shall ask, verbally or in writing, all applicants, for hire or promotion, about previous misconduct involving sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution” Section 10. Provides that ,”All staff has an affirmative and immediate duty to disclose any sexual abuse conduct.” During the onsite review the auditor requested and received documentation on new and long term employees demonstrating compliance with the policy directive. During the interview with the human resources staff she was asked, “Does the facility ask all applicants and employees who may have contact with inmates about previous misconduct described in section (a)* in written applications for hiring or promotions, and in any interviews or written self-evaluations conducted as part of reviews of

current employees?" She confirmed that applicants including promotions are asked about previous misconduct, noting they complete a form DOC 1957

The document specifically asks, "Have you engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, or have you been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse, or have you been civilly or administratively adjudicated to have engaged in the activity described in any part of this question?." It also asks, "Have you been adjudicated as having engaged in any type of inmate Sexual Harassment, which includes as a staff member, volunteer, contractor, or as any type of service provider coming in contact with an inmate in the facilities mentioned in question 1?"

115.17 (g) NDOC "Prison Rape Elimination Act Manual," (pg. 7), identifies prohibited behavior found in the code of conduct, noting in, "Violation of Directives: Employees shall not knowingly commit or omit acts which constitute a violation of any of the policies, rules, procedures, regulations, directives, or orders of the department." Section A states, "Failure by employees to follow this policy may result in appropriate disciplinary action, up to and including dismissal." The existing requirements of the policy and consequences provide the necessary elements of provision (g) of this standard. During the onsite review the human resources staff was asked, "Does the facility impose upon employees a continuing affirmative duty to disclose any such previous misconduct?" Human resource staff confirmed that staff have a continuing duty to disclose pertinent misconduct.

115.17 (h) NDOC "Prison Rape Elimination Act Manual," (pg. 7)), "HR and IG shall comply with and provide information to all requests from any institutional employers seeking information on their applicants who are former or current employees of the Department on substantiated allegations of sexual abuse or any resignations during a pending investigation of an allegation of sexual abuse." During the interview with human resources staff, they were asked, "When a former employee applies for work at another institution, upon request from that institution, does the facility provide information on substantiated allegations of sexual abuse or sexual harassment involving the former employee, unless prohibited by law?" The human resources staff indicated that they would provide the requested information. The agency staff asserted that there had been no inquiries received during the documentation period, but they would provide the requested information.

The following documentary evidence was analyzed in making the compliance determination:

- Agency Policy (AR) 421 "Prison Rape Elimination Act-PREA " (effective 01/14/2016)
- Agency Policy (AR) 300 "Recruitment and Hiring" (effective 08/30/2017)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- Employee Files

The following interviews were conducted and considered in making the compliance determination:

- Human Resources

Prior to the completion of the interim audit report the facility was unable to produce the records of background checks for volunteers to evidence compliance.

On August 26, 2022 the facility uploaded documentation of background checks and training by facility volunteers.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.18 (a) NDOC “Prison Rape Elimination Act Manual,” (pg. 6), States, “When the Department is designing or acquiring any new facility or planning any substantial expansion or modification to existing institutions or facilities, the Director, Deputy Director(s) and designees shall consider the effect of the design, acquisition, expansion, or modification on the Department's ability to protect inmates from sexual abuse.” The Agency PREA coordinator noted that NDOC had not acquired any new facilities or substantially modified or expanded any existing facilities since the previous PREA audit conducted at High Desert State Prison in 2019. During the onsite review both the Agency Head (Designee) and the Warden were asked, “How has the facility considered the effect of the expansion or modification upon the facility’s ability to protect inmates from sexual abuse?” The warden indicated that there had been no expansions, but any modification would consider the impact on the ability to keep the population safe.</p> <p>115.18 (b) NDOC “Prison Rape Elimination Act Manual,” (pg. 6) requires that, “When installing or updating any video monitoring system, electronic surveillance system, or other types of monitoring technology, designated staff members of the Department shall consider the technology and how it may enhance the agency's ability to protect inmates from sexual abuse. It was noted during the onsite review that there had been not updates to the existing camera system.</p> <p>The interview with the warden and agency head designee indicated that there had been no recent updates in technology to the High Desert State Prison, it was indicated that based on funding the agency would consider “how such technology may enhance the agency’s ability to protect inmates from sexual abuse,” in accordance with the standard. When asked, “When installing or updating monitoring technology, such as a video monitoring system or electronic surveillance, how has the facility considered using such technology to enhance inmates’ protection from sexual abuse?” The warden provided that the safety of the population would definitely be considered.</p> <p>The following documentary evidence was analyzed in making the compliance determination:</p> <ul style="list-style-type: none"> • NDOC Prison Rape Elimination Act Manual (effective 04/04/2016) <p>The following interviews were conducted and considered in making the compliance determination:</p> <ul style="list-style-type: none"> • Agency Director (designee) • Prison Superintendent • PREA Coordinator

The following site review observations were considered in making the compliance determination:

- Site review visual observations

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.18

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.21 (a-b) (NDOC) Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421 (pg. 5) states, “NDOC Office of the Inspector General will investigate all allegations of staff on inmate sexual abuse, sexual harassment and inmate on inmate sexual abuse. A. Investigators assigned to investigate allegations of sexual abuse or sexual assault shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.” Subsection B. continues, “The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.” The agency noted that they were using this document revised in August of 2013. Specific steps for preservation of evidence for custody staff is provided in the Agency PREA Manual. During the interviews with random staff, staff indicated they understood their responsibilities regarding preservation of a crime scene and evidence.</p> <p>115.21 (c) (HDSP) Operational Procedure (OP) 670, “Medical Standards for PREA”, (pg. 3) provides that, “All inmate victims of sexual abuse will receive timely unimpeded access to emergency medical/mental health treatment which will be determined by the health practitioners' professional judgment. Victims will be offered immediate medical attention for any injuries that require treatment. If SANE exam is requested, treatment can be deferred if it appears it will affect evidence, and the injuries are not life threatening. Medical staff may assist in the collection of evidence, except for obtaining specimens.” The policy further requires that “Victims of sexual abuse while incarcerated shall be offered timely information and timely access to emergency sexually transmitted infections, prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.” The agency reported that Forensic Medical Exams are conducted at the University Medical Center in Las Vegas. The Agency noted that there were no forensic exams during the previous 12 months. The facility noted that, “All services provided for the above related treatments shall be free of charge regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident</p> <p>Documentation from the facility notes onsite medical staff do not conduct medical examinations, inmates are sent to University Medical Center in Las Vegas for forensic examinations if needed. The auditor spoke with staff at the University Medical Center who verified that they have a SAFE/SANE nurse available to conduct forensic examinations and would provide services to High Desert State Prison.</p> <p>115.21 (d-e) The NDOC/High Desert State Prison has a working relationship with</p>

Signs of Hope for support as a community victims advocate, the agency PREA coordinator indicated that as part of the agency and facility coordinator response protocol, the incident command supervisor will contact sexual assault support services or the Las Vegas Rape Crisis center to ask for a victim advocate respond to the exam site if available. At present the facility does not have an active memo of understanding with signs of hope, at the time of the interim report they had supplied documentation showing attempts to enter into an agreement. In the absence of an agreement, Signs of hope is a community based organization that provides assistance to all victims of sexual abuse including individuals incarcerated at High Desert State Prison. They indicated that they provide hospital accompaniment program, noting, "we assure that no victim goes through the aftermath of sexual assault alone. Advocates are there to provide support and basic information to address the questions victims most commonly have. All of our advocacy services, are available around the clock, FREE of charge, and to all victims of sexual assault, as well as members of their support system who may also have questions and concerns." When speaking with the auditor the representative from Signs of Hope stated that they would provide these services to inmates from High Desert State Prison.

The auditor spoke with a representative from Signs of Hope who verified the extent of the services provided including emotional support services and advocacy for victims of sexual abuse. Interviews with random inmates and inmates who reported sexual abuse were inconclusive as few individuals noted they were familiar with the information. During the onsite review the auditor observed posters with the advocacy contact information provided including telephone contact information. The agency provides a pamphlet in English and Spanish during orientation.

The following evidence was analyzed in making the compliance determination

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 "Prison Rape Elimination Act-PREA " (effective 01/14/2016)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- HDSP Operational Procedure 670, Medical Standards for PREA, (effective 2/11/2019)
- Medical Directive #117 signed 11/30/2020
- Emails and Draft MOU with Signs of Hope
- Pamphlet "How to reach and Advocate

2. Interviews:

- Random Staff
- SAFE/SANE Nurses

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.21

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 262 560 293">Auditor Discussion</p> <p data-bbox="256 338 1476 745">115.22 (a) The agency ensures that investigations are completed for all allegations of sexual abuse and sexual harassment. The requirements our outlined in (HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.12 (pg. 11-12) which states, “NDOC Office of the Inspector General will investigate all allegations of staff on inmate sexual abuse, sexual harassment and inmate on inmate sexual abuse,” The Agency PREA Manual outlines that The institution will investigate the report of inmate on inmate sexual harassment and make a determination if the matter should result in disciplinary action against the suspect inmate. The inspector generals office is responsible for making referrals to the Attorney Generals office in cases recommended for prosecution.</p> <p data-bbox="256 786 1476 1238">The agency noted that there had been a total of 46 allegations of sexual abuse investigations in the previous 12 months, In addition another 40 allegations of sexual harassment was investigated. A review of the allegations indicated that 10 cases if staff/inmate sexual abuse were unsubstantiated, 9 were unfounded and 3 were currently in progress. A review of inmate/inmate sexual abuse cases indicated 1 substantiated, 14 unsubstantiated, 2 unfounded and 5 in progress. A Review of staff/ inmate sexual harassment indicated 14 cases, with 6 unsubstantiated, 5 unfounded and 2 ongoing. Inmate/inmate sexual harassment for the same period indicated 26 cases with 2 substantiated, 10 unsubstantiated, 6 unfounded and 9 ongoing. It was noted that there was 5 cases in which charges were filed, 4 of those cases were listed as unsubstantiated.</p> <p data-bbox="256 1279 1476 1606">During the interview with the agency director/designee, was asked, “Does the agency ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment?” He stated, “Yes”. He noted that all allegations are investigated. Inmate to inmate sexual harassment allegations are investigated by the facility, while investigators from the Inspector Generals Office investigate all allegations involving staff as well as inmate to inmate sexual abuse cases. Matters that are criminal in nature are investigated by investigators from the Inspector Generals office.</p> <p data-bbox="256 1646 1444 1843">Interviews with Agency and Facility investigators also confirmed that investigators from the Inspector General’s office conduct investigations into all allegations involving staff as well as inmate on inmate sexual abuse cases. Investigators noted the facility investigators are only responsible for inmate on inmate sexual harassment.</p> <p data-bbox="256 1883 1460 2085">115.22 (b) The agency website (provided below) provides information specific that, “All allegations, reports and information of such incidents will be investigated thoroughly by the Office of the Inspector General and the employee, contractor, or volunteer will be held accountable if found guilty.” The website also provides access to the current policy “Administrative Regulation 421, Custodial Sexual Misconduct,</p>

Inmate Sexual Offenses and Prison Rape Elimination Act”

https://doc.nv.gov/About/NDOC_Office_of_the_Inspector_General/PREA_Management_Division/

Interviews with investigators support the assertion that administrative or criminal investigations are completed for all allegations. All administrative investigations related to inmate on inmate sexual harassment are completed by the agency, criminal allegations of sexual abuse by staff or inmates as well as sexual harassment by staff are referred to the inspector general's office.

The following documentary evidence was analyzed in making the compliance determination:

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)

The following interviews were conducted and considered in making the compliance determination:

- Agency Director (designee)
- Warden
- Investigators
- Agency PREA Coordinator

The following site review observations were considered in making the compliance determination:

- Site review visual observations

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.22

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 262 558 293">Auditor Discussion</p> <p data-bbox="256 338 1476 913">115.31 (a & c) (HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act- PREA, section 421.12 (pg. 11-12) requires that, All employees who may have contact with inmates will receive instruction on the requirements and responsibilities of PREA in pre-service training. All employees who may have contact with inmates will receive refresher training on the requirements and responsibilities of PREA every two (2) years In years which an employee does not receive PREA refresher training the employee, shall receive refresher information on current PREA policies. The auditor reviewed the curriculum for both new employees and the refresher training provided. All agency new hire employees receive full PREA training on their first day of employment, prior to contact with inmates. Additionally, staff will receive full PREA training again during the agency Peace Officer and Non-Custody Basic academy training. All staff receive full PREA refresher during even number years. During odd number years, all staff receive refresher information on current sexual abuse and sexual harassment policies.</p> <p data-bbox="256 954 1461 1238">The auditor noted that this training covers each of the required elements of the standard including but not limited to: "Its zero-tolerance policy for sexual abuse and sexual harassment; How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; Inmates' rights to be free from sexual abuse and sexual harassment; The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;"</p> <p data-bbox="256 1279 1476 1518">Interviews were completed with 24 randomly selected staff, with almost no exception staff indicated that they recalled receiving this training. The auditor reviewed records for 33 random staff and found them all to be compliant with the training. The auditor reviewed this training and noted that it met the compliance requirements of 115.31 (c). According to current training records the facility was able to show 96% compliance for 652 staff.</p> <p data-bbox="256 1559 1461 1758">115.31 (b) The agency noted that they train all staff on both genders during the training. As such staff transferring between facilities that house different genders have already received the necessary training. The training material was provided by the facility and reviewed by the auditor. The auditor noted that the curriculum was mutually applicable to both male and female inmates.</p> <p data-bbox="256 1798 1476 2083">115.31 (d) Staff are required to confirm they understand the training provided to them. Staff are required to sign form DOC1954 "Employee Training Acknowledgement" which states , "I understand my rights and responsibilities as a mandated reporter, and the agency's "Zero Tolerance" policy toward all forms of sexual abuse and sexual harassment. I also understand failure to abide by the "Zero Tolerance" policy, regulations, and division/facility operational procedures could result in disciplinary action and/or possible referral for criminal charges." During the onsite</p>

review 24 random staff were interviewed and asked about the training they received specific to PREA. The individuals interviewed with the random staff protocols understood the training they received including the policies on prevention, detection, reporting and response. The auditor reviewed records for 33 random staff and found them all to be compliant with this provision.

The following evidence was analyzed in making the compliance determination

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- Agency Policy (AR) 360 “Correctional Employee/Officer Basic Training Program” (effective 9/16/2014)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- NIC “PREA: Communicating Effectively and Professionally with LGBTI Offenders”
- PREA Training “Prison Rape Elimination Act-PREA” (2020)
- Training Records

2. Interviews:

- Random Staff

Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.31

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.32 (a) (b) NDOC) Administrative Regulation (AR) 802, Community Volunteer Program, section 802.01 (pg. 2) states, “An approved volunteer must complete the Department's initial Volunteer Training before entry to any institution/facility. (1) According to PREA standard 115.32 all volunteers that have contact with inmates will receive training on PREA and NDOC Zero Tolerance policy.” The audit received a copy of the training and noted the training covers the zero tolerance policy, and the responsibility of volunteers under the NDOC’s sexual abuse and sexual harassment prevention, detection and response policies and procedures. The agency noted that volunteers and contractors are given the same level of training regales of the level of contact with inmates, as such they provided training appropriate for individuals with significant contact. The auditor noted that the training provided the following objectives:</p> <ul style="list-style-type: none"> · What is the Prison Rape Elimination Act & Who does it apply to? · The agency’s “Zero Tolerance” policy & PREA definitions (115.31 #1) · How employees fulfill their responsibilities under agency sexual abuse & sexual harassment prevention, detection, reporting and response policies and procedures (115.31 #2) · The inmates’ rights to be free from sexual abuse & sexual harassment (115.31 #3) · The right of inmate’s & employee’s to be free from retaliation for reporting sexual abuse & sexual harassment (115.31 #4) · How to avoid inappropriate relationships with inmates (115.31 #8) · How to communicate professionally with all inmates and those who identify as LGBTI or gender non conforming (115.31 #9) <p>During the onsite review both volunteers and contractors were interviewed as part of the process. When asked if they receive training in regards to their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response, per agency policy and procedure, all interviewees noted that they had and described elements of the training related to notification to staff if they became aware of an issue. The training provided information on preventing, detecting, reporting, investigating, and responding to sexual misconduct against offenders, as well as information on red flag behaviors. The facility indicated that there are 1198 volunteers this number was actually representative of the number of volunteers across the agency, however by the completion of the interim audit report they were unable to produce the training records to evidence completion.</p>

115.32 (c) Similar to the acknowledgement for Staff in 115.31 (d) contractors and volunteers are also required to sign form DOC 051 "Volunteer Training/Orientation Acknowledgement Form". The form covers PREA and non-PREA Topics. Specific to PREA volunteers and contractors must initial the following topics.

- Overview of PREA Law
- Agency Zero Tolerance Policy
- Contractor & Volunteer Responsibilities
- PREA definitions for sexual abuse and sexual harassment
- Avoiding inappropriate relationships with inmates
- How to privately report

The form also provides the following statement of understanding: "I understand the training given on the above subject of PREA and have a good understanding of this topic within the guidelines of the Nevada Department of Corrections. I understand the NDOC has a "Zero Tolerance" Policy regarding volunteers/staff/contractors on inmate sexual abuse and harassment as well as inmate on inmate sexual abuse and harassment." The facility provided the blank document that indicates the understanding as identified above, however by the completion of the interim report the facility was unable to provide the necessary documentation to evidence volunteers acknowledgement of training and understanding.

The following evidence was analyzed in making the compliance determination

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 "Prison Rape Elimination Act-PREA " (effective 01/14/2016)
- Agency Policy (AR) 802 "Community Volunteer Program" (effective 10/15/2013)
- NDOC) Administrative Regulation (AR) 802, Community Volunteer Program
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- PREA Training "Volunteer and Contractor Training Prison Rape Elimination Act-PREA" (06/01/2021)
- Training Records Volunteer and Contractor Training Records

2. Interviews:

- a) Random Staff
- b) Volunteers/Contractors

The facility indicated that 100 percent of volunteers were compliant with the training requirements, however by the completion of the interim audit report they were unable to produce the training records to evidence completion.

On August 26, 2022 the facility uploaded a training report that indicated all 21 active volunteers had completed the necessary training.

115.33	Inmate education
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 558 300">Auditor Discussion</p> <p data-bbox="256 340 1477 792">115.33 (a) HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.06 (pg. 7) provides the requirements for inmate education in that, “During initial reception, all inmates transferring to HDSP will receive information explaining the NDOC zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment by the Reception Caseworker. Inmates shall watch the 15 minute education video; Receive the written Educational Pamphlet (English & Spanish); Access to utilize the Braille Handbook if visually impaired (Located with PCM)” The Agency Uses the PREA Video from Justice International (PREA: What you need to know). The video is provided in English and Spanish as well as close caption on the screen.</p> <p data-bbox="256 833 1477 1532">The auditor has viewed this video and notes that it provides the necessary information to support compliance with this standard. The facility reported that during the documentation period 2946 adults in custody were admitted to the facility and all 2945 remained for 30 days or more. The facility stated that all inmates received information on day one as part of the intake process. As part of the on-site review the auditor visited the intake area and observed appropriate signage providing information to the population that Sexual Abuse or Harassment is never okay and provided options on how to report including: telling staff members, calling the PREA Hotline, how to contact and advocate, as well as addresses to write to include . The signage also contained 3rd party contact number for family using the Inspector General’s PREA hotline at (775) 887-3152. During the on-site review the auditor observed the intake process as well as interviewed the staff that complete the intake process. During the interviews staff noted that inmates are provided with information about the zero tolerance policy and how to report incidents of sexual abuse or harassment. The auditor noted that the information was posted throughout the institution and during the screening process the inmates are informed as well as provided access to the literature found throughout the institution.</p> <p data-bbox="256 1572 1477 1980">115.33 (b-c) Comprehensive education is provided to all inmates during intake at the High Desert State Prison which serves as an intake facility. This education is usually provided upon arrival, Both the video and a transcript were provided to the auditor. The incoming inmates are provided a letter sized (readable) copy of the poster which includes the NDOC zero tolerance policy, the inmate’s rights under PREA and how to report, long with addresses and phone numbers to NDOC Inspector General, New Mexico’s Inspector General, and the contact information for Just Detention International. The Information and Education Sheet are available in both English and Spanish.” Both random and targeted interviews supported compliance in that the population watched the video within a week of intake.</p> <p data-bbox="256 2020 1477 2056">The facility reported that 2945 inmates were admitted that remained longer than 30</p>

days, noting that all had received their comprehensive education. The facility reported that inmates who were in custody and admitted prior to August 20, 2012 had received their comprehensive education. The auditor reviewed documentation for 40 randomly selected inmates including completion of PREA Education. The files were selected by the auditor as both Random and Targeted. Random file reviews were selected by assigning a number value to each bunk then using a random number generating application developed by UX apps for the living units. These selections were then adjusted to accommodate the targeted file reviews.

115.33 (d) Agency Policy (NDOC) Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.07 (pg. 4) provides the direction that, "All inmates will be afforded education in formats accessible to everyone, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills." The provided policy language speaks directly towards the ability to provide services including agency PREA initiatives to prevent, detect and respond to sexual abuse and sexual harassment. While not exclusive to comprehensive education it is inclusive of such. The auditor noted that posters in the living units are in both English and Spanish as well as large easy to read fonts, with clear contrast from the background. The educational video is provided with audio for visually impaired individuals as well as a transcript for audio impaired individuals. Cognitive and Limited English Proficient adults in custody were interviewed as part of the audit process, when asked, "Does the facility provide information about sexual abuse and sexual harassment that you are able to understand?" They responded with an affirmative, yes. Standard 115.16 provides additional information regarding provision 115.33 (d).

115.33 (e) The agency maintains documentation of the comprehensive education. The Facility PREA compliance manager was able to demonstrate the process to the auditor during the onsite phase of the audit and pull 30 sample documents for the auditor while onsite.

115.33 (f) HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.06 (pg. 8) provides the requirement for continuous and readily available information in that, "Information will be continuously and readily available and/or visible to inmates through posters, inmate handbooks, institutional TV channel, or other written formats." That all inmates are encouraged to report any and all instances of sexual abuse or sexual harassment; and the current methods available for reporting." The auditor reviewed the available posters within the living units and common areas during the onsite review. The posters provided contact information for reporting as well as statements, "Inmates have the right to report sexual abuse and sexual harassment that have been committed by staff, inmates, contractors or volunteers."

The following evidence was analyzed in making the compliance determination

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- PREA Intake Video Transcript

2. Interviews:

- Random Staff
- Random Inmates
- LEP Inmates

3. Observations

- Area Postings

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.34 (a-b) (HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.12 (pg. 11-12) which states, “NDOC Office of the Inspector General will investigate all allegations of staff on inmate sexual abuse, sexual harassment and inmate on inmate sexual abuse.” Section 421.05 further provides, “The Inspector General shall ensure that investigative and other staff members assigned to investigate any allegation related to PREA has received training in conducting such investigations in confinement settings. Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.” The policy adopts the requirement of the standard for specialized training for investigators. As part of the process the audit team interviewed a facility investigator and investigators from the Inspector Generals Office, each investigator confirmed completion of the required training and recalled element of the training including Miranda, Garrity, evidence collection, and interviewing victims. It was noted that facility investigators only conduct inmate on inmate sexual harassment cases all other cases are investigated by the Inspector Generals Office.</p> <p>The facility reported that investigators completed the NIC training “PREA: Investigation Sexual Abuse in a Confinement Setting.” The auditor has reviewed the curriculum for this training from the PREA Resource Website which notes in part, “The curriculum.... includes content on PREA standards relating to investigations;.....proper use of Miranda and Garrity warnings; trauma and victim response; processes of a forensic medical exam; first-response best practices; evidence-collection best practices in a confinement setting; techniques for interviewing male, female,....report writing techniques; and information on what prosecutors consider when determining whether to prosecute sexual abuse cases.” Based on the content of the training the auditor determined it met the criteria for provisions (a & b).</p> <p>In addition to the above noted training investigators received an advanced specialized training: This course provided case studies that allow investigators to apply and practice their investigative skills to conduct appropriate investigation in accordance with PREA standards. At the end of this course learners will be able to articulate some of the unique aspects of investigating sexual abuse of inmates in confinement settings.</p> <p>As part of the onsite review 2 investigators (1 facility investigators and 1 agency investigator) were interviewed. Investigators were able to discuss topics covered by the training including: techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity, and evidence collection. It was noted that the Facility investigators only conduct the inmate on inmate sexual harassment investigations,</p>

while the Investigators from the inspector Generals Office conduct all other investigations.

115.34 (c-d) The facility reported that there were 17 investigators, and the auditor was provided with certificates of completion for the training provided by the Department of Justice, National Institute of Corrections specific to investigating Sexual Abuse in a Confinement Setting for each investigator.

The following evidence was analyzed in making the compliance determination

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- NIC “PREA: Your Role Responding to Sexual Abuse”
- NIC Training Certificates

2. Interviews:

- Investigators

Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.34

115.35	Specialized training: Medical and mental health care
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 300">Auditor Discussion</p> <p data-bbox="256 340 1477 748">115.35 (a)(d) ((HDSP) Operational Procedure (OP) 670, “Medical Standards for PREA”, (pg. 3) provides the required for specialized training for medical staff, stating, “All medical and mental health staff will receive training in detecting and assessing signs of sexual abuse and harassment, and how to respond effectively and professionally to victims of sexual abuse and sexual harassment as provided in the NIC training modules entitled "PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting and PREA: Behavioral Health Care for Sexual Assault Victims in a Confinement Setting". This training can be found at http://nicic.gov/library/027693 . This training will be documented with a training certificate within the employees supervisor file.</p> <p data-bbox="256 788 1477 1240">This policy also requires medical and mental health staff to complete the training that all NDOC employees receive noting, “All full and part time medical and mental health care practitioners will receive the training mandated for all NDOC employees in accordance with PREA standards. This training will be conducted by the HOSP training division and will be documented in the employees training file.” Interviews with medical staff and mental health staff confirmed that they had received the specialized training through the online course. The facility indicated the 71 medical and mental health staff regularly work at HDSP, the facility indicated that 100% of the medical staff had completed the specialized training, however they were unable to produce rosters and certificates for all staff prior to the publication of the interim report.</p> <p data-bbox="256 1281 1477 1599">115.35 (b) Documentation from the facility and notes that the facility and onsite medical staff do not conduct medical examinations, inmates are sent to University Medical Center in Las Vegas for forensic examinations if needed. Interviewed medical staff also noted that forensic exams are not completed at the facility, victims are sent to University Medical Center in Las Vegas. The auditor spoke with staff at the University Medical Center, who verified that they have a SAFE/SANE nurse available to conduct forensic examinations and would provide services to High Desert State Prison .</p> <p data-bbox="256 1639 1477 1845">115.35 (c) The auditor reviewed documentation indicating health services staff employed at High Desert State Prison completed both the specialized training noted in provision (a) of this standard and completed the training course provided to all staff in standard 115.31. the auditor noted that documentation of this training was maintained pursuant to the policy requirements noted above and the standard.</p> <p data-bbox="256 1953 1366 1989">The following evidence was analyzed in making the compliance determination</p>

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- HDSP Operational Procedure 670, Medical Standards for PREA, (effective 2/11/2019)

2. Interviews:

- Health Services Staff
- SAFE/SANE staff (Non-DOC)

The facility indicated that 100 percent of medical and mental health staff were compliant with the training requirements, however by the completion of the interim audit report they were unable to produce the training records to evidence completion.

On August 26, 2022 the facility uploaded documentation of training for all 13 medical and mental health staff indicating compliance with this standard.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 262 560 293">Auditor Discussion</p> <p data-bbox="256 338 1477 1335">115.41 (a) HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.08 (pg. 4) requires that, “All inmates shall be assessed for their risk of being sexually abused by or abusive toward other inmates during an intake screening and upon transfer to another institution/facility. The PREA risk screening assessment tool is confidential.” The policy statement provides the requirement for all inmates to be screened at all facilities. During the onsite review a member of the audit team observed the intake process including the vulnerability assessment interview. The auditor was provided a demonstration of the computer system that houses the screening tool, discussed in greater detail in provisions (b-f). Random Inmates who were interviewed as part of the audit process largely supported the assertion that they were interviewed and asked questions specific to the screening tool including “whether you had been in jail or prison before, whether you have ever been sexually abused, whether you identify with being gay, lesbian, or bisexual, and whether you think you might be in danger of sexual abuse here?” 54 inmates were interviewed as part of the review process, 27 received this question only 19 answered affirmatively, one did not remember, and six stated no, they were not asked these questions. There were 54 inmates interviewed with the random protocols; however, only 27 of them arrived in the preceding 12 months. As part of the review of documentation, the auditor reviewed files for 30 inmates present at High Desert State Prison during the audit, The Agency PREA Coordinator provided an assessment flow chart outlining elements of the system noting requirements for Intake within 72 hours, Follow-up assessments within 21 days after the intake assessment, Special assessments when there is a change in information and the requirement for transgender inmates to be reassessed every 6 months.</p> <p data-bbox="256 1373 1477 1910">Staff who complete risk assessments were interviewed as part of the process, when asked “Do you screen inmates upon admission....for risk of sexual abuse victimization or sexual abusiveness...” The staff noted that they did. In addition, members of the audit team observed the intake process for newly arriving inmates including the completion of the risk assessment. The auditors observed the interview process including the completion of the risk assessment interviews. The facility noted that the risk assessments are completed as part of the intake process usually within the first few hours of arrival, well in advance of the 72 hour time line. The facility provided initial proof documents showing completion of the assessments. During the on-site phase the auditor identified 30 inmates and requested the associated documentation. All documentation requested was received and reviewed, the auditor noted no discrepancies, noting that documentation was provided to support all screenings being completed in a timely manner.</p> <p data-bbox="256 1948 1477 2067">115.41 (b) NDOC Administrative Regulation (AR) 573, “Prison Rape Elimination Act and Screening, section 573.01 (Pg. 1) states, All inmates shall be assessed, during intake and upon transfer to another facility, for their risk of being sexually abused by</p>

other inmates or sexually abusive toward other inmates in accordance with federal PREA standards...” specific to provision (b) the policy language incorporates that provision stating, “Initial screening should take place as soon as possible, but shall be completed within 72- hours of arrival at an institution or facility...” During the onsite review, audit team members observing the intake and screening process noted, that intake screening occurred on the first day the individuals arrive at the facility. The facility noted that they had received a total 2652 inmates whose length of stay was greater than 72 hours.

During the onsite review the PREA compliance manager demonstrated the screening system including reports. During the onsite review, staff who completed the screening were interviewed. When asked if the inmates were screened within 72 hours, staff confirmed the timely completion of these screenings within 72 hours noting that they are actually completed on the day they arrive. 54 adults in custody were asked the random interview protocols of those interviewed 27 had arrived in the previous 12 months, 70.1 % who were interviewed who arrived within the previous 12 months, remembered being screening and asked the screening questions.

115.41 (c) The Auditor reviewed the risk assessment tool including sample assessments and the screening scoring system, noting an objective scoring based on information identified in the risk assessments as identified in provision (d). The vulnerability assessment scores are based on specific factors and cumulative points and is not left open for subjective interpretation, the auditor noted that the scoring tool assigns a specific value to each category found on the assessment including mental illness, physical disability, developmental disability, age, physical build, etc. The interviewer answers yes or no to specific questions and the system provides the final score.

115.41 (d) NDOC Administrative Regulation (AR) 573, “Prison Rape Elimination Act and Screening, section 573.01 (Pg. 2) provides directive for specific factors used in the vulnerability assessment including:

- (1) Whether the inmate has a mental, physical, or developmental disability.
- (2) The age of the inmate.
- (3) The physical build of the inmate.
- (4) Whether the inmate has previously been incarcerated.
- (5) Whether the inmate's criminal history is exclusively non-violent.
- (6) Whether the inmate has prior convictions for sex offenses against an adult or child.
- (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming.
- (8) Whether the inmate has previously experienced sexual victimization.

(9) The inmate's own perception of vulnerability.

The agency does not detain persons solely for civil immigration purposes. This was verified by the auditor through a review of the U.S. immigration and Customs Enforcement website, which indicated no contractual housing with Nevada Department of Corrections. As part of the review for this provision of the standard, staff who complete these screenings were interviewed, they noted that the components found in the provision were also part of the interview process they complete with inmates.

The facility provided a sample of completed assessments, while on site the auditor selected 29 additional inmate files for review and also found evidence that the required elements were included in the screening process. During the onsite review the audit team observed the intake and screening process, during the intake screening process the auditor observed that some inmates would be interviewed in an area that provided.

115.41 (e) NDOC Administrative Regulation (AR) 573, "Prison Rape Elimination Act and Screening, section 573.01 (Pg. 2)) speaks directly to inmates initial requirements for screening related to aggressiveness, Potential Aggressor Factors listed include:

(1) History of institutional violent behavior;

(2) Any history of sexual abuse, as either a victim or perpetrator;

(3) History of convictions for violent offenses or sexual assault offenses;

(4) History of correctional facility sex abuse, which may include violations contained in

AR 707 that are of a sexual nature.."

Completion of the Risk Assessment will be noted in a chronological entry in the Nevada Offender Tracking Information System (NOTIS) along with a reference to an alert when applicable.

115.41 (f) HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.08 (pg. 4) provided the direction for the initial 72 hour assessment. This section of policy also provides the agency requirement for the 30 day assessment noting in part, "Inmates shall be reviewed within 21 days upon reception to review if there are any changes to the risk of the inmate being sexually abused by other inmates or sexually abusive towards other inmates by the Unit Caseworker." The process requires that The PCM shall send a weekly e-mail to the institutional caseworkers that contain a list of inmates that require their PREA Follow-up assessment and the due date for the assessment. The Caseworkers shall document the completion of the Inmate assessment as a case note within the NOTIS system, complete the 21 day Follow-up PREA form, and notify the PCM when it is completed. The 30 day Follow-up PREA Form shall be forward to the Assigned Administrative

Assistant for PREA for tracking purposes and then placed in inmate's I-File.

During the onsite review random inmates were asked about the risk assessment process and if they had been asked questions from the vulnerability tool again at a later date. There were 54 adults in custody interviewed with the random protocols; however, only 27 of them arrived in the preceding 12 months. Out of 27 inmates who received this question ten answered affirmatively, five did not remember, and 12 stated no, they were not asked these questions. As part of the review of documentation, the auditor reviewed files for 30 adults in custody present at High Desert State Prison during the audit, The selected files were completed at 100%. The facility provided logs indicating between January 3rd 2022 and June 30th 2022 the facility received 1669 inmates. The auditor found evidence that the 30 day reviews were completed as required. 95.5% of 30 day reviews were completed within 30 days. The remaining 4.5% were transferred prior to 30 days. Indicating near 100% completion of individuals who remained 30 days or longer.

115.41 (g) (HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.08 (pg. 4) requires that, "An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt or additional information that bears on the inmate's risk of sexual victimization or abusiveness." The policy requirement for reassessment matches the requirement in the standard. Interviews with staff who conduct risk assessments, indicated that they would complete these types of assessments. The facility has assigned intake assessments to the caseworkers to ensure they happen on arrival. The 30 day assessments and for cause, special assessments are completed by the PREA compliance manager when required section in 421.07 of the policy. The auditor reviewed documentation of these "special" assessments, noting that they were completed when warranted.

115.41 (h) HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.07 (pg. 8) notes that, "Inmates may NOT be disciplined for refusing to answer, or for not disclosing complete information in response to the victimization screening assessment." Staff who complete risk screenings affirmed this, when responding no to the question, "Are inmates disciplined in any way for refusing to respond to (or for not disclosing complete information related to) the following." The auditor reviewed the Administrative Regulation (AR 707.1 The inmate Disciplinary Manual and found no rule or disciplinary sanction for refusing to answer these questions.

115.41 (i) The agency has implemented controls related to information contain in the PREA Risk Assessment. Access to the assessment is limited to Screener and their supervisory chain of command. Custody staff do not have access to this system. The agency PREA Manual notes, "The Department, all institutions, and facilities shall implement policies to ensure reporting is required for all acts or suspicions of unauthorized and prohibited dissemination of PREA screening information. All prohibited unauthorized dissemination shall result in disciplinary action, including termination."

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- Agency Policy (AR) 573 “PREA Screening and Classification” (effective 03/01/2018)
- HDSP Operational Procedure 504, Intake and Classification, (effective 11/22/2021)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)

2. Interviews:

- PREA Coordinator
- PREA Compliance Manager
- Staff Responsible for Screening
- Random Inmates

Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.41.

115.42	Use of screening information
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 300">Auditor Discussion</p> <p data-bbox="256 340 1481 918">115.42 (a/b) The agency reports in the PAQ that it uses information from the screening tool to inform housing, bed, work, education and program assignments with the goal of keeping separate those inmates at high risk of being sexually abusive. This assertion is supported in HDSP Operational Procedure (OP) 573, “PREA Screening and Classification”, section 573.02 (Pg. 3) which reiterates the language from the provision in that, “Staff shall use information from the risk assessment to make informed housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. Staff shall make individualized determinations about how to ensure the safety of each inmate.” Policy states, “At no time will a known victim and a known aggressor be housed together in a two (2) man cell.” Policy continues, “A possible victim and a possible aggressor should not be housed together..... Non-victims and non-aggressors may be housed with any other category, subject to individual case factors.”</p> <p data-bbox="256 958 1481 1536">When asked, “How does the agency/facility use information from the risk screening during intake (per 115.41) to keep inmates safe from being sexually victimized or from being sexually abusive?” The PREA compliance manager, confirmed that the screenings were used to determine their housing and what level of supervision the inmates would receive. The PREA compliance manager also noted that the information was used to keep the population safe in determining housing and programming assignments. During the onsite review, the PREA compliance manager demonstrated the process for the Auditor including a walkthrough of the housing and programming assignment process including separating possible victims from possible aggressors. When asked, “How does the agency/facility use information from the risk screening during intake (per 115.41) to keep inmates safe from being sexually victimized or from being sexually abusive?” The PREA Compliance Manager, stated that the screenings were used to determine their housing and what level of supervision the inmates would receive.</p> <p data-bbox="256 1576 1481 1984">115.42 (c) NDOC Administrative Regulation (AR) 573, “Prison Rape Elimination Act and Screening, section 573.02 (Pg. 3) states provides direction to the agency including authority, purpose and policy requirements. The administrative rule speaks to the policy of the department to “In deciding whether to assign a transgender or intersex inmate to a facility/institution for male or female inmates, and in making other housing and programming assignments, the agency shall consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security risks.” Additionally the policy provides, “The following factors will be taken into account for housing and programming:</p> <p data-bbox="256 2024 1369 2060">a. A transgender or intersex's own views with respect to his or her own safety;</p>

b. Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates; and

c. Lesbian, gay, bisexual, transgender, or intersex inmates will not be placed in dedicated facilities, units, or wings solely on the basis of such identification or status”

The Agency PREA coordinator noted that, NDOC has a Transgender and Intersex Committee, as indicated in Agency Policy 573, which states, “2. A classification review committee consisting of a certified medical/mental health practitioner, Inspector General’s Office, PREA management team member, and a designated staff member from Offender Management will determine appropriate institutional placement of a transgender or intersex inmate based on the review.

a. The classification review committee will conduct an individual assessment based upon their specific area of expertise, knowledge, and control.

b. All documentation, information, and recommendations of the review committee are confidential and will be maintained in a secure location.

In interviews with the PREA Coordinator it was noted that housing would be considered on a case-by-case basis using information from the assessment tool to screen for vulnerability and consideration for the inmate’s views in respect to his or her own safety. The agency provided documentation of these meetings. The agency asserts that decisions are made on a case-by-case basis and has evidenced the placement of a transgender female into a female prison.

115.42 (d) NDOC Administrative Regulation (AR) 573, “Prison Rape Elimination Act and Screening, section 573.04 (Pg. 5) requires that, “All institutional and facility policies related to placement and programming assignments shall include a reassessment for all inmates at least twice per year or as needed, including the transgender and intersex inmate population. The reassessment will also include a review of any threats to safety that may have been experienced by any inmate.

During the interviews with staff who complete screenings, when asked, “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?” Interviewees affirmed that they are completed. The auditor reviewed documentation of reviews demonstrating twice yearly reviews. The auditor reviewed files reviews recent six month reviews and historical reviews for at least 18 months.

115.42 (e) NDOC Administrative Regulation (AR) 573, “Prison Rape Elimination Act and Screening, section 573.04 (Pg. 5) requires that, “The following factors will be considered for housing and programming: A transgender or intersex’ s own views with respect to his or her own safety.” This language is consistent with the standard.

During the onsite review when asked about if the facility considered a transgender or intersex inmates views with respect to his or her safety, both the PREA compliance manager and the screening staff indicated that this would be considered. Inmates who identified as transgender or intersex were interviewed as part of the process and

indicated they believed that their views were not considered. The auditor reviewed 136 independent reviews with documentation of six month reviews for transgender or intersex individuals. In review of the printed PREA Risk Assessments, the forms do not evidence consideration of the of individuals own views. Corrective action is required.

115.42 (f) NDOC Administrative Regulation (AR) 573, "Prison Rape Elimination Act and Screening, section 573.002 (Pg. 3) states, "Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates." The PREA compliance officer indicated that, As required by policy transgender and intersex inmates are given the opportunity to shower separately from other inmates.

At High Desert State Prison, the units are designed with individuals showers (no gang showers). During the onsite review the auditor observed the shower areas for the facility. The facility provides a separate. The facility noted that it would also provide separate times or an alternate process for showing if requested. The facility indicated that there had been such request. Interviews with the PREA compliance manager and staff who perform screenings further confirmed this statement during the interview process. Transgender and Intersex inmates who were interviewed were inconclusive, with responses noting the normal showers, during their own scheduled time or no they were not allowed to shower privately. It also noted by the facility that while the showers were individual, Transgender individuals also had opportunity to shower privately from non-transgender inmates in the unit with alternate arrangements.

115.42 (g) LGBTI inmates are not placed in dedicated facilities, units or wings solely based of such identification or status. The NDOC is not subject to a consent decree, legal settlement, or legal judgement for protecting such inmates. NDOC Administrative Regulation (AR) 573, "Prison Rape Elimination Act and Screening, section 573.02 (Pg. 3) states, "Lesbian, gay, bisexual, transgender, or intersex inmates will not be placed in dedicated facilities, units, or wings solely on the basis of such identification or status." All inmates are housed on a case by case basis depending on their needs. The PREA compliance manager supported this statement, noting that the facility uses the individualized assessment to determine housing, and that LGBTQ inmates would be placed according to their individual needs and safety. Inmates who identified as LGBTQ were interviewed as part of the onsite review. When asked, "Have you been put in a housing area only for gay, lesbian, bisexual, transgender, or intersex inmates?" The general response was that they were not.

During the on-site review, the auditor received a list of inmates who identified as transgender or intersex. The list contained 13 individuals divided by 6 separate housing areas, indicating no dedicated units for the purpose of this population. The auditor team noted that during tour and the interview process the population was not centralized.

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- Agency Policy (AR) 573 “PREA Screening and Classification” (effective 03/01/2018)
- HDSP Operational Procedure 504, Intake and Classification, (effective 11/22/2021)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)

2. Interviews:

- PREA Coordinator
- PREA Compliance Manager
- Staff Responsible for Screening
- LGTBI Inmates

The facility indicated that pursuant to § 115.42 (e) A transgender or intersex inmate’s own views with respect to his or her own safety shall be given serious consideration. A review of the agency’s documentation while not contrary to this statement, failed to provide evidence supporting this consideration.

In August 2022 the agency updated the form and process to include transgender and intersex inmates personal views on their safety, the form asks Do you feel safe showering? Do you feel safe in the unit? Do you feel safe at this institution? If no, did they request o express a desire to house in a facility they identify vs gender assigned at birth? Do you know how to report sexual abuse or sexual harassments at this facility? Do you have any other concerns related to your safety?

Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.42

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.43 (a) NDOC Administrative Regulation (AR) 573, “Prison Rape Elimination Act and Screening, section 573.04 (Pg. 4) Mirrors much of the standard language and states, “Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and it has been determined that there are no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing no more than 24 hours while completing the assessment..” The facility notes that no inmates were placed in involuntary segregated housing due to high risk of victimization during the preceding 12 months. The warden confirmed this during the interview process.</p> <p>115.43 (b) NDOC Administrative Regulation (AR) 573, “Prison Rape Elimination Act and Screening, section 573.04 (Pg. 4) duplicates the requirements of provision (b) in that, “Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:: The opportunities that have been limited; the duration of the limitation; and the reasons for such limitations.” The facility reported in the OAS and during interviews that no inmates were placed in involuntary segregated housing. Interviews with staff who supervise inmates in segregation confirmed that in those cases an inmate would be placed in administrative segregation for risk of victimization, they would be provided the required opportunities and the facility would document the limitations, duration and reasons.</p> <p>115.43 (c) NDOC Administrative Regulation (AR) 573, “Prison Rape Elimination Act and Screening, section 573.04 (Pg. 5) Mirrors the standard and requires, “The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. During the interview process the warden confirmed the requirement for a hearing at no later than 30 days and noted meetings would be much earlier. Staff who supervise inmates in segregation confirmed compliance with the policy requirement.</p> <p>115.43 (d) NDOC Administrative Regulation (AR) 573, “Prison Rape Elimination Act and Screening, section 573.04 (Pg. 5) states, “If an involuntary segregated housing assignment is made, the facility shall clearly document: A. The basis for the facility's concern for the inmate's safety; and B. The reason why no alternative means of separation can be arranged..” The facility reported that there were no instances of individuals being placed in administrative segregation due to risk of victimization.</p> <p>115.43 (e) NDOC Administrative Regulation (AR) 573, “Prison Rape Elimination Act and Screening, section 573.04 (Pg. 4) states, “Every 30 days, the facility shall afford</p>

each such inmate a review to determine whether there is a continuing need for separation from the general population.” Noting no inmates have been placed in administrative segregation for this purpose, staff who supervise inmates in segregation confirmed they would follow the requirements of the policy and administrative rule.

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- Agency Policy (AR) 573 “Prison Rape Elimination Act and Classification ” (effective 03/01/2018)

2. Interviews:

- Warden
- Staff who supervise inmates in segregation

Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.43

115.51	Inmate reporting
	<p data-bbox="256 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 340 1458 539">115.51 (a) The agency reports that it has established multiple internal avenues for inmates to report privately to the agency regarding concerns about sexual abuse, sexual harassment, and retaliation for making reports. This is supported in HDSP OP 421“Prison Rape Elimination Act-PREA,” section 421.08 (pg. 9) which provides the following reporting avenues included not limited to:</p> <p data-bbox="256 577 962 611">Verbal complaints to any Departmental employee</p> <p data-bbox="256 649 1299 683">Written complaints, which may be made through the following processes:</p> <ul data-bbox="331 752 1458 1122" style="list-style-type: none"> • Inmate grievances; Grievances alleging staff on inmate sexual misconduct or inmate on inmate sexual abuse will be forwarded immediately to the PREA compliance manager and/or AW... • A copy of the grievance will be forwarded to the PREA coordinator and Office of the Inspector General for review and investigation. • Inmate kites, written notes or letters to staff or administrators, and letter directed to the PREA coordinator or any member of the Inspector General's Office. • Writing the Nevada Attorney General's Office <p data-bbox="256 1160 1351 1193">Calling the internal PREA Hotline telephone number at 775-887-3152 (*3152)</p> <p data-bbox="256 1232 1169 1265">Writing to: Office of the Inspector General-PREA Reporting Office</p> <p data-bbox="256 1303 1458 1462">During the onsite review the auditor observed multiple ways for the population to report sexual abuse and sexual harassment as indicated in the policy notes above, these including: direct reporting to any staff member; in writing through a grievance, use of the Hotline.</p> <p data-bbox="256 1500 1474 1744">Education is provided to the population as outlined in 115.33 with information provided on the various reporting avenues listed. Reporting avenues are also provided in continuous education through posters, that include phone numbers and addresses for reporting allegations of sexual abuse or sexual harassment. The auditor noted that posters also provided ongoing education and reporting information including: “Reports will be accepted, including but not limited to;</p> <ul data-bbox="256 1783 1198 2033" style="list-style-type: none"> · Verbally to any staff member, contractor or volunteer; · Written report to any staff member, contractor or volunteer; · Submit an inmate request form; · Submit a grievance;

- Have a family/friend report on your behalf;
- Phone call to numbers listed below; or
- Written complaint to New Mexico of Corrections”

The reporting posters included addresses (physical and email) and phone numbers for the NDOC Inspector General, the Office of Inspector General for New Mexico and Just Detention International.

The audit team tested the grievance system during the onsite phase and was notified by the PREA compliance manager of the receipt and processing of the grievance in accordance with agency policy.

Prior to the onsite review the auditor tested the third party reporting process by calling the number from the agency website and leaving a recording. The auditor received confirmation of receipt of the call by the agency PREA coordinator.

During the onsite review 64 inmates were interviewed as part of the process and asked, “How would you report any sexual abuse or sexual harassment that happened to you or someone else? Is there someone who does not work at this facility who you could report to about sexual abuse or sexual harassment?” With almost no exception, all other individuals were able to confirm knowledge of the ability to report allegations. During interviews with random staff, staff members were able to identify ways for inmates to report allegations.

115.51 (b) The agency noted that they provided at least one way for inmates to report abuse or harassment to an entity that was not part of the agency. NDOC reports that it has an agreement with the New Mexico Department of Corrections to allow for an inmate to remain anonymous. This was confirmed by the auditor with the receipt and review of the reporting documentation. This information is outlined on posters throughout the living units and common areas in the facility. The information is provided to the population during intake with an orientation packet of documentation, including one copy of the reporting form.

The facility stated that it did not detain persons solely for civil immigration purposes, immigrant services agencies. This was further supported through a review of information available from the U.S. immigration and Customs Enforcement.

115.51 (c) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.05 (page 2) mandates staff reporting in that, “All institutional/facility allegations of sexual abuse and sexual harassment, including third-party and anonymous reports of allegations must be reported to the CM or designated employee. All institutional/facility allegations of sexual abuse and sexual harassment will result in a Nevada Offender Tracking Information System (NOTIS) incident report (IR)..” The local operating procedure reiterates the directive above and provides additional guidelines, “Reports can be received through anonymous correspondences (i.e. letters, Inmate Request Forms, etc.) and third party reporting and shall be provided the same attention as if

the staff member received the information through more conventional means. Any staff member who receives a verbal or written report of a sexual assault or any attempt thereof, will immediately report the information as noted above. Supervisors are required to promptly document any verbal reports they receive. Staff members will complete a staff report (DOC 028). Supervisors will submit supervisor report (DOC O 19) upon completion of all staff reports.” Interviews with random staff confirmed an understanding of the requirements to accept and document all reports.

115.51 (d) HDSP Operating Procedure (OP) 421 “Prison Rape Elimination Act- PREA”, section 421.03 (page 4) provides staff with several methods to for private reporting opportunity. The policy states, “The Institution shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.” The procedure does not require them to follow the chain of command and they may report through the following methods: Office of the Inspector General(OIG), PREA Management Division PO Box 7011 Carson City, Nevada 89702 ;Staff can call 775.887.3152 Inspector General's Office, Carson City, Nevada; Send email to Prea@doc.nv.gov; PREA Incident Report Form (Located on the NDOC website) [http://doc.nv.gov/ About/ NDOC Office_ of_ the Inspector_ General/PREA Incident_ Report](http://doc.nv.gov/About/NDOC_Office_of_the_Inspector_General/PREA_Incident_Report); Staff may report directly to immediate supervisor.

During interviews with random staff, staff understood the various avenues of privately reporting including the use of the PREA Hotline as well as speaking to directly to their supervisor or the local PREA Compliance Manager.

The following evidence was analyzed in making the compliance determination

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)

2. Interviews:

- PREA Compliance Manager
- Random Staff
- Random Inmates

3. Observations

- Agency Website
- Area Postings

Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.51

115.52	Exhaustion of administrative remedies
	<p data-bbox="256 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 340 1481 831">115.52 (a-b) The agency reports that it does provide an administrative procedure for dealing with inmate grievances, including those regarding sexual abuse. The administrative procedure is outlined in the Administrative Regulation 740, "Offender Grievance Procedure" which states, "All allegations of offender abuse by Department staff, employees, agents, and/or independent contractors, shall be immediately reported to the Warden, AWs, and the IG, in accordance with investigator guidelines in the NOTIS reporting system. A. Any grievance reporting sexual abuse against an offender will be referred to the Warden or designee for entry into the NOTIS reporting system and referral to the IG. B. Offenders who allege abuse other than sexual abuse will be interviewed by a supervisor of the staff who allegedly committed the abuse to ascertain if he/she agrees to pursue administrative remedies, which will be documented in the NOTIS system.."</p> <p data-bbox="256 873 1469 1489">The Agency PREA Manual notes that, "The inmate grievance process is a means that inmates can utilize to make a report of sexual abuse or sexual harassment by a staff member or another inmate and all institutions and facilities shall develop, implement and review annually their policies and procedures related to the grievance process." The PREA manual provides additional direction related to grievances noting: Any grievance that has an allegation or report related to sexual abuse must be accepted without constraints, including; Grievances that are outside the accepted time frames for a filed grievance shall be accepted for any portion of the grievance that has a claim of sexual abuse; The grievance process shall not be required to begin at the informal level for sexual abuse related issues; The grievance process shall not be required to resolve or attempt to resolve the grievance with the accused staff member for any claim of sexual abuse; The grievance shall not be referred to the accused or named staff member; and Any grievance filed by a fellow inmate when sexual abuse is reported will be accepted and allowed to continue until a response from the IG's Office, PMT."</p> <p data-bbox="256 1532 1430 1688">During the onsite review the auditor interviewed the grievance coordinator who confirmed the practice of accepting grievances related sexual abuse with no time limit, as well as not requiring them to submit the grievances to the alleged abuser. The auditor tested the grievance process during the onsite review.</p> <p data-bbox="256 1731 1469 2056">115.52 (c) Inmates who allege sexual abuse may do so without submitting it to the staff member who is the subject of the complaint nor will that staff member investigate themselves, this was confirmed during the interview with the facility grievance coordinator as well as noted in Administrative Regulation 740, "Offender Grievance Procedure" (Page 12) which states, "Allegations of sexual abuse will not be referred to a staff member who is the subject of the accusation of sexual abuse." Inmates are able to drop a grievance into a locked box located in the housing unit. The access to the box is limited. A caseworker receives the contents and delivers</p>

them to the appropriate Grievance Coordinator during the time of the onsite review, the Associate Wardens were responsible for reviewing and responding to grievances. Grievances that include allegations of sexual abuse or sexual harassment are entered into NOTIS with copies notification provided to the IG's, Warden, and agency PREA Coordinator.

115.52 (d) The agency issues the final decision on the grievance within 90 days as outlined in Administrative Regulation 740, "Offender Grievance Procedure" (Page 12), which states, "The IG shall make a final decision on the merits of any portion of the sexual abuse grievance within 90-calendar days of the initial filing of the grievance, and if applicable, the matter assigned for an official investigation."

115.52 (e) The administrative regulations allow for third parties to assist inmates in filing grievances. Compliance with this provision and the administrative rule was confirmed by the grievance coordinator.

The auditor reviewed the Administrative Regulation 740, "Offender Grievance Procedure" which in part duplicates the standard in that, "Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, shall be permitted to assist offenders in filing a grievance(s) relating to allegations of sexual abuse.; If a third party files on behalf of the offender, the facility may require as a condition of processing the request that the alleged victim agreed to have the request filed on his or her behalf, If a third party files on behalf of the offender, the facility may also require as a condition of processing the grievance, the alleged victim to personally pursue any subsequent steps in the grievance process. The agency reported that there were no 3rd party allegations of sexual abuse.

115.52 (f) Emergency grievance procedures are outlined Administrative Regulation 740, "Offender Grievance Procedure" section 740.07 (Page 9), The procedures provide for response in line with this provision of the standard noting, "Any Emergency Grievance alleging that an offender is subject to a substantial risk of imminent sexual abuse, must be immediately forwarded to the highest-ranking staff member on duty so that corrective action may be taken immediately, which may include moving the offender to administrative segregation for protective custody; The offender shall receive a response to the emergency grievance within 24-hours, with a final facility decision about whether the offender is at substantial risk of imminent sexual abuse within two (2) regular calendar days. The response, final decision, and the action taken in response to the Emergency Grievance will be documented. Action taken may include, but is not limited to: 1) Refer the information to the IG; 2) Afford the offender appropriate medical, mental health care; and 3) Address any safety considerations." The facility reported that there were no emergency grievances alleging substantial risk of imminent sexual abuse filed within the previous 12 months.

115.52 (g) The facility reports that there has been no discipline for bad faith allegations of sexual abuse. Administrative Regulation 740, "Offender Grievance Procedure" section 740.04 (Page 6)" Provides specific Language for the Abuse of the Offender Grievance Procedure. Section 1 states, "Offenders are encouraged to use

the Offender Grievance Procedure to resolve addressable claims the offender can define a specific loss or hann; however, they are prohibited from abusing the system by knowingly, willfully, or maliciously filing excessive, frivolous, or vexatious grievances, which are considered an abuse of the Offender Grievance Procedure. Any of the below-listed violations will result in the grievance not being accepted and disciplinary action may be taken” The list includes the following actions, A threat of serious bodily injury to a specific individual; B. Specific claims or incidents previously filed by the same offender; C. Filing two (2) or more emergency grievances in a 7-day week period, Monday through Sunday, which are deemed not to be emergencies may result in disciplinary action against the offender for abuse of the grievance system. Disciplinary action may be initiated by the Warden or designee for abuse of the emergency grievance process; D. Obscene, profane, and derogatory language; E. Contains more than one appropriate issue, per grievance; F. The claim or requested remedy changes, or is modified from one level to another; G. More than two Grievant Statement Continuation Forms (DOC 3097) per grievance; And Alteration of the grievance forms or continuation forms. This includes writing more than one line on each line provided on the grievance form. The auditor noted that the list does not include bad faith allegations of sexual abuse. During the onsite review the auditor interviewed the disciplinary hearings officer who confirmed there had been not disciplinary action for bad faith grievances.

The following evidence was analyzed in making the compliance determination

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- Agency Policy (AR) 740 “Offender Grievance Procedure” (effective 04/15/2022)

2. Interviews:

- Random Staff
- Grievance Coordinator
- Disciplinary Hearings Officer

3. Observations

- Offender Management System
- Grievance Process

	Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.52
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115.53**Inmate access to outside confidential support services**

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.53 (a) Nevada Department of Corrections including High Desert State Prison provides inmates with access to outside victim advocates for emotional support service related to sexual abuse. This service is provided by Signs of Hope, Formally known as the Las Vegas Rape Crisis Center. The Agency PREA Manual (pg. 26) states, "The Department provides inmates, (via MOU), information for emotional support services on sexual abuse and how to access outside victim advocates through use of posters, flyers and handouts that includes the mailing address and telephone numbers of available, local, State or national victim advocacy and/or rape crisis organizations. a. The communications between inmates and the outside victim advocacy or rape crisis organization is confidential and only available on a need to know basis by IG PMT staff. b. Information about the level of confidentiality of the communication between inmates and the outside advocacy or rape crisis center will be provided to the inmates prior to accessing by the inmate."

During the onsite review the audit observed the intake and orientation process, noting that packets of orientation information, noting that the inmates are provided an Education and Information Sheet that includes both the address and phone number for the Las Vegas Rape Crisis Center. The auditor also noted during the onsite review that this same information is provided in a poster format near the phones.

The auditor spoke with a representative from Signs of Hope who verified the extent of the services provided including emotional support services and advocacy for victims of sexual abuse. Interviews with random adults in custody and adults in custody who reported sexual abuse were inconclusive as few individuals noted they were familiar with the information. Staff at Signs of Hope stated that there was a good partnership with the High Desert State Prison , although interaction had been limited in the past year due to COVID-19. During the onsite review the auditor observed posters with the advocacy contact information provided including telephone contact information.

DOC is committed to providing inmates with avenues to seek assistance. Below are additional resources:

Just Detention International Headquarters

3325 Wilshire Blvd., Suite 340

Los Angeles, CA 90010

(213) 384-1400

info@justdetention.org

Telephone calls and mail with community-based advocacy centers is considered privileged communication and will be handled similar to legal calls/official mail. “

115.53 (b) The agency reports that the population is provided confidential communications with advocacy groups and information related to the confidentiality of those conversations. The agency Administrative Regulations Glossary effective 09/11/2020 Privileged Correspondence, noting “Privileged Correspondence: Mail between an inmate and the following person(s): (1) State and local elected officials; (2) State officials appointed by the Governor; (3) Attorney listed with a State Bar Association, a recognized legal assistance agency, or an attorney representative; (4) Diplomatic personnel; (5) The Rape Crisis Center (RCC); (6) Sexual Assault Support Services (SASS); and (7) communication deemed privileged through a court order.”

115.53 (c) The Nevada Department of Corrections, High Desert State Prison and Signs of Hope do not presently maintain a current Memorandum of Understanding. The agency PREA Coordinator noted that, “the State of Nevada has one community service provider for confidential emotional support services. The agency has re-established a relationship with Signs of Hope, formally known as The Las Vegas Rape Crisis Center. The contract agreement is under revision with both parties agreeing to continue a collaborative effort ensuring ongoing emotional support services are provided for offender victims of sexual abuse and incarcerated survivors of sexual victimization.” The auditor noted that there was a pre-existing agreement with Signs of Hope under the name Las Vegas Rape Crisis Center. Representatives from Signs of Hope confirm the previous MOU and relationship.

The auditor was provided a draft memo and correspondence with Signs of Hope personnel demonstrating the attempt to enter into a new agreement. This was also reiterated from personnel at Signs of Hope. The draft agreement prefaces with, “The purpose of the MOU is to define the roles and responsibilities of each entity regarding NDOC duty to provide Emotional Support Services Related to Sexual Abuse, and Victim Advocate Services. The intent of this MOU is to provide offenders with Emotional Support Services Related to sexual Abuse in accordance with the Prison Rape Elimination Act (PREA), Title 28 Code of Federal Regulations, 115.53 (a), and to provide Victim Advocate Services in accordance with PREA Federal Standards 115.21 (d) and 115.21 (e)...”

The MOU outlines access and communication consistent with the standard, noting NDOC will, “Ensure facility protocols enable reasonable telephonic and written communication for emotional support services between offenders and SOH. Provide offenders with access to the SOH’s crisis hotline, at no cost to survivors, through the facility phone system. This access will be provided regardless of when and where the abuse occurred, or whether it was reported to law enforcement. Phone calls to the crisis line will not be recorded, listened to, or monitored by NDOC.”

The following evidence was analyzed in making the compliance determination

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy 421 “Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination” (effective 01/14/2016)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- NDOC AR Glossary
- Email Communication and Draft MOU.

2. Interviews:

- Random Staff
- Random Sample of Inmates
- Inmates who reported sexual abuse

3. Observations

- Intake and Orientation
- Area Postings
- Phone Test

Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.53

115.54	Third-party reporting
	<p data-bbox="256 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 340 1465 665">115.54 (a) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.09 (page 4) states, “Inmates, visitors, inmate family members or associates, and other community members can privately report sexual abuse or sexual harassment, retaliation by other inmates or staff for reporting sexual abuse or sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.” The agency provides third party reporting information directly on their website at</p> <p data-bbox="256 705 1265 779">https://doc.nv.gov/About/NDOC_Office_of_the_Inspector_General/PREA_Management_Division/</p> <p data-bbox="256 819 1453 1016">The page provides opportunity to file a complaint including anonymous 3rd party complaints, The page provides contact information with addresses, email and phone numbers to the Office of the Inspector General. The page also includes links to the State of Nevada Attorney General, Bureau of Justice Assistance and Just Detention International.</p> <p data-bbox="256 1057 1453 1341">As part of the interviews with the inmates, they were asked, “Can you make reports of sexual abuse or sexual harassment either in person or in writing? “If they responded “YES”, they were asked, “can someone else (for example, a friend or relative) make the report for you so that you do not have to be named?” During the interviews the population overwhelmingly were aware that that they could have somebody else report the allegation for them and that they could report a PREA allegation for another inmate.</p> <p data-bbox="256 1382 1465 1541">Prior to the onsite review the auditor successfully tested the hotline for 3rd parties to make a complaint. During the onsite review the auditor noted that the information was also made available in the orientation handouts and the posters located in the living units.</p> <p data-bbox="256 1581 1374 1615">The following evidence was analyzed in making the compliance determination:</p> <ol data-bbox="256 1655 1453 2024" style="list-style-type: none"> <li data-bbox="256 1655 1453 1957">1. Documents: (Policies, directives, forms, files, records, etc.) <ul data-bbox="331 1756 1453 1957" style="list-style-type: none"> <li data-bbox="331 1756 1453 1830">• Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016) <li data-bbox="331 1839 552 1872">• PREA Posters <li data-bbox="331 1881 691 1915">• PREA Visiting Pamphlets <li data-bbox="331 1924 572 1957">• NDOC Website <li data-bbox="256 1995 448 2024">2. Interviews:

- Random Staff
- Random Inmates

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.54

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.61 (a) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.05 (page 2) provides the provision language in that, “Any employee, contractor, or volunteer who has any knowledge, suspicion, information or becomes aware of any alleged act of sexual abuse or sexual harassment by another employee, contractor, or volunteer is required to immediately report the knowledge, suspicion, or information to his or her immediate supervisor....” Section 421.01 provides language specific to retaliation, noting, “The Department prohibits retaliation against any person because of his/her involvement in the reporting or investigation of a complaint.” Section 421.05 states, “Any employee shall immediately report any other employee's neglect or violation of responsibilities that may have contributed to an incident of sexual abuse, sexual harassment or retaliation.”</p> <p>Reporting responsibilities are reiterated in Administrative Regulation 332 “Employee Reporting Responsibilities” section 332.01 (pages 1-2) states that, “Employees will make timely notifications to their supervisors, using the appropriate chain of command, concerning incidents, activities or events of immediate interest or concern within the jurisdiction of, or which impacts the Department and for which the employee has knowledge. Such incidents, activities or events include but are not limited to: Security Breaches; Unusual incidents....PREA related occurrences or allegations of such...” The HDSP operational procedure</p> <p>Interviews with random staff confirmed an understanding of their requirement to immediately report any information regarding sexual abuse, harassment or retaliation. The training provided in §115.31 also provides direction for the staff members to direction for reporting information as required by this policy.</p> <p>115.61 (b) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.05 (pg. 2) provides confidentiality requirements in that, “The information that the employee, contractor, or volunteer reports is confidential and must not be disseminated outside the need and right to know.” Section 421.17 (pg. 9) further provides that, “All case records associated with claims of staff sexual abuse, sexual harassment, inmate sexual abuse or any attempt thereof including written reports, investigation reports, evidence, inmate information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are confidential. Any violation of confidentiality regulations and procedures will result in disciplinary action.” Random staff who were interviewed confirmed the understanding the confidentiality requirements.</p> <p>115.61 (c) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.05 (pg. 5) states in part that, “... the medical division for the Department and each institution/facility</p>

will establish confidential medical procedures for reports of possible PREA related incidents. In accordance with Department of Justice information related to PREA, any investigative or PREA audit team member has a need and right to medical information, reports and unusual occurrence information during the course of authorized Department activities..” HDSP Operational Procedure (OP) 670 “Medical Standards for PREA,” (pg. 2) states that, “All medical and mental health practitioners will notify all victims of alleged sexual abuse or harassment that they have a legal obligation to report the incident. This notification is to be made to the victim at the onset of treatment and the victim shall be notified that there are limitations of confidentiality” The policy further requires, “All medical and mental health practitioners shall obtain informed consent utilizing NDOC form 2548 from the victim before reporting any information about any prior victimization that did not occur in a confinement setting unless the victim is under the age of 18”. During the onsite review, the auditor reviewed completed samples of these forms.

115.61 (d) High Desert State Prison does not house youthful offender (individuals under the age of 18). Specific to vulnerable adults, The agency reports that all allegations of sexual abuse are reported to the inspector generals office for investigation by commissioned law enforcement.

115.61 (e) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.05 (page 2) mandates staff reporting in that, “All institutional/facility allegations of sexual abuse and sexual harassment, including third-party and anonymous reports of allegations must be reported to the CM or designated employee. All institutional/facility allegations of sexual abuse and sexual harassment will result in a Nevada Offender Tracking Information System (NOTIS) incident report (IR)..” The local operating procedure reiterates the directive above and provides additional guidelines, “Reports can be received through anonymous correspondences (i.e. letters, Inmate Request Forms, etc.) and third party reporting and shall be provided the same attention as if the staff member received the information through more conventional means. Any staff member who receives a verbal or written report of a sexual assault or any attempt thereof, will immediately report the information as noted above. Supervisors are required to promptly document any verbal reports they receive. Staff members will complete a staff report (DOC 028). Supervisors will submit supervisor report (DOC O 19) upon completion of all staff reports.” Interviews with random staff confirmed an understanding of the requirements to accept and document all reports. The warden confirmed the requirements to review and investigate allegations regardless of the source.

The following evidence was analyzed in making the compliance determination

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/

22/2021)

- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- HDSP Operational Procedure 670 "Medical Standards for PREA," (effective 02/11/2019)
- NDOC Disclosure Form 2548 (including completed samples)

2. Interviews:

- Warden
- Agency PREA Coordinator
- Random Staff
- Medical and Mental Health Staff

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.61

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.62 (a) HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, section 421.03 (page 5) states that, “When NDOC learns that an inmate is subject to a substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate.” This directive mirrors the requirement of the standard. The facility reported that there were no instances in which the facility determined that an individual was at risk to a substantial risk of imminent sexual abuse.</p> <p>In all random staff interviews the random staff confirmed they would take action “immediately,” there was no indication of delay. Actions noted varied from separation, observation, conversation and notification. During the interview with the agency head, he indicated immediate action to make sure the adult in custody is safe. During the interview with the warden, when asked, “When you learn that an inmate is subject to a substantial risk of imminent sexual abuse what protective action does the facility take?” He noted that the facility takes immediate action to keep the victims safe which may administrative housing albeit as a last resort.</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> 1. Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016) 2. HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021) 2. Interviews: <ul style="list-style-type: none"> • Agency Head/designee • Warden • Random Staff <p>Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.62</p>

115.63	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>115.63 (a-c): HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, section 421.11 (pg. 11) states that, “High Desert State Prison is responsible that upon receipt of allegation that an inmate was sexually abused while confined at another institution, the shift supervisor that received the allegation shall notify the Warden and initiate an incident report in NOTIS. Notifications shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The Warden shall document that they have received such notification.” The policy also requires that, “The Warden shall contact the head of the of the facility in which the incident occurred and shall document in NOTIS that High Desert State Prison that it has provided such notification within 72 hours of receiving the allegation.</p> <p>The NDOC uses Memo template for standardize notifications from its wardens (facility heads). The form is used in providing allegation notifications to other jurisdictions. The form identifies to the receiving facility that the notification is being provided per “This letter is an official notification to your institution as required by the PREA policy.” The memo provides a summary of the report including the date and location the abuse occurred. The notification provides contact information for the Warden. The template is sent from the warden to the head of the receiving facility. The facility reported that there were 5 allegations received that occurred at other facilities and each was reported accordingly, the auditor was provided sample documentation of memo that were compliant with the standard.</p> <p>115.63 (d): The facility policy does not provide separate language for receipt of complaints from other facility heads, however, Investigation of complaints provided by outside agencies would be consistent with § 115.61 in that “All institutional/facility allegations of sexual abuse and sexual harassment, including third-party and anonymous reports of allegations must be reported to the CM or designated employee.” During the onsite review the facility warden was interviewed and confirmed that an allegation received from another agency would be investigated just as if it had originated at the facility. The facility reported that there were no such notifications were received during this review period, however past notifications were each investigated or had previously been investigated by the facility.</p> <p>The following evidence was analyzed in making the compliance determination</p> <p>1. Documents: (Policies, directives, forms, files, records, etc.)</p> <ul style="list-style-type: none"> • Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016) • Sample Notifications

2. Interviews:

- Warden
- PREA compliance manager

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.63

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.64 (a) HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, section 421.03(pg. 3) states, “Any staff member who becomes aware of, or reasonably suspects that another staff member, contractor; or volunteer is involved in an alleged act of sexual abuse, sexual harassment or unauthorized relationship with an inmate, is required to immediately report such knowledge or suspicion to their immediate supervisor, another supervisor, Warden, or Inspector General.” The policy continues in section 421.09, “Any incidents of sexual assault shall be reported immediately. However, if the incident is reported within the first 96 hours of occurrence the following procedure applies: Notify supervisor ; Notify Warden, PCM and PREA Coordinator; Ensure the victim is safe and kept separated from the aggressor. Victim and suspect will not have any contact with one another either visually or audibly. The suspect shall not be placed or housed, even temporarily, in the same area as the victim to ensure they have no contact at any time; Escort the victim to the infirmary; Collect clothing involved with incident and provide an orange jumpsuit to the victim inmate. Ensure that each item of clothing is bagged separately in brown paper bags and booked into evidence.” The policy protects evidence by making request of the victims and requirements of the suspect as follows, “Request that the victim does not wash, brush their teeth, urinate, defecate, drink, or eat as this can compromise evidence; Ensure the suspect does not wash, brush their teeth, urinate, defecate, drink, or eat as this can compromise evidence.”</p> <p>The facility reported in the OAS that during the previous 12 months, 45 allegations were received that an inmate was sexually abused. During the same 12 months there were 2 instances first responders being notified in a time period that allowed for the collection of evidence. Reviews of requested documentation indicate that staff at HDSP do follow the established policies when responding to PREA incidents.</p> <p>During the onsite review, random staff, were asked, “If you are the first person to be alerted that an inmate has allegedly been the victim of sexual abuse, what is your responsibility in that situation?” The interviewed staff consistently indicated the need to separate the victim and make notification. Similar responses were provided to five additional staff (security and non-security) were asked, “Can you describe the actions you take as a first responder to an allegation of sexual abuse?” The responders were able to confirm the initial steps including separating the victim from abuser, notification and preservation of the crime scene/evidence. The auditor noted that medical and mental health response is at the direction of the OIC and is included in the checklist for response.</p> <p>115.64 (b) The agency notes that HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, section 421.09 does not differentiate between security and non-security duties Non-security staff are required to report any incidents of sexual assault shall be reported immediately. However, if the incident is reported within the</p>

first 96 hours of occurrence the following procedure applies: Notify supervisor ; Notify Warden, PCM and PREA Coordinator; Ensure the victim is safe and kept separated from the aggressor. Victim and suspect will not have any contact with one another either visually or audibly. Page 34 of the Agency PREA Manual provides additional direction for non-custody staff stating, "If the first staff responder is not a custody staff member, the first responder shall request

the alleged victim not to take any actions that could destroy physical evidence, and then immediately notify the first custody staff member available." All other steps remain the same including the requirement to Ensure the victim is safe and kept separated from the aggressor." Non-security staff who were interviewed confirmed their requirements in first responder and random staff interviews. Training provided to all staff in § 115.31 did not differentiate roles between security and non-security staff.

The following evidence was analyzed in making the compliance determination

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 "Prison Rape Elimination Act-PREA " (effective 01/14/2016)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- Training rosters for § 115.31

2. Interviews:

- Random Staff
- Security staff first responders
- Non security first responders
- Inmates who reported sexual abuse

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.64

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.65 (a) The High Desert State Prison has developed a written plan to coordinate actions taken in response to an incident of sexual abuse. This plan is outlined in HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, section 421.09. The plan is local to the facility and operationalizes elements of Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act” effective 01/14/2016. The plan provides instruction for when an inmate reports sexual abuse or sexual harassment. The plan outlines the responsibilities of the Shift Supervisor and includes a checklist and flow chart based on the event. The information provides specific steps to separate the victim as well as protecting and collecting evidence and making notifications to medical, mental health, management staff and law enforcement (Inspector Generals Office). The warden confirmed the presence and knowledge of the facility’s plan for response. Interviews with first responders (custody and non-custody) indicated that staff in general understood their roles and requirements with initial response.</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>1. Documents: (Policies, directives, forms, files, records, etc.)</p> <ul style="list-style-type: none"> • Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016) • HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021) • NDOC Prison Rape Elimination Act Manual (effective 04/04/2016) <p>2. Interviews:</p> <ul style="list-style-type: none"> • Warden • First Responders <p>Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.65</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.66 (a-b) During the State of Nevada 2019 Legislative Session, the Governor signed collective bargaining into law for State of Nevada employees. Negotiations were completed and the State of Nevada and America Federation of State, County, & Municipal Employees (AFSCME), Local 4041 Collective Bargaining Agreement is effective July 1, 2021 - June 30, 2023.</p> <p>The auditor was provided and a copy of the Collective Bargaining Agreement. During the review the auditor noted that page 21 of the agreement provides management rights to reassign personnel, noting, “The Employer has the right to reassign employees to post assignments as required due to operational need and cross-training.”</p> <p>Page 33 of the agreement also states, “The Employer has the right to place an employee on paid Administrative Leave.”</p> <p>The Employer and the Union agree that, except in cases of serious violations of law, regulations, or policy, a progressive disciplinary model will be used for discipline of bargaining unit employees and may be practiced by less severe measures being applied first, followed by progressively more severe measures if the employee's conduct or performance deficits continue. The Employer may take the following progressive disciplinary actions against any employee, in order of severity:</p> <ul style="list-style-type: none"> a) Oral Warning b) Written Reprimand c) Suspension Without Pay d) Demotion e) Dismissal from Service <p>The Employer may skip any progressive disciplinary level if it is determined that the seriousness of a first offense warrants such action.</p> <p>The auditor noted that the agreements are consistent with Standards 115.72 and 115.76.</p> <p>The following evidence was analyzed in making the compliance determination</p>

1. Documents: (Policies, directives, forms, files, records, etc.)

- Collective Bargaining Agreement for State of Nevada & American Federation of State, County, & Municipal Employees -AFL-CIO (AFSCME Local 4041) 2021-2023

2. Interviews:

- Agency Head/Designee

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.66

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.67 (a) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.13 (page 7) states “No staff member or inmate who reports sexual abuse or sexual harassment or cooperates with sexual abuse or sexual harassment investigations will be subjected to any form of retaliation from other staff members or inmates of the Department.”</p> <p>The local operating procedure notes that the facility PREA compliance manager is responsible for retaliation monitoring, this was confirmed with him during the interview process.</p> <p>115.67 (b-c) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.13 (page 7) states, “For at least 90 days following a report of sexual abuse, the institution or facility shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and/or of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by other inmates or staff. Any such action shall be immediately remedied.; Signs of possible retaliation to be monitored for include but are not limited to any inmate disciplinary reports not supported by proper reporting, housing, or program changes, or negative performance reviews or reassignments of staff.” The facility reported that there were no acts of retaliation noted for the previous 12 months. The warden confirmed that actions would be taken to prevent and address any retaliation. The director’s discussed the various measures to monitor and address retaliation for alleged victims. Both the warden and the PREA compliance manager confirmed that monitoring would continue for at least 90 days unless it was warranted to maintain it longer or end it sooner if the investigation was determined to be unfounded. During the interviews with inmates that reported sexual abuse, they indicated they felt they were protected. It was noted retaliation monitoring was being delayed and not beginning following a report a sexual abuse, but rather following the receipt of the completion of the investigation. It was noted that this issue was found in the previous audit as well. The facility was unable to provide documentation of timely retaliation monitoring prior to the interim report.</p> <p>115.67 (d) HDSP Operating Procedure (OP) 421 “Prison Rape Elimination Act- PREA”, section 421.03 (page 4) states, “Once per month the PCM/Designee will meet with all inmates who reported sexual abuse or reported retaliation that resulted from reporting an incident of sexual abuse or sexual harassment.. The PREA compliance manger is responsible for retaliation monitoring and noted that periodic status checks are completed by him. It was noted that since the transition of duties for the current PCM that there was some confusion in when the retaliation monitoring begins. Retaliation Monitoring should begin when the allegation is received. This issue was also noted in the previous audit, as such corrective action will be required.</p>

115.67 (e) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.13 (page 7) requires, "If any institutional or facility staff member learns of or receives information that a person who cooperated with an investigation, other than an inmate or staff reporter, has expressed a fear of retaliation, the Inspector General's Office will be immediately notified; The matter will be immediately reviewed by Supervisor or PREA management staff of the Inspector General's Office and contact made with the person by the assigned staff member of the Inspector General's Office.; Appropriate measures will be taken by the assigned investigator, including, follow up with the person who expressed the fear and if applicable referral to an outside law enforcement body or advocacy group." Both the agency head designee and the warden confirmed that steps would be taken to monitor and address any concerns raised by and individual who cooperates with an investigation.

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 "Prison Rape Elimination Act-PREA " (effective 01/14/2016)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)

2. Interviews:

- Agency Director
- Warden
- PREA Compliance Manager
- Staff Responsible for Retaliation Monitoring
- Inmates who reported sexual abuse

A review of the evidence provided by the facility, as selected by the auditor indicates that retaliation monitoring was not beginning or documented in a timely manner, Monitoring should begin at the time of the allegation and continue for at least 90 days unless a finding of unfounded is determined prior to that time frame.

The agency provided updated documentation indicating retaliation monitoring for 15 cases in 2022 beginning in a timely manner and continuing for the minimum of 90 days unless a finding of unfounded determined prior to the 90 day timeframe.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.68 (a) NDOC Administrative Regulation (AR) 573, “Prison Rape Elimination Act and Screening, section 573.04 (Pg. 4) duplicates the language from the standard and states, “Inmates at high risk for sexual victimization shall not be placed in administrative housing unless an assessment of all available alternatives determines that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in administrative housing for less than 24 hours while completing the assessment.” The facility notes that no inmates were placed in involuntary segregated housing due to high risk of victimization during the preceding 12 months. The warden confirmed this during the interview process. Interviews with staff who supervise segregation also noted no individuals placed in segregation housing as victims, stating the facility looks for the least impact on victims. During the auditor’s review of investigation files, it was noted that there were no indications of victims placed in administrative segregation.</p> <p>Additional information provided in standard 115.43</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>1. Documents: (Policies, directives, forms, files, records, etc.)</p> <ul style="list-style-type: none"> • Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016) • Agency Policy (AR) 573 “Prison Rape Elimination Act and Classification ” (effective 03/01/2018) <p>2. Interviews:</p> <ul style="list-style-type: none"> • Warden • Staff who supervise inmates in segregation <p>Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.68</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.71 (a) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.12 (pg. 5) states, “NDOC Office of the Inspector General will investigate all allegations of staff on inmate sexual abuse, sexual harassment and inmate on inmate sexual abuse.” The Agency PREA Manual states that, “When receiving allegations of sexual abuse and sexual harassment investigations shall be done promptly, thoroughly and objectively for all allegation including third party and anonymous reports. The local operating procedure for 421 also provides that, “Reports shall be accepted verbally, in writing, anonymously and from third parties. Reports can be received through anonymous correspondences (i.e. letters, Inmate Request Forms, etc.) and third party reporting and shall be provided the same attention as if the staff member received the information through more conventional means. Any staff member who receives a verbal or written report of a sexual assault or any attempt thereof, will immediately report the information as noted above. Supervisors are required to promptly document any verbal reports they receive. Staff members will complete a staff report (DOC 028). Supervisors will submit supervisor report (DOC O 19) upon completion of all staff reports. When asked about how long it took to initiate an investigation, the investigators confirmed that the inmates are protected by the facility immediately, and that the investigation will begin shortly thereafter.</p> <p>115.71 (b) (HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act- PREA, section 421.12 (pg. 11-12) which states, “NDOC Office of the Inspector General will investigate all allegations of staff on inmate sexual abuse, sexual harassment and inmate on inmate sexual abuse.” Section 421.05 further provides, “The Inspector General shall ensure that investigative and other staff members assigned to investigate any allegation related to PREA has received training in conducting such investigations in confinement settings. Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.” The policy adopts the requirement of the standard for specialized training for investigators. As part of the process the audit team interviewed a facility investigator and investigators from the Inspector Generals Office, each investigator confirmed completion of the required training and recalled element of the training including Miranda, Garrity, evidence collection, and interviewing victims. It was noted that facility investigators only conduct inmate on inmate sexual harassment cases all other cases are investigated by the Inspector Generals Office.</p> <p>The facility reported that investigators completed the NIC training “PREA: Investigation Sexual Abuse in a Confinement Setting.” The auditor has reviewed the curriculum for this training from the PREA Resource Website which notes in part, “The curriculum.... includes content on PREA standards relating to</p>

investigations;.....proper use of Miranda and Garrity warnings; trauma and victim response; processes of a forensic medical exam; first-response best practices; evidence-collection best practices in a confinement setting; techniques for interviewing male, female,....report writing techniques; and information on what prosecutors consider when determining whether to prosecute sexual abuse cases.”

115.71 (c) The agency uses a report template that includes a checklist that directs a review of evidence including; if the subject had prior allegations of sexual abuse or sexual harassment; witnesses and evidence collection (including video, phone recordings, and documents). As part of the process investigative staff were interviewed. The staff confirmed that they would take steps by reviewing the reports, and gathering all evidence including video, phone calls, documents, etc. The investigators noted they would review previous allegations, develop questions and interview witnesses, the victim and the alleged perpetrator. The auditor reviewed completed investigation reports that confirmed compliance with the policy and provision.

115.71 (e) The Agency PREA Manual requires states, “The assigned investigator will outline in his or her notes related to the investigation the credibility and reliability for the interviewed parties that the investigator places for or against the interviewed party;.” As part of the review the auditor selected 14 cases. The selected cases demonstrated credibility assessments based on known facts and not the inmates present status. During the interviews with investigators they confirmed that credibility is assessed individually based on known facts as well as an individuals history with corroborating facts and not on the status as an inmate. When asked, “Would you, under any circumstances, require an inmate who alleges sexual abuse to submit to a polygraph examination or truth-telling device as a condition for proceeding with an investigation?” The investigators consistently stated no.

115.71 (f) The agency reports that administrative investigations do include an effort to determine whether staff actions or failures to act contributed to the abuse. The agency also notes that reports are in written format; include a description of the physical and testimonial evidence; and attaches copies of all documentary evidence where feasible. The auditor requested and received samples of written investigation reports. Upon review, these reports include descriptions of evidence both physical and testimonial. The report template also includes a checklist to review if the subject had prior allegations of sexual abuse or sexual harassment, witnesses and evidence collection (including video, phone recordings, and documents). Upon discovery NDOC requires Any employee shall immediately report any other employee's neglect or violation of responsibilities that may have contributed to an incident of sexual abuse, sexual harassment or retaliation.

115.71 (g)(HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.12 (pg. 11-12) which states, “The investigators assigned to investigate allegations of staff on inmate sexual abuse, sexual harassment and inmate on inmate sexual abuse will provide the final investigative report to the mandatory sexual abuse incident review panel at the conclusion of each of the investigations,.” This was confirmed by the warden during his interview. This was also confirmed in interviews

with the PREA coordinator and PREA compliance manager.

115.71 (d/h) The facility reports that, substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. The Agency PREA Manual states, "IG Criminal Investigators will refer all substantiated criminal violations to the Attorney General's Office pursuant to AR 708 [referral for criminal prosecution]. On a case by case basis referrals may be submitted to the District Attorney's Office in the county where the crime occurred. During interviews with investigative staff, when asked, "When do you refer cases for prosecution?" The investigators confirmed that referrals would be made by when they appeared to be criminal with sufficient evidence to prosecute.

115.71 (i) The Agency PREA Manual requires, "All completed investigations and their applicable reports, documentation and written information will be retained by the IG PMT division of the Department as long as the alleged abuser is under the control of the Department plus five (5) years." The agency uploads all reports into the Electronic Management System. During to the onsite review, the PREA compliance manager demonstrated the records retention for the auditor who noted that older reports were present, the system does not purge any reports.

115.71 (j) HDSP Operating Procedure (OP) 421 "Prison Rape Elimination Act- PREA", section 421.12 (pg.11)States, "The departure of the alleged abuser or victim from the employment of the Department or control of the institution shall not provide a basis of terminating the investigation." During the interviews with investigators they were asked, "How do you proceed when a staff member alleged to have committed sexual abuse terminates employment prior to a completed investigation into his/her conduct?" The investigators each stated that the investigation continues through the process regardless of release or discharge.

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 "Prison Rape Elimination Act-PREA " (effective 01/14/2016)
- Agency Policy (AR) 457 "Investigations " (effective 10/15/2013)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- HDSP Operational Procedure 670 "Medical Standards for PREA," (effective 02/11/2019)

2. Interviews:

- Investigators
- Agency PREA Coordinator

- PREA Compliance Manager

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.71

115.72	<p>Evidentiary standard for administrative investigations</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>115.72 (a) The Agency PREA Manual (pg. 30) states, “The Department shall impose no standard higher than a preponderance of the evidence in determining whether the allegation (s) of sexual abuse is substantiated.” The auditor noted that the policy language mirrors the language found in the standard.</p> <p>As noted in § 115.34 investigators completed the NIC Training for investigators. The NIC training for investigators (Section 9; Determination of Findings) provides the following “Per PREA standard 115.72, the burden of proof to sustain an internal (administrative) case is that the preponderance of evidence must suggest that the event occurred. This means that, based on the evidence, it is more likely that something is true or has occurred than not.” During interviews with investigative staff, all interviewees understood the standard of evidence as a preponderance. As part of the review the auditor reviewed 14 investigations, each of the investigations supported the determinations by the investigators.</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>1. Documents: (Policies, directives, forms, files, records, etc.)</p> <ul style="list-style-type: none"> • NDOC Prison Rape Elimination Act Manual (effective 04/04/2016) • Investigation Files <p>2. Interviews:</p> <ul style="list-style-type: none"> • Investigators • Agency PREA Coordinator • PREA Compliance Manager <p>Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.72</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 262 558 293">Auditor Discussion</p> <p data-bbox="256 338 1481 622">115.73 (a) and (e) The agency reports that notification is provided by the PREA compliance manager to an inmate following an allegation so sexual abuse. The requirement is documented in NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.12 (page 6), “Following an investigation into an inmate's allegation that he or she suffered sexual abuse in the Department, the inmate will be informed that the investigation has been closed as substantiated, unsubstantiated, or unfounded.”</p> <p data-bbox="256 663 1481 1070">The facility reported that there were 55 investigations (includes both abuse and harassment) initiated by the agency in the previous 12 months, with 24 notifications provided to the alleged victims The facility noted 31 open investigations. The auditor reviewed samples of these notifications as part of the evidence review. During the onsite review the warden confirmed that notifications of the investigation outcome are provided to the alleged victim in each case. During the interview process investigative staff stated that inmates are notified of the outcome; however, notification is made by the PREA compliance manager not by investigators. The PREA compliance manager stated that he provides notification to the alleged victim and maintains a after being notified by the inspector general’s office of the finding.</p> <p data-bbox="256 1081 1449 1279">Interviews with alleged victims are inconsistent noting 3 out of 4 indicated they received verbal notification of the outcome; it was noted that they don’t receive the response in writing. The facility provided sample documentation on form DOC 2095 Offender PREA Report Notification From. indicating notification with the victims signature or a witness signature if the</p> <p data-bbox="256 1319 1457 1395">115.73 (b) The agency is responsible for conducting it’s own investigations through the inspector generals office.</p> <p data-bbox="256 1435 1465 1968">115.73 (c-d) The facility states that following an inmate’s allegation that a staff member or inmate has committed sexual abuse against an inmate, the agency/ facility informs the alleged victim of changes to the staff members posting, employment or the status of criminal charges and conviction as applicable. The agency provides this as a directive in AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.12 (page 6), which states, “Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, and the allegation ws shown to be substantiated or unsubstantiated, the inmate will be notified: The staff member is no longer posted within the inmate's unit; The staff member is no longer employed at the facility; The staff member has been indicted on a charge related to sexual abuse within the Department; or The Department learns that the staff member has been convicted on a charge related to sexual abuse within the Department.”</p> <p data-bbox="256 2009 1473 2085">The policy also provides similar language in regard to alleged inmate abusers, noting, “Following an inmate's allegation that he or she has been sexually abuse by another</p>

inmate, the Department shall subsequently inform the alleged victim whenever; The alleged abuser has been indicted on a charge related to sexual abuse within the Department; or The alleged abuser has been convicted of a charge related to sexual abuse within the Department. It was noted that the policy provides the essential language directly from the standard. The notification form used by the agency provides for each of these updates related to accused staff. During the evidence review the auditor reviewed samples of notifications, the notification form, that provided an outcome section with date and initials, indicating when each of the above noted actions take place.

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 "Prison Rape Elimination Act-PREA " (effective 01/14/2016)
- Agency Policy (AR) 457 "Investigations " (effective 10/15/2013)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- Investigation files.

2. Interviews:

- Warden
- Investigative Staff
- PREA Compliance Manager
- Inmates who reported sexual abuse

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.73

115.76	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>115.76 (a) (HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.14 (pg. 13-14) states, "Staff members who engage in sexual misconduct may be referred for prosecution under NRS 212 .18 8 and are subject to internal disciplinary measures up to and including termination as defined in Prohibitions and Penalties." The agency reports that there were no substantiated findings of staff violating agency sexual abuse or sexual harassment policies.</p> <p>115.76 (b) (NDOC) Administrative Regulation (AR) 339, Code of Ethics, Employee Conduct, Prohibitions and Penalties, (pg. 16) states, "Custodial Sexual Misconduct is any behavior or act of a sexual nature, either consensual or non-consensual, directed toward an inmate by an employee, volunteer, contractor, official visitor, or agency representative. " is considered a class 5 offense with the presumptive discipline as dismissal. The facility reports there have been no instances of staff from the facility violating agency policies on sexual abuse in the previous 12 months.</p> <p>115.76 (c) (HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.14 (pg. 13-14) states, "Staff members who engage in sexual misconduct may be referred for prosecution under NRS 212 .18 8 and are subject to internal disciplinary measures up to and including termination as defined in Prohibitions and Penalties.." (NDOC) Administrative Regulation (AR) 339, Code of Ethics, Employee Conduct, Prohibitions and Penalties, (pg. 16) provides for a range of discipline based on the severity of the incidents. The facility reports there have been no instances of staff from the facility violating agency policies on sexual abuse or sexual harassment in the previous 12 months.</p> <p>115.76 (d) (HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.14 (pg. 13-14) states, "All terminations for violations of Departmental sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies and to any relevant licensing bodies." Interviews with investigative staff confirmed that even if staff resigned, the investigation into sexual abuse allegations would continue.</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (Policies, directives, forms, files, records, etc.) <ul style="list-style-type: none"> • Agency Policy (AR) 421 "Prison Rape Elimination Act-PREA " (effective 01/14/2016) • Agency Policy (AR) 339, Code of Ethics, Employee Conduct, Prohibitions and Penalties (Effective 05/19/2015) 2. Interviews:

- Investigators

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.76

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.77(a): (HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.15 (pg.14) states, “Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and shall be reported to relevant licensing bodies.” The facility reported that there were no investigations related to misconduct by a volunteer or contractor or during the previous 12 months.</p> <p>115.77(b): (HDSP) Operational Procedure (OP) 421, Prison Rape Elimination Act-PREA, section 421.15 (pg.14) states, “Any contractor or volunteer who is suspected of engaging in sexual abuse shall be reported to the Warden, Associate Warden and or Supervisor promptly. The Warden will take measures to ensure the contractor or volunteer is denied access to the institution until the investigation is completed. The institution shall take appropriate remedial measures and shall consider whether to prohibit further contact with inmates.” During the interview, the warden confirmed that actions could include termination of facility access during any investigation from a PREA-related allegation. The auditor noted that the policy requirements are consistent with the standard.</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (Policies, directives, forms, files, records, etc.) <ul style="list-style-type: none"> • Agency Policy (OP) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016) 2. Interviews: <ul style="list-style-type: none"> • Warden <p>Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.77</p>

115.78	Disciplinary sanctions for inmates
	<p data-bbox="256 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 340 1469 1126">115.78 (a) The facility reports that inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse as well as following a criminal finding of guilt for inmate on inmate sexual abuse. NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, provides the authority and direction for the disciplinary process as well as identifying the rules of conduct for the inmate population. section 421.16 (page 8) states, "Inmates shall be subject to disciplinary sanctions pursuant to Administrative Regulation 707, Inmate Disciplinary Process, following a finding that the inmate engaged in inmate-on-inmate sexual harassment. In the case(s) of possible criminal activity such as inmate on inmate sexual abuse or inmate consensual sexual activity, the Inspector General's Office and Attorney General's Office will be contacted and the matter reviewed for criminal prosecution referral prior to any Inmate Administrative disciplinary action. After review for possible criminal prosecution referral, inmates shall be subject to administrative disciplinary sanctions." The facility reports that there was one allegation of inmate on inmate sexual abuse in the previous 12 months that resulted in disciplinary action. The auditor reviewed the investigation and subsequent disciplinary action and noted that the findings support this compliance with this standard.</p> <p data-bbox="256 1167 1458 1532">115.78 (b) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.16 (page 8) states, "Sanctions shall be commensurate with the nature and circumstances of the harassment, abuse, or activity committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.." The warden confirmed that sanctions were commensurate with similar offenses. AR 707.2 provides the Disciplinary sanctions chart that provides sanction to remain in a consistent range with similar infraction behavior. The grid provides for 5 separate categories based on seriousness of the offense sanctions for classes A through E.</p> <p data-bbox="256 1572 1442 1856">Pages 8-9 identifies Sexual Assault/Abuse as "MJ19 - Sexual Assault/Sexual Abuse: Subjecting another person to any sexual act or sexual abuse, if the victim does not consent, is coerced into such act by over or implied threats of violence, is unable to consent or refuse, is against their will and/or understanding. Sexual Assault/Sexual Abuse includes any other intentional touching, either directly or through the clothing." And list it as a (Class A) Offense. Cross referencing the offense with the sanction guidelines indicates that the disciplinary action includes:</p> <p data-bbox="256 1897 1437 1968">Up to 60-days Disciplinary Segregation or Austere Housing, but these sanctions will not be consecutive.</p> <p data-bbox="256 2009 636 2042">◇ Class Stat up to 60-days</p>

◇ Loss of Privileges may be imposed consecutive to Disciplinary Segregation but they are not to be served concurrently to Disciplinary Segregation. These sanctions may include:

- o Loss of Outside Recreation for up to 30-days.
- o Loss of Telephone Privileges for up to 90-days.
- o Loss of Inmate Store/Commissary for up to 90-days.
- o Loss of Visiting for up to 60-days.
- o Restitution for loss or damage of property.

The inmate disciplinary process is published on the agency's website.

https://doc.nv.gov/About/Administrative_Regulations/Administrative_Regulations__700_Series/

115.78 (c) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.16 (page 8) states, "The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.." This is reiterated in the Administrative Regulation 707.2 Disciplinary Sanctions which reinforces that, "If an inmate is diagnosed as Seriously Mentally Ill (SMI), or has a medical condition, as determined by a mental health or medical professional, that may have affected his/her behavior, the Disciplinary Hearing Officer is required to follow the procedures outlined in AR 707 prior to a finding of guilt or imposing sanctions." These rules are applied to all conduct rule violations, including but not limited to those related to sexual abuse or sexual harassment. The warden confirmed that an inmate's mental health status would be considered during the hearings process. During the onsite review the auditor interviewed the disciplinary hearings officer, who noted that mental health status is a consideration in the process.

115.78 (d) HDSP does not currently offer sex offender treatment or other forms of therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for abuse. Interviews with the mental health staff affirmed sex offender treatment is not provided. the agency's policy notes, "If the institution or facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. The agency notes that if the programming comes available it would be offered in accordance with the policy and standard.

115.78 (e) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.16 (page 8) states, "The Department may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

115.78 (f) NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.16 (page 9) states, “For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.” The disciplinary hearings officer noted that there were no incidents of individuals being disciplined in the previous 12 months.

115.78 (g) The agency prohibits all sexual activity between inmates as outlined in NDOC Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.16 (page 9) which reads, “The Department prohibits all sexual activity between inmates. The Department may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.”

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- Agency Policy (AR) 457 “Investigations ” (effective 10/15/2013)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- Agency Policy (AR) 707, Offender Disciplinary Process (effective 04/28/2022)
- HDSP Operating Procedure (OP) 421 “Prison Rape Elimination Act- PREA”, section 421.03 (page 4)

2. Interviews:

- Warden
- Disciplinary Officer

Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.78

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 262 560 293">Auditor Discussion</p> <p data-bbox="256 338 1461 584">115.81(a): HDSP reports that all Medical INP 200, Health Care Services provides the requirement that inmates who disclose prior victimization or predation during screening pursuant to § 115.41 will be offered follow-up meetings with medical or mental health within 14 days of the intake screening. The policy states, “All inmates will receive screenings upon initial intake (reception) and upon arrival at each institution the inmate may be transferred to during his or her incarceration.</p> <p data-bbox="256 618 1461 943">The Inmate will be asked if he or she has experienced prior sexual abuse? whether it occurred in an institutional setting, jail, or in the community. If the inmate answers yes, staff will ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within "14 days" of the intake screening.” During the site review the auditor observed the intake and screening process noting that individuals who indicated prior victimization or predation are provided opportunity to meet with mental health. The auditor noted that mental health providers assist with the intake and orientation process meeting with the arrivals on the first day.</p> <p data-bbox="256 981 1474 1144">115.81 (b) Medical INP 200 (pg. 2) provides direction that, “The inmate will be asked if in his past, he has ever sexually abused another individual. If the inmate answers yes, staff will ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.”</p> <p data-bbox="256 1178 1461 1760">For prior victims and predators the information is maintained securely, “A specialized binder will be located and maintained in the medical and mental health areas to identify the inmates in need of this follow-up. During the onsite review with mental health staff they indicated that, they do offer treatment to inmates who have been a victim of sexual abuse or perpetrated a sexual abuse if they request it. Staff who completed risk screenings confirmed that the process for referrals. During the onsite review the compliance manager and screening staff demonstrated the system to the auditor, including the generated notifications. Inmates who disclosed sexual victimization during screening were interviewed as part of the onsite review, those interviewed indicated they were offered mental health services, only one accepted and stated it was provided right away. As part of the review process the auditor reviewed documentation of individuals who responded affirmatively to victimization or predatory questions, this documentation included mental health services being offered and accepted or declined.</p> <p data-bbox="256 1794 1414 1872">115.81 (c) This provision only applies to jails, High Desert State Prison is a state correctional facility.</p> <p data-bbox="256 1906 1474 2074">115.81 (d) Medical INP 200 (pg. 2) states, Any information obtained from the inmate related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management</p>

decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal , State or local law..” During the interview with the agency PREA compliance, he confirmed that the information going into the assessment was confidential and was limited thorough controls within the System.

115.81 (e) Medical INP 200 (pg. 2) states, that, “Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.” Additionally OP 670 (page 2) requires that, “All medical and mental health practitioners will notify all victims of alleged sexual abuse or harassment that they have a legal obligation to report the incident. This notification is to be made to the victim at the onset of treatment and the victim shall be notified that there are limitations of confidentiality. Inmates are required to complete a medical consent and release form DOC 2548 as part of the process.

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- HDSP Operational Procedure 670 “Medical Standards for PREA,” (effective 02/11/2019)
- Local Policy, Medical INP 200

2. Interviews:

- Agency PREA Coordinator
- PREA Compliance Manager
- Staff who complete risk screenings

Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.81

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 262 558 293">Auditor Discussion</p> <p data-bbox="256 338 1468 705">115.82 (a/b) The NDOC reports that inmates received timely, unimpeded access to emergency medical services. (HDSP) Operational Procedure (OP) 670, “Medical Standards for PREA”, (pg. 3) provides the supporting direction and states, in part, “All inmate victims of sexual abuse will receive timely unimpeded access to emergency medical/mental health treatment which will be determined by the health practitioners' professional judgment.” It was noted the HDSP has medical staff on duty 24 hours a day seven days a week. (HDSP) Operational Procedure (OP) 670, “Medical Standards for PREA”, (pg. 3) provides facility guidelines for response to sexual assault noting:</p> <p data-bbox="256 745 1147 777">"When an incident is of an Emergent Nature, medical staff will:</p> <ul data-bbox="331 848 1458 1216" style="list-style-type: none"> • Perform a cursory, visual exam for any signs of injury, without manipulating any of the victims' body parts. • Injuries will be documented by camera and by utilizing NDOC Form 2514 (Unusual Occurrence). • Victims will be offered immediate medical attention for any injuries that require treatment. If SANE exam is requested, treatment can be deferred if it appears it will affect evidence, and the injuries are not life threatening. • Medical staff may assist in the collection of evidence, except for obtaining specimens. <p data-bbox="256 1256 1214 1288">When an incident is of an emergent nature, mental health staff will:</p> <ul data-bbox="331 1359 1278 1435" style="list-style-type: none"> • During normal working hours, mental health staff will provide an immediate consultation with the victim if requested. <p data-bbox="256 1476 1468 1718">After hours, in the absence of mental health personnel, medical staff can provide basic counseling and support until the victim can be seen by mental health personnel." NDOC also noted that, "should the inmate require more extensive treatment for trauma for anything beyond NDOC medical practitioners scope of practice inmates will be transported to a hospital that can provide the emergent care needed."</p> <p data-bbox="256 1758 1430 1955">115.82 (c) (HDSP) Operational Procedure (OP) 670, “Medical Standards for PREA”, (pg. 3) States, “Victims of sexual abuse while incarcerated shall be offered timely information and timely access to emergency sexually transmitted infections, prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.</p> <p data-bbox="256 1995 1466 2072">115.82 (d) (HDSP) Operational Procedure (OP) 670, “Medical Standards for PREA”, (pg. 3) States, “All services provided for the above related treatments shall be free of</p>

charge regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 "Prison Rape Elimination Act-PREA " (effective 01/14/2016)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- HDSP Operational Procedure 670 "Medical Standards for PREA," (effective 02/11/2019)

2. Interviews:

- medical staff and mental health staff
- security and non-security staff first responders

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.82

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.83 (a) The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison. Treatment and mental health services are outlined in (HDSP) Operational Procedure (OP) 670, “Medical Standards for PREA”, (pg. 3) states, “HDSP shall offer medical and mental health follow-up services as appropriate to all inmates who have been victimized in any confinement facility. The follow-up treatment provided will be consistent with the standard community level of care..” During the onsite review medical and mental health staff were interviewed and confirmed that victims of sexual abuse receive treatment and crisis intervention.</p> <p>115.83 (b/c) (HDSP) Operational Procedure (OP) 670, “Medical Standards for PREA”, (pg. 3) states, “The follow-up treatment provided will be consistent with the standard community level of care.” Medical INP 200 further provides that, “The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.” During the onsite review medical and mental health staff were interviewed and confirmed services would include treatment plans, and referrals for continued care if transitioning to the community. During the onsite review medical staff and mental health staff were interviewed. During the interviews the staff confirmed the level of care is consistent with the community level of care.</p> <p>115.83 (d-e) Provisions (d and e) are not applicable, noting that High Desert State Prison is a male facility.</p> <p>115.83 (f) (HDSP) Operational Procedure (OP) 670, “Medical Standards for PREA”, (pg. 3) provides, “Victims of sexual abuse while incarcerated shall be offered timely information and timely access to emergency sexually transmitted infections, prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.” During interviews medical staff confirmed that inmates will be provided testing and treatment.</p> <p>115.83 (g) (HDSP) Operational Procedure (OP) 670, “Medical Standards for PREA”, (pg. 3) states, “All services provided for the above related treatments shall be free of charge regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident..” Medical staff confirmed treatment would be provided at no cost to the victim.</p> <p>115.83 (h) (HDSP) Operational Procedure (OP) 670, “Medical Standards for PREA”, (pg. 3) requires, “All prisons shall 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.”</p>

Mental health staff confirmed that an evaluation is completed within 60 days.

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 "Prison Rape Elimination Act-PREA " (effective 01/14/2016)
- HDSP Operational Procedure 421, Prison Rape Elimination Act-PREA, (effective 11/22/2021)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- HDSP Operational Procedure 670 "Medical Standards for PREA," (effective 02/11/2019)

2. Interviews:

- Medical and Mental Health Staff

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.83

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.86 (a-b) The agency noted that, “The facility shall conduct a sexual abuse incident review within 30 days of the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded...” As part of the audit process the auditor reviewed documentation of 10 after action reports. 6 out of 10 were completed within the 30 day timeframe. 4 of the reviews were completed almost 5 months following the conclusion of the investigation. As such Corrective action will be required.</p> <p>115.86 (c) The facility notes that the incident review team includes upper-level management officials and allows input from line supervisors, investigators and medical or mental health practitioners. The roster for the Incident review team includes the assistant Warden, the PREA compliance manager, medical staff and mental health staff., The auditor reviewed samples of the incident review and noted that after the review is completed it is reviewed by the Warden and facility PREA compliance manager.</p> <p>115.86 (d-e) The auditor noted that the NDOC Prison Rape Elimination Act Manual and the HDSP OP 421 both require consideration of, “Consider whether the allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;</p> <p>As part of the onsite review process the auditor interviewed members of the after action review committee. During the interviews the members were asked, “ 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; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility?” In both interviews stated yes.”</p> <p>The policy also requires the team to, “Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable the abuse.; Assess the adequacy of staffing levels in that area during different shifts; Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.” The auditor reviewed documentation of 10 reviews. Item #2 for every review included consideration for motivations specifically, “Was the incident motivated by race; ethnicity; gender identity; LGBTI (lesbian, gay, bisexual, transgender, inter-sex identification); status or perceived gang affiliation status; other group dynamics at facility; other motivations not listed here?” The team is required to complete and sign a report which will be sent to the Warden. The Warden and PCM will review the incident and make every effort to incorporate the teams recommendations. Interviews with the incident review team confirmed that these actions took place during the review as well as a tour of the area if necessary. The</p>

PREA compliance manager was interviewed as part of this process and noted the requirement to complete incident reviews for both substantiated and unsubstantiated cases of sexual abuse. The Warden also confirmed reviewing the findings of the incident review team and usually accepting the recommendations provided or documenting the reasons the actions are not accepted.

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

Agency Policy 421 "Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination" (effective 01/14/2016)

- High Desert State Prison (OP) 421, Prison Rape Elimination Act-PREA (11/22/2021)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- Incident Reviews
- Investigation packets (indicating substantiated and unsubstantiated)

2. Interviews:

- Warden
- PREA Compliance Manager
- Incident Review Teams

Based on a review of the Sexual Abuse Incident Reviews, noting that the reviews were not completed ordinarily within 30 days, corrective action is required.

The facility provided updated Sexual Abuse Incident Reviews on in the month of August, September, October and December. These reviews were found to be completed within 30 days time and compliant with the requirements of this standard.

115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>115.87 (a)/(c) NDOC “Prison Rape Elimination Act Manual,” (pg. 4)) requires, “The IG PMT is responsible to collect accurate, uniform data for every allegation of sexual abuse from every institution and facility using a standardized instrument and set of definitions..” The policy also provides standardized definitions outlined in Pages 47-49 of this manual. Subsection 3.b. of the policy mirrors the provision requirement in that, “The data shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by Department of Justice.” The PREA coordinator indicated that she aggregates this data at least annually for the directors review, and then it is provided to the Department of Justice using the most recent SSV by the due date.</p> <p>115.87 (b) The PREA coordinator indicated that she aggregates this data at least annually for the directors review, and then is provided to the Department of Justice using the most recent SSV by the due date. The policy also requires, “The incident based sexual abuse data shall be aggregated, at a minimum, annually;” The agency provided the documentation of the SSV summary information and Incident Forms (SSV-IA) for 2019 and 2020 for review by the auditor. These have been submitted to the Department of Justice in compliance with established procedures and timelines.</p> <p>115.87 (d) The agency reports that they maintain, review and collect data as needed from all incident based documents. The agency PREA coordinator provided the auditor with reports and summary data, noting all PREA-related information is maintained. This includes but is not limited to incident reports, investigation files, and sexual abuse incident reviews.</p> <p>115.87 (e) The agency reports that NDOC does not contract with private facility for the confinement of its inmates, but if it did the PREA coordinator would collect aggregate data.</p> <p>115.87 (f) The agency reported that they provided the requested data to the Department of Justice. The agency provided the documentation of the SSV summary information and Incident Forms (SSV-IA) for 2019 for review by the auditor.</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>1. Documents: (Policies, directives, forms, files, records, etc.)</p> <ul style="list-style-type: none"> • Agency Policy (AR) 421 “Prison Rape Elimination Act-PREA ” (effective 01/14/2016) • NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)

2. Interviews:

- Agency Director/Designee
- Agency PREA Coordinator
- PREA Compliance Manager

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.87

115.88	Data review for corrective action
	<p data-bbox="256 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 340 1481 958">115.88 (a) The NDOC PREA Manual dated 04/04/2016 (pg. 5) outlines the requirement for data collection by assigning the PREA Management Team to, “The data collected and aggregated shall be reviewed by the Director, or designee, Deputy Director of Operations, and the IG PREA Coordinator in order to assess and improve, if necessary, the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The review will include: Identifying problem areas; taking corrective action on an ongoing basis; Preparing an annual report of its findings and corrective actions for each institution, facility and the Department where inmates may be present.” The agency PREA coordinator asserted that the agency collected this data and noted that it was provided to the auditor as well as available to the public on its website. During the interview process the facility PREA compliance manager stated that they provide any information requested; The agency director/ designee stated that they gather the data and used it to identify the problem areas to look for trends with a focus on improving sexual safety. In addition to the report on the website. The Agency Website is provided below:</p> <p data-bbox="256 1001 1267 1072">https://doc.nv.gov/About/NDOC_Office_of_the_Inspector_General/PREA_Incidents_and_Annual_Reports/</p> <p data-bbox="256 1115 1481 1352">115.88 (b) The auditor reviewed the reports for years 2015 through 2020, each report provided a comparison of data from previous years. Page seven of the 2020 report provides comparison data for years: 2014 through 2020; breaking down the number substantiated, unsubstantiated and unfounded sexual abuse allegations as an agency and by individual facility. The auditor noted that the reports provide the information in easy to read graphs as well as the raw numbers.</p> <p data-bbox="256 1395 1481 1592">115.88 (c) The auditor reviewed the recent reports from the website and noted that the 2018-2020 reports indicates are approved by Charles Daniels, Director. During the interview with the agency director, Charles Daniels was asked if he “Approves the reports written pursuant to 115.88?” He noted that he does. The website is provided in provision (a) of this standard.</p> <p data-bbox="256 1635 1481 1917">115.88 (d) The NDOC PREA Manual dated 04/04/2016 (pg. 4) notes that, “Specific material may be redacted from the reports when the publication would present a clear and specific threat to the safety and security of a facility. However, there must be an indication of the nature of the material redacted..” During an interview with the PREA coordinator, she stated all the reports are prepared without the use of any personally identifying information. She noted that documentation is maintained for all reports</p> <p data-bbox="256 1960 1374 1993">The following evidence was analyzed in making the compliance determination:</p> <ol data-bbox="256 2036 1123 2069" style="list-style-type: none"> 1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Policy (AR) 421 "Prison Rape Elimination Act-PREA " (effective 01/14/2016)
- NDOC Prison Rape Elimination Act Manual (effective 04/04/2016)
- PREA Annual Report 2020
- PREA Annual Report 2019
- PREA Annual Report 2018
- PREA Annual Report 2017
- PREA Annual Report 2016

2. Interviews:

- Agency Director/Designee
- Agency PREA Coordinator
- PREA Compliance Manager

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.88.

115.89 Data storage, publication, and destruction

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.89 (a) NDOC PREA data is physically retained in a secured area in the PREA Coordinators Office. Digital data is maintained in a computerized database that is limited to staff with a need to know, the agency PREA coordinator controls the levels of access to this information. As part of the pre-onsite phase the agency PREA coordinator was interviewed, and asked, "How does the agency ensure that data collected pursuant to 115.87 are securely retained?" The agency PREA coordinator indicated that based on need to know, access is limited to herself, risk assessment screeners and their supervisory chain . During the onsite review, the Risk assessment screeners demonstrated the restrictions to access within the system.

115.89 (b) The auditor reviewed the public website, noting the information is available for years 2009 through 2020 and includes access to individual audit summary reports for each facility between 2014-2022. The information is available to the public on the agency's website at:

https://doc.nv.gov/About/NDOC_Office_of_the_Inspector_General/PREA_Management_Division/

115.89 (c) The auditor reviewed Annual Agency Reports from the agency website for calendar years 2014 through 2020 and noted that the reports provided no personal identifying information. During an interview with the agency PREA coordinator, she was asked, "What type of materials are typically redacted from the annual report?" She indicated that the agency does not include any personally identifying information.

115.89 (d) The NDOC PREA Manual dated 04/04/2016 (pg. 5) states that, "The sexual abuse data collected will be maintained for a minimum of 10 years after the date of initial collection."

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)

- Agency Prison Rape Elimination Act Manual (effective 04/04/12016)
- PREA Annual Report 2020
- PREA Annual Report 2019
- PREA Annual Report 2018
- PREA Annual Report 2017
- PREA Annual Report 2016
- PREA Annual Report 2015
- PREA Annual Report 2014

1. Interviews:

- Agency PREA Coordinator

Based on the auditor's observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.89.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.401 (a-b) The Auditor reviewed documentation regarding the facility and agency audit cycle, noting that High Desert State Prison was completed in the previous three year cycle. The agency operates 18 facilities (including conservation camps). Due to COVID-19 audits were delayed, however NDOC had initiated action to complete all audits within appropriate timeframes. It was noted that High Desert State Prison was scheduled to be completed in January 2022. Due to COVID-19 the onsite portion of the audit was delayed but completed in June 2022, meeting the 2021-2022 timeframes for this cycle.</p> <p>115.401 (h-i) The audit team was provided unrestricted access to all areas of the facility including housing units, administration, and control rooms. Documentation for each standard, was provided by the facility and agency, the auditor was able to review additional documentation and request supplemental supporting documentation, the facility provided each document accordingly.</p> <p>115.401 (m-n) The auditor and team were afforded opportunity to conduct private and confidential interviews with inmates. The auditor received documentation that the audit notices were posted prior to arrival, the audit notices were placed in multiple areas throughout the facility. The notices stated that letters to the auditor would be treated as confidential. Prior to the audit, the auditor received seven letters from five adults in custody at High Desert State Prison. The earliest was postmarked in January 2022. All letters were treated like legal mail and none appeared to be opened or tampered with. The auditor received no letters from staff or visitors.</p> <p>Based on the auditor’s observation, review of documentation, and interviews, the High Desert State Prison is in full compliance with all elements of standard 115.401.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Nevada Department of Corrections posts all Final PREA audit reports to its public website at https://doc.nv.gov/About/NDOC_Office_of_the_Inspector_General/PREA_Audits/</p> <p>Presently there are 48 Audit Reports including the report from the previous audit conducted at High Desert State Prison final report completed April 2019. The oldest report is Warm Springs Correctional Center Dated June 2014. The most recent report is Florence McClure Women’s Correctional Center dated January 2022.</p> <p>Based on the auditor’s observation, review of documentation the High Desert State Prison is in full compliance with all elements of standard 115.403.</p>

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

115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na

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

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

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

115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

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

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

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

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

115.21 (b) Evidence protocol and forensic medical examinations		
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c) Evidence protocol and forensic medical examinations		
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d) Evidence protocol and forensic medical examinations		
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

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

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

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

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

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

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

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

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

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

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

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

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

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

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

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

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

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

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

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

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

115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	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
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

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

115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes

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

115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	no
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes

115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes

115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes

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

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	no
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

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

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

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

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

115.403 (f)	Audit contents and findings	
	<p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p>	yes