

Prison Rape Elimination Act (PREA) Audit Report

Adult Prisons & Jails

Interim Final

Date of Interim Audit Report: N/A

If no Interim Audit Report, select N/A

Date of Final Audit Report: July 3, 2021

Auditor Information

Name: Roger Lynn Benton

Email: roger.benton@cdcr.ca.gov

Company Name: California Department of Corrections and Rehabilitation

Mailing Address: 1515 S Street 344-N FOPS/SH

City, State, Zip: Sacramento, CA 95811

Telephone: (916) 798-9953

Date of Facility Visit: May 20, 2021

Agency Information

Name of Agency:

Nevada Department of Corrections

Governing Authority or Parent Agency (If Applicable)

State of Nevada

Physical Address: 5500 Snyder Avenue

City, State, Zip: Carson City, Nevada 89701

Mailing Address: Post Office Box 7000

City, State, Zip: Carson City, Nevada 89701

The Agency Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Agency Website with PREA Information:

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

Agency Chief Executive Officer

Name: Charles Daniels Director of Corrections

Email: cdaniels@doc.nv.gov

Telephone: (702) 216-6010

Agency-Wide PREA Coordinator

Name: Deborah Striplin

Email: dstriplin@doc.nv.gov

Telephone: (775) 977-5512

PREA Coordinator Reports to:

Nevada's Department of Corrections
Inspector General

Number of Compliance Managers who report to the PREA Coordinator

Zero, the Institutional PREA Compliance Managers report to the Inspector General.

Facility Information

Name of Facility: Jean Conservation Camp

Physical Address: 3 Prison Road

City, State, Zip: Jean, Nevada 89019

Mailing Address (if different from above):
Same as above

City, State, Zip: Same as above

The Facility Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Facility Type:

Prison

Jail

Facility Website with PREA Information:

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

Has the facility been accredited within the past 3 years? Yes No

If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):

ACA

NCCHC

CALEA

Other (please name or describe: [Click or tap here to enter text.](#))

N/A

If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:
Internal PREA Audit & CAP (Their on-site visit was on June 17, 2020)

Warden/Jail Administrator/Sheriff/Director

Name: Jerry Howell Warden of Florence McClure Women's Correctional Center & the Jean Conservation Camp

Email: jhowell@doc.nv.gov

Telephone: (702) 216-6151

Facility PREA Compliance Manager

Name: Helen Peterson Correctional Caseworker III of the Florence McClure Women's Correctional Center & the Jean Conservation Camp

Email: hpeterson@doc.nv.doc

Telephone: (702) 216-6213

Facility Health Service Administrator N/A

Name: Timothy Calumpong, Director of Nursing

Email: tcalumpong@doc.nv.doc

Telephone: (702) 668-7300

Facility Characteristics

Designated Facility Capacity:	240	
Current Population of Facility:	126	
Average daily population for the past 12 months:	94	
Has the facility been over capacity at any point in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Which population(s) does the facility hold?	<input checked="" type="checkbox"/> Females <input type="checkbox"/> Males <input type="checkbox"/> Both Females and Males	
Age range of population:	20-50	
Average length of stay or time under supervision:	5.7 months	
Facility security levels/inmate custody levels:	Minimum Custody	
Number of inmates admitted to facility during the past 12 months:	267	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>72 hours or more</i> :	267	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>30 days or more</i> :	197	
Does the facility hold youthful inmates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	Click or tap here to enter text. <input checked="" type="checkbox"/> N/A	
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<p>Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):</p>	<input type="checkbox"/> Federal Bureau of Prisons <input type="checkbox"/> U.S. Marshals Service <input type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input type="checkbox"/> State or Territorial correctional agency <input type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider <input type="checkbox"/> Other - please name or describe: Click or tap here to enter text. <input checked="" type="checkbox"/> N/A	
Number of staff currently employed by the facility who may have contact with inmates:	19	

Number of staff hired by the facility during the past 12 months who may have contact with inmates:	4
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	1
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	5 (NDF Staff)
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	0, due to COVID
Physical Plant	
<p>Number of buildings:</p> <p>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</p>	10
<p>Number of inmate housing units:</p> <p>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	5, each building is identified numerically as 1, 2, 3, 4 & 5.
Number of single cell housing units:	0
Number of multiple occupancy cell housing units:	0
Number of open bay/dorm housing units:	5
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):	0
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Medical and Mental Health Services and Forensic Medical Exams

Are medical services provided on-site?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are mental health services provided on-site?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Where are sexual assault forensic medical exams provided? Select all that apply.	<input type="checkbox"/> On-site <input checked="" type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.)

Investigations

Criminal Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:	19 Agency staff
When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.	<input type="checkbox"/> Facility investigators <input checked="" type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input checked="" type="checkbox"/> N/A

Administrative Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?	26 Agency & 1 Facility
When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply	<input checked="" type="checkbox"/> Facility investigators <input checked="" type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input checked="" type="checkbox"/> N/A

Audit Findings

Audit Narrative

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

The Jean Conservation Camp is located at 3 Prison Road, Jean, Nevada. The Jean Conservation Camp is one of nine conservation camps operated by the Nevada Department of Corrections and is the only one that houses female offenders. Located in Clark County, just 32 miles from the City of Las Vegas, the Jean Conservation Camp was constructed in 1988. The Jean Conservation Camp can house up to 240 minimum custody inmates for the state of Nevada. Most inmates at Jean Conservation Camp work for the Nevada Division of Forestry completing conservation projects, roadside clean up, local area assistance and firefighting during the fire season. The Warden at the Florence McClure Women's Correctional Center oversee the administrative responsibilities of the Jean Conservation Camp.

At the time of the audit, the Jean Conservation Camp housed minimum custody female offenders in one of five dormitory-type building. Each pod can house up to 48 offenders.

Out of the 126 offenders at the Jean Conservation Camp, 80 currently work for the Nevada Division of Forestry, 32 work on-site at the Camp and 14 are currently pending classification or are unassigned.

The Jean Conservation Camp is participating in a Prison Rape Elimination Act audit conducted by one certified Department of Justice auditor and one support staff, both from the California Department of Corrections and Rehabilitation. The on-site portion of the Jean Conservation Camp audit was conducted at the address stated above on May 20, 2021.

Note: The management staff, to include the Warden and PREA Compliance Manager of the Florence McClure Women's Correctional Center, oversee the care, custody and control of the offenders at the Jean Conservation Camp. The Jean Conservation Camp's Facility Manager, oversees the on-site daily operation.

PRE-AUDIT PHASE

On April 1, 2021, the Nevada Department of Corrections, Prison Rape Elimination Act Statewide Coordinator, sent me, via email, notification and photographic evidence, that the Notice of Audit forms had been posted. The notice was copied on bright green paper and posted in a variety of areas to include, the bulletin board of Housing Units One through Five, Canteen, Dining Hall, Kitchen, Administrative Building, Chapel, Medical area, Multi-purpose Building, Property Room/Area and Laundry area.

This posting date was over six weeks prior to the on-site review and date stamped photographic evidence was submitted demonstrating the timely posting of the notices. The facility was requested and agreed to keep all notices posted for six weeks prior to and six weeks after the on-site review.

The Jean Conservation Camp's Prison Rape Elimination Act Compliance Manager, with the assistance of the Nevada Statewide Prison Rape Elimination Act Coordinator, was requested to complete the Pre-Audit Questionnaire.

On April 9, 2021, through the PREA On-line Auditing System, I received the Pre-Audit Questionnaire and supporting documentation that was uploaded by the Statewide PREA Coordinator and the Jean Conservation Camp's PREA Compliance Manager. My Pre-audit preparation included a thorough review of all documentation and materials submitted by the state and facility, along with the data included in the completed Pre-Audit Questionnaire. The documentation reviewed included agency policies, procedures, forms, education materials, training curriculum, training certifications, organizational charts, posters, brochures and other Prison Rape Elimination Act related materials, which were provided to demonstrate compliance with the Prison Rape Elimination Act standards. This review prompted questions that were placed in written form and emailed to the Jean Conservation Camp's Prison Rape Elimination Act Compliance Manager, in the form of bulleted questions for clarification or additional information needed. Responses to those questions were requested be sent to me, via email, either prior to or at the beginning of the on-site portion of the audit.

Answers to the questions were submitted, via numerous email and telephone exchanges, by the Jean Conservation Camp's Prison Rape Elimination Act Compliance Manager and Camp Manager over a five-week period and reviewed by me prior to the on-site review.

I started completing the Audit section of the Auditor Compliance Tool by transferring information from the pre-audit questionnaire and supporting documentation to the pre-audit section of the compliance tool.

I did not receive letters from any offenders housed at the facility prior to my arrival, while at the institution or, so far, during the post-audit portion of this audit. I also did not receive any letters from an anonymous or third-party source (family member of an offender) or staff.

On May 4, 2021, I emailed staff at Just Detention International to ask if there had been any Prison Rape Elimination Act concerns/issues reported from staff or offenders at the Jean Conservation Camp, in the past 12 months, to their organization. On May 5, 2021, I was notified, via email, by Just Detention International staff that they had not received any written or telephonic correspondence related to the Jean Conservation Camp.

On May 19, 2021, an in-person interview was conducted with the Coordinator of the Sexual Assault Support Services of Reno Nevada, to ask if there had been any Prison Rape Elimination Act concerns/issues reported from staff or offenders at the Jean Conservation Camp, in the past 12 months, to her organization. After discussing the process and procedures as they dealt with the Jean Conservation Camp, the Coordinator stated that there had not been any contact regarding issues or concerns received from staff or inmates at the Jean Conservation Camp in the past 12 months.

On May 11, 2021, I sent, via email, a copy of the agenda for the upcoming audit, to the Statewide PREA Coordinator, the Jean Conservation Camp's PREA Compliance Manager and Jean's Camp Manager.

It should be noted that the last time the Jean Conservation Camp received their Prison Rape Elimination Act Final Report, from their last 3-year cycle, was on August 31, 2018.

Following coordination, preparatory work and collaboration with management staff at the Florence McClure Women's Correctional Center and the Jean Conservation Camp, pre-audit work was completed prior to traveling to the facility for the on-site review portion of the audit.

ON-SITE PHASE

On May 20, 2021, the audit team arrived at the Jean Conservation Camp. The on-site audit team consisted of two auditors, which included Ryan Couch, a Correctional Lieutenant for the California Department of Corrections and Rehabilitation and myself, a Department of Justice Certified Prison Rape

Elimination Act Auditor and retired Captain for the California Department of Corrections and Rehabilitation. Both members of the auditing team have completed numerous In-State Pre-Audits and several Out-of-State formal audits.

As a team, we spent approximately 18 hours on-site at the Jean Conservation Camp and approximately 12 additional hours completing telephonic interviews with custody and non-custody staff that were not available to be on-site during our visit.

Upon arrival to the facility, the audit team met with the Florence McClure Women's Correctional Center's PREA Compliance Manager, who oversees the PREA program at the Jean Conservation Camp along with the Jean Conservation Camp's Manager and staff, for greetings, introductions and information sharing. The audit team were escorted to an office that served as a home base for audit preparation and organization.

Prior to arrival at the Jean Conservation Camp, the audit team requested, via email and telephone conversations, the following information:

- A housing breakdown by unit.
- A roster of all offenders sorted by housing areas.
- A roster of additional Specialized / Management staff that would need to be interviewed.
- A roster of custody staff working each of the 3 shifts, the days we arrive.
 - (0500-1300, 0800-1600, 1300-2100 & 2100-0500 hours).
- A current list and housing locations for any of the following offenders;
 - Offenders with a Physical Disability.
 - Offenders who are Blind, Deaf or Hard of Hearing.
 - Offenders that are Limited English Proficient.
 - Offenders with a Cognitive Disability.
 - Offenders who identify as Gay or Bisexual.
 - Offenders who identify as Transgender or Intersex.
 - Offenders in Segregated housing for High Risk of Sexual Victimization.
 - Offenders that reported Sexual Abuse.
 - Offenders that reported Sexual Victimization during Risk Screening.
- An inmate Orientation Booklet in each language you have. (English, Spanish, Hmong...)
- 1 black and white site maps. This will be used to make sure we cover all areas during the tour.
- The most recent count sheet.

Once settled in the conference room, all the previously requested information was provided to the auditors.

The reviewed list that the audit team received contained all of the current custody and non-custody staff scheduled to work on the days of the on-site review, sorted by shifts. The other list contained all offenders currently housed at the Jean Conservation Camp, sorted by each of the five housing units.

This list did not specifically identify offenders according to any/all of the nine above referenced/targeted categories; however, the Prison Rape Elimination Act's Compliance Manager worked with the auditor to identify the offenders in the categories, and, after review, a complete list was supplied.

All staff, to include various work areas, shift schedules and classifications, were chosen to get a formal response of widespread information from around the institution.

The offender names were randomly chosen to include several offenders from each of the pods within the housing unit and classification/custody level.

On-site Review:

The audit team conducted a thorough on-site review of the facility. The PREA Compliance Manager and Jean Conservation Camp's Manager escorted the tours as a single group due to the limited size of the facility. All staff openly answered question and shared information to the auditors.

While one member of the audit team began inmate interviews, I toured inside the inside area of the facility to include all five dorm type housing units labeled Units, 1, 2, 3, 4 and 5. I reviewed all informational bulletin boards, tested the inmate accessible telephone system, walked through the Administration Building, Kitchen and Dining Room, Inmate Retail Store (Canteen) Visiting area, Laundry Room, the Gymnasium/Multi-purpose room, and where the Intake process take place. As the tour moved throughout the outlying areas, we toured the Nevada Division of Forestry Administrative Building. I wrote down information about areas covered and made notations on the supplied site map indicating which area had been visited and reviewed.

During the tour, I asked impromptu questions (Informal interviews) of staff and offenders, noted the placement and coverage of any surveillance cameras, inspected any surveillance monitors (if in those areas), identified potential blind spots, and inspected bathrooms and showers to identify potential cross gender viewing concerns, etc.

In the main yard, the inmate accessible telephones were tested to determine the functionality of some the facility's hotline for reporting sexual abuse or harassment. Using the offender accessible telephones, the Rape Crisis Center telephone number, which is posted on the walls and by each telephone, and a staff person answered.

The staff member, at the Sexual Assault Support Services, Rape Crisis Center, explained this telephone number was monitored 24 hours a day, 7 days a week. Information is obtained from the caller, then directed to the responsible coordinator for immediate action.

In offender work areas, audit team members assessed the level of staff supervision and asked questions (Informal interviews) to determine whether offenders are in lead positions over other offenders. Audit team members also noted the placement of Prison Rape Elimination Act notification address or telephone numbers, Rape Crisis Center information posters, Nevada Department of Corrections contact numbers and outside agency's numbers, located in offender housing/limited work areas and placement of the Prison Rape Elimination Act audit notices provided earlier to the facility. As needed, audit team members took photos to document the on-site review.

Prison Rape Elimination Act Management Interviews:

The Nevada Department of Corrections Director was interviewed on May 20, 2021.

The Nevada Department of Corrections Agency Contract Administrator was interviewed on May 19, 2021.

The Nevada Department of Corrections Statewide Prison Rape Elimination Act Coordinator was interviewed on May 18, 2021.

The Florence McClure Women's Correctional Center/Jean Conservation Camp's Warden was interviewed on May 18, 2021 Florence McClure Women's Correctional Center.

The Florence McClure Women's Correctional Center/Jean Conservation Camp's PREA Compliance Manager was interviewed on May 18, 2021.

As they maintain overall control of the Jean Conservation Camp, all five of the above listed specialty executive staff were interviewed either at the Florence McClure Women's Correctional Center or the Southern Administration office of the Nevada Department of Corrections, both located in Las Vegas, Nevada.

The auditors worked with facility staff to schedule a time for each interview. Audit team members were escorted to the offices of the respective manager or arranged to utilize another office where the auditor conducted the confidential interviews using the applicable interview protocols and recorded the responses by hand.

All their summarized remarks and documentation presented, are in this report.

Other Specialized Staff Interviews:

Using the list of specialized staff, received from the Prison Rape Elimination Act Compliance Manager, audit team members were escorted to the work locations or centralized offices of individual specialized staff to perform the required interviews.

The audit team identified 18 additional specialized staff classifications to be interviewed.

Interviews included staff from the following areas:

- 3 Intermediate/Higher level staff responsible for unannounced rounds.
- 0 Line Staff that Supervise Youthful Offenders.
 - No Youthful Offenders are housed at the Jean Conservation Camp.
- 0 Staff that Educate Youthful Offenders.
 - No Youthful Offenders are housed at the Jean Conservation Camp.
- 3 Medical staff members.
- 3 Mental Health staff members.
- 1 Non-medical staff trained/involved in cross-gender searches.
 - No cross-gender searches were conducted during the audit period.
- 1 Administrative (Human Resource) staff member.
- 1 Sexual Assault Nurse Examiner from a contracted off-site medical facility.
- 1 Victim Advocate from a local Rape Crisis Center.
- 2 various Volunteers (Telephonically) (Self-Help and Education) (Not on-site due to COVID restrictions)
- 5 Contractors (Nevada Division of Forestry)
- 3 Investigator Staff members (All three cover Criminal and Administrative allegations)

- 3 Staff member who perform Screening for Risk of Victimization and Abusiveness
- 0 Staff who supervise offenders in Administrative Segregated.
 - There is no Administrative Segregation at the Jean Conservation Camp.
- 2 Sexual Abuse Incident Review Team Members
- 1 person who is Responsible for Monitoring Retaliation
- 2 First Responders
- 2 Staff who conduct Intake Screening
- 2 People that are Responsible for Institutional Contractor and Volunteer Clearances
- 1 Grievance/Appeals Coordinator
- 1 staff member that oversees the Jean Conservation Camp's staff training requirements.

Random Staff Interviews:

Due to the limited number of staff working, on-site, at the Jean Conservation Camp, I determined that all staff would be interviewed. The audit team interviewed staff from each of the three shifts. The staff were selected from the shift rosters, considering a variety of work locations and all three shifts. Audit team members were escorted to various locations or a centralized office where identified staff members were located for the interviews. The interviews were conducted individually and in private offices.

The auditors introduced themselves, communicated the advisory statements to the staff, proceeded to ask the line of questions from the Prison Rape Elimination Act interview protocols for random staff and recorded the answers by hand. Due to regular-days-off of staff and the limited time the auditors would be on-site, some of the staff were interviewed telephonically.

Audit team members asked for clarifications where needed to ensure the responses were clear enough to make a determination of compliance with applicable standards. 8 out of 13 custody employees, 6 out of 7 non-custody employees and 3 out of 5 contractors that work on-site at the Jean Conservation Camp interviewed. Again, due to scheduling issues, some were interviewed in-person while the others were interviewed by telephone. These formal staff interviews were conducted from all categories of staff from all three shifts.

During the on-site tour, I would stop, speak to staff (Informal interviews) in all categories, and ask two to three questions about Prison Rape Elimination Act issues to include, training, actions taken, response, communications, etc. These conversations would not take the place of the formal process of questions; they would only be used as an additional tool to supplement the overall audit informational gathering process.

Random Offender Interviews:

The auditor determined that at least four or more offenders from each of the five-housing unit, would be interviewed. Audit team members were assigned responsibility for the various offender interviews. Audit team members used the alphabetical roster of offenders to randomly select offenders, from various age groups, ethnicities and races, from their assigned housing unit.

Audit team members were escorted to a centralized office where the identified offenders were made available to participate in the interview in a private interview room/office. During our on-site tour, I would stop, speak to numerous offenders in all categories, (Informal interviews) and ask two to three questions about Prison Rape Elimination Act issues to include, training, actions taken, response, communications, etc. These conversations would not take the place of the formal process of questions, they would only be used as an additional tool to supplement the overall audit informational gathering process.

A total of 15 formal and 11 informal random offender interviews were conducted from offenders living in various housing unit pods. There was a total of 121 offenders housed at the Jean Conservation Camp.

Prison Rape Elimination Act-Targeted Offender Interviews: Audit team members were assigned responsibility for interviewing specific categories of offenders identified for interviews based upon their relevance to specific Prison Rape Elimination Act standards.

Targeted Offender Interviews: After reviewing the list of offenders, received from the Prison Rape Elimination Act Compliance Manager and the Jean Conservation Camp Manager, it was found that no inmates were listed in some of the nine the required categories.

Due to the active working Firefighting program and the physical and mental health needs of the other off-site services, inmates that fall into several specialty categories, were not currently housed at the Jean Conservation Camp.

These nine categories are:

- 0 out of 0 Physical Disabled offenders were interviewed
- 0 out of 0 Disabled Offenders were interviewed (Hearing, Vision & Mobility)
- 0 out of 0 Limited English Proficient Offenders were interviewed
- 0 out of 0 Cognitive Disability offenders were interviewed.
- 7 out of 11 Gay & Bisexual Offenders were interviewed
- 0 out of 0 Transgender & Intersex Offenders were interviewed
- 0 out of 0 Offenders in Segregated Housing for Risk of Sexual Victimization.
 - There is no Administrative Segregation at the Jean Conservation Camp.
- 0 out of 0 Offenders who Reported Sexual Abuse were interviewed
- 0 out of 0 Offenders who disclosed Sexual Victimization during Risk Screening were interviewed

Document Reviews: The document review process was divided up between both auditors.

PREA Allegation Files

Both auditors thoroughly reviewed all information that indicated there were three allegations of sexual abuse or sexual harassment at the Jean Conservation Camp in the past 12 months.

The PREA Compliance Manager also provided the audit team with detailed information showing that all three of the allegations were sexual harassment at the Jean Conservation Camp in the past 12 months.

The Compliance Log, provided by the PREA Compliance Manager, included areas to log a report number, date of report, name of the victim, name of the suspect, and the disposition or status of the case. The auditor saw the log book indicating there were three allegations of sexual harassment at the Jean Conservation Camp in the past 12 months.

There were three allegations reports to review at the Jean Conservation Camp. Staff were informed if an allegation were to occur, to review for completeness/accuracy using a Prison Rape Elimination Act audit investigative records review tool, provided, to record the following information relative to each investigative report: Again, all three allegations were classified/investigated as Sexual Harassment.

- Case#/ID
- Date of Incident
- Name(s) of Victim and Abuser (If known)
- Date of Allegation

- Date of Investigation
- Investigating Officer
- Date Report was completed
- Staff or Inmate on Inmate
- Sexual Abuse or Sexual Harassment
- Final Disposition-Substantiated, Unsubstantiated or Unfounded
- Is Disposition Justified
- Monitoring required/needed
- Notification Given to Inmate

Auditors also reviewed training records, personnel records, contractor and any available volunteer records, offender files, Medical and Mental Health files and reviewed the records maintained through the offender intake process. The auditors collected copies of documents, as necessary.

A thorough review of the Nevada Department of Corrections Policies and Procedures was included in all three phases of the audit: Pre-Audit, On-site portion and the Post-Audit.

Employee Files

15 Employee files were reviewed for completeness/accuracy using a Prison Rape Elimination Act Audit Employee File/Records review tool to record the following information relative to each Employee File:

To include but not limited to;

- Name/Title
- Date of New Hire, if Current Employee or receiving a Promotion
- Volunteer or Contractor
- Administrative Adjudication Checks (3 questions under 115.17)
- Criminal History
- Five-year Criminal History Check (update)
- PREA Training/Documentation and signed Acknowledgement form

A review of the various category, all staff personnel files were chosen consisting of new employees, employees who were promoted and those who have been at Jean Conservation Camp for longer than 12 months was conducted. All 15 showed they were in full compliance with all Prison Rape Elimination Act related information at the time of initial review. Sporadic additional informational reviews also indicated full compliance. The files were well maintained and easy to read.

Employee Training Files

15 Training files were reviewed for completeness/accuracy using a Prison Rape Elimination Act Audit Employee Files/Records review tool to record the following information relative to each Employee Training File:

To include but not limited to;

- Name/Title
- Date of New Hire, if Current Employee or receiving a Promotion
- Volunteer or Contractor
- PREA Training/Documentation
- Specialized PREA Training
- Medical or Mental Health staff
- Signed Acknowledgement form

- Every two-year Refresher Course

Offender Files

15 Offender files were reviewed, 11 of those were also interviewed, for completeness/accuracy using a Prison Rape Elimination Act Audit Inmate Files/Records review tool to record the following information relative to each Offender File:

To include but not limited to;

- Name/Department of Corrections Number
- Date of Admission
- Program Type
- PREA Intake Screening
- Potential Victim, Aggressor and/or part of the LGBTI community
- Follow-ups, if needed, with Medical or Mental Health provider
- PREA information provided at Intake
- Reassessment timelines followed
- PREA Comprehensive Education given and understood

After review, it was found that all 15 offender files, of the offenders currently housed at the Jean Conservation Camp, showed they were in full compliance with all Prison Rape Elimination Act related information at the time of initial review. All reviewed files were within timelines and were complete. Sporadic additional informational reviews also indicated full compliance in a large majority of offender files.

Throughout the on-site review, the team had discussion, with staff and each other, about what was being observed and reviewed and discrepancies that were being identified.

Where the circumstances dictate, the auditors would ask to review documentation, logs, computerized tracking, or other material necessary to make a determination of compliance with the standards. Audit team members would seek clarification, when discrepancies were identified to ensure that we were not missing pertinent information. The audit team scheduled a close-out discussion with the Nevada Statewide Prison Rape Elimination Act Coordinator, the Jean Conservation Camp's Prison Rape Elimination Act Compliance Manager and other team members they deemed necessary, on Thursday, June 20, 2021.

During this close-out discussion, Jean Conservation Camp staff were provided with a detailed overview of what had been identified as areas of concern during this audit.

POST-AUDIT PHASE

Following the on-site portion of the audit, the audit team met and discussed the post-audit phase and the next steps. I gathered all written information and feedback from the other team member and took responsibility for completing the final report.

Per Prison Rape Elimination Act procedure, starting on August 20, 2016, which is the first day of the first year of the second 3-year audit cycle, certified auditors are required to submit a report to the audited agency within 45 days of completion of an on-site audit.

It is expected that if an auditor determines that a facility does not meet one or more of the standards, this report will be considered an "interim report," triggering a 180-day corrective action period, and the auditor

will include in the report recommendations for any required corrective action and shall jointly develop with the agency a corrective action plan to achieve compliance.

The auditor is required to “take necessary and appropriate steps to verify implementation of the corrective action, such as reviewing updated policies and procedures or re-inspecting portions of a facility.” At the completion of the corrective action period, the auditor has 30 days to issue a “final report” with final determinations.

Section 115.404 (d) states that, “After the 180-day corrective action period ends, the auditor shall issue a final determination as to whether the facility has achieved compliance with those standards requiring corrective action.”

The final report, which is a public document that the agency is required to post on its web site or otherwise make publicly available, should include a summary of the actions taken during the corrective action period to achieve compliance.

If the Jean Conservation Camp meets all of the Standards, without the need for a Corrective Action Plan, the final report must be submitted to the facility by July 4, 2021.

The Jean Conservation Camp’s Prison Rape Elimination Act Compliance Manager and I agreed that any documents not received during the pre-audit phase or on-site review would be requested via email and provided, to me, via email, by that Compliance Manager.

Audit team members documented all clarification questions, missing information, and requests for additional documentation, etc. to follow-up with the Prison Rape Elimination Act Compliance Manager and the Jean Conservation Camp Manager, and sent the first request, through email, on Wednesday, May 26, 2021.

As completion documents were submitted, I continually updated the requested information report so both the statewide PREA Coordinator, the PREA Compliance Manager and the facilities Camp Manager and I knew what was still required. During these times, there were multiple telephone calls to and from the Prison Rape Elimination Act Compliance Manager, Camp Commander and myself. I was very appreciative of the open and timely information provided.

Most of the concerns, which the audit team had addressed during the pre-audit, on-site audit, exit interview and post-audit with the Jean Conservation Camp Administrative Staff, were addressed, documented and work had begun or completed on the items listed by June 18, 2021. The documents provided were reviewed for completeness and to verify that they meet the requirements per Prison Rape Elimination Act Standards. This report was written to include any corrective actions that took place to correct any listed deficiencies plus any additional item that required additional monitoring and updates.

After numerous emails and telephone calls, all completed information that was requested for the Final Report was returned to me, via email, by June 30, 2021.

A portable document format copy of this Final document was forwarded to the Nevada Department of Correction’s Statewide Prison Rape Elimination Act Coordinator, the Jean Conservation Camp’s Warden, the Jean Conservation Camp’s Prison Rape Elimination Act Compliance Manager and the Jean Camp Manager on Friday, July 9, 2021.

Audit Section of the Compliance Tool: The auditor reviewed on-site document review notes, staff and offender interview notes and site review notes and began the process of completing the Audit section of the compliance tool. The auditor used the Audit section of the Prison Rape Elimination Act Compliance Tool as a guide to determine which question(s) in which interview guide(s), which on-site document review notes and/or which facility tour site review notes should be reviewed in order to make a determination of compliance for each standard. After checking appropriate “yes” or “no” boxes on the compliance tool for each applicable Sub-Section of each standard, the auditors completed the “Overall Determination” section at the end of the standard indicating whether the facility’s policy, procedure and practice exceeds, meets or does not meet standard.

If and where the auditor found the facilities policies, procedures and practice did not meet the standard, the auditor entered appropriate comments explaining why the standard is not met and what specific corrective action(s) is/are needed for facility’s policies and procedures to comply with the standard. The auditor entered this information in the designated field at the end of the standard in review.

Facility Characteristics

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

Jean, Nevada, was founded in 1904 as Goodsprings Junction, a station on the San Pedro, Los Angeles, and Salt Lake Railroad; Jean received its current name in 1905 when the post office was opened. It was named in honor of Jean Fayle, the wife of George Fayle who had built a mercantile business and had the post office in his store. Jean, Nevada enjoyed some growth with the building of the Yellow Pine Mining Company Railroad from Goodsprings to connect with the railroad here in 1911. By the time the Yellow Pine railroad was torn up in 1930, Jean, Nevada was been a stop for travelers on Highway 91, which is today’s Interstate-15.

Jean is a small commercial town in Clark County, Nevada, United States, located approximately 12 miles north of the Nevada–California state line along Interstate 15. Las Vegas is located about 30 miles to the north. There are no residents of Jean, making it the least populated town in the United States, but many people in nearby communities such as Primm and Sandy Valley have Jean listed in their mailing address because it is the location of the main post office for the 89019 ZIP code. South Las Vegas Boulevard ends about 2 miles south of Jean, and it contiguously runs northbound past Las Vegas, ending near the I-15–US 93 Junction

Jean, Nevada also has, since 2018, Chevron’s world’s largest gas station with 96 gasoline pumps and massive indoor service area. Although Jean, Nevada has no residents, Jean needed something big to accommodate the approximately 55,000 travelers that pass through it every single day.

Again, the day-to-day operations at the Jean Conservation Camp is managed by a Correctional Lieutenant with most administrative and managerial supervision and support provided by the staff located at the Florence McClure Women’s Correctional Center.

The Jean Conservation Camp staffing plan authorizes the following positions:

- 1 Correctional Lieutenant (Camp Manager)
- 1 Senior Correctional Officer
- 11 Senior Correctional Officers
- 1 Correctional Case Work Specialist I
- 1 Correctional Case Work Specialist II
- 1 Mental Health Counselor
- .5 Medical Nurse (They also work .5 time at Casa Grande Transitional Housing in Las Vegas)
- 1 Retail Storekeeper I
- 1 Clark County School District teacher
- 1 Facility Supervisor III

Additionally, the Nevada Department of Forestry authorizes the following positions:

- 1 Battalion Fire Chief
- 5 Conservation Camp Supervisors

At the time of the on-site review, there were currently no male custody staff assigned at the Jean Conservation Camp.

The facility consists of the following housing plan:

- Housing Unit 1, a General Population unit, has a maximum capacity of 48 offenders.
- Housing Unit 2, a General Population unit, has a maximum capacity of 48 offenders.
- Housing Unit 3, a General Population unit, has a maximum capacity of 48 offenders.
- Housing Unit 4, a General Population unit, has a maximum capacity of 48 offenders.
- Housing Unit 5, a General Population unit, has a maximum capacity of 48 offenders.

The facility also has a Visiting area, Laundry Room, Kitchen and Dining Hall, Gymnasium, Multi-purpose room, Inmate Retail Store (Canteen), Administration and an area where the Intake process take place.

The Jean Conservation Camp currently houses 126 offenders in the following racial/ethnic composition:

- There are 75 (60%) White offenders
- There are 27 (21%) Black offenders
- There are 19 (15%) Hispanic offenders
- There are 5 (4%) Listed as Others (American Indian & Asian)

There is a staff-controlled area in which all staff and visitors must pass through to enter or exit the facility. Staff and Visitors cannot bring any unauthorized items (contraband), to include cellular telephones, into the facility, without written authorization.

Due to the COVID pandemic, most activities/classes were temporarily postponed. The following classes/activities are ordinarily held year-round at the Jean Conservation Camp. They have the opportunity to enroll in educational classes in pursuit of a GED or high school diploma, participate in horticulture classes, parenting classes, and various self-help classes. Jean Conservation Camp also coordinates with the Nevada Division of Forestry in training of inmates to work on firefighting crews during fire season.

Summary of Audit Findings

The summary should include the number and list of standards exceeded, number of standards met, and number and list of standards not met.

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

Standards Exceeded

Number of Standards Exceeded: 0
List of Standards Exceeded: 0

Standards Met

Number of Standards Met: 45

Standards Not Met

Number of Standards Not Met: 0
List of Standards Not Met: 0

Summary of Corrective Action (if any)

The on-site portion of the audit was a consistent paced review of all areas of the camp. Facility staff were very helpful and responsive to the questions and concerns expressed during this portion of the audit. Facility staff went above and beyond, regarding seeing to the needs of the auditors and the continued hospitality.

The audit of this institution went very well. Jean Conservation Camp staff and offenders were very helpful and responsive to the needs of the auditors and any concerns that were expressed, in the pre-audit, on-site portion and post-audit process. The audit team wish to thank the Warden, who oversees the Florence McClure Women’s Correctional Center as well as the Jean Conservation Camp, the Statewide Prison Rape Elimination Act Coordinator, the Prison Rape Elimination Act Compliance Manager, who oversees Florence McClure Women’s Correctional Center as well as the Jean Conservation Camp, the Jean Conservation Camp’s Manager, the Nevada Division of Forestry’s Acting Battalion Chief and his staff and the remaining camp staff for all their assistance because it simplified the process that needed to be completed. Overall, it is evident that staff at the Jean Conservation Camp has been working toward continual compliance with the Prison Rape Elimination Act standards. It is also apparent that staff understand the Prison Rape Elimination Act Standards, as several items identified were quickly fixed or a process was already put into place to meet compliance.

Due to their hard work and dedication to achieving sexual safety for the offenders, the facility was in full compliance with a large majority, 41 out of 45, of all the standards and provisions at the beginning of the post-audit phase of this audit process.

Additionally, during the Post-Audit/Interim/Final Report process, the facility became compliant in the other provisions. They are to be commended.

Some of the positives observed by the audit team included:

- Both members of the audit team were impressed with the overall knowledge and understanding, to include all Prison Rape Elimination Act standards that the Warden, PREA Statewide Coordinator, Jean Conservation Camp's PREA Compliance Manager and the Jean Conservation Camp's Manager possess. All documentation requested, was provided quickly and accurately.
- The information provided by the offender population indicates they understand their rights to be free from sexual abuse and explained to the auditors how they would report an allegation. Every offender interviewed, stated they could either freely speak to staff or knew the contact information to outside sources, about Prison Rape Elimination Act issues, at any time.
- Even though the Jean Conservation Camp is approximately 40 miles away from Florence McClure Women's Correctional Center, where their Executive Staff are located, the facility was extremely clean, well run and well maintained. It showed that the on-site staff and offenders took pride in their respective areas.

During the Post-Audit period and prior to the completion of the Final Report, the Jean Conservation Camp's PREA Compliance Manager and/or Camp Manager provided proof of compliance for any Standard or Subsection of a Standard that was non-compliant during the on-site visit. I was e-mailed numerous pictures, memorandums, training with staff acknowledgements and written clarification letters, to show full compliance. Each section, listed below, indicates how proof of practice/compliance was achieved.

Areas of concern, that were brought into compliance during the On-site or Interim Period of the audit process include:

115.13 Supervision and Monitoring

(5) All components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated)

- **Concern:**
During the on-site tour of the physical plant, auditors found that the on-site library and inmate canteen had areas that created blind spots. Several options were discussed on how to come into compliance.
- **Update:** On June 2, 2021, I received an email, with attached before and after photographs from the Jean Camp Manager, that indicated the new procedure that would eliminate the blind spots in both the library and canteen areas that were taken to mitigate this issue and show compliance to this Standard.

115.31 Employee Training

(d) The agency shall document, through employee signature, or electronic verification, that employees understand the training they have received.

- **Concern:**
During the on-site personnel file reviews, auditors found that documented PREA training verification of two staff members was not in their files. We discussed how to come into compliance.
- **Update:** On June 11, 2021, I received an email, with the attached training documentation, from the PREA Compliance Manager, of the remaining two staff members PREA training. The training had been completed prior to my review and a copy has now been added to their file to show compliance to this Standard.

115.34 Specialized Training

(c) The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

- **Concern:** During the on-site staff file reviews; we could not locate the specialized training certificate indicating that the Camp Manager had received training in conducting Administrative investigations in confinement settings.
- **Update:** On June 2, 2021, I received an email, showing the training documentation and completed specialized training certificate that the Camp Manager received in August of 2020. This documentation shows compliance to this Standard.

115.64 Staff first responder duties

(3) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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; and

(4) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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.

- **Concern:** During staff interviews, most staff did not fully understand the 'Request a Victim and Ensure a Suspect' aspect of First Responder duties as it pertains to the above listed Standard.

Update: On June 14, 2021, I received an email, from the Jean Camp Manager, which included training covered in 115.64 (3&4), with signed acknowledgement forms from all Jean Conservation Camp custodial staff. This documentation showing updated training shows compliance to this Standard.

PREVENTION PLANNING

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

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

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? Yes No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? Yes No

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? Yes No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? Yes No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities? Yes No

115.11 (c)

- 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 No NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Agency Organizational Chart
- Interviews with the following:
 - Director
 - Warden
 - PREA Coordinator
 - PREA Compliance Manager
 - Jean Conservation Camp's Staff and Offenders

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." Casa Grande Transitional Housing (CGTH) has an additional policy (Operational Procedure 421) that reiterates AR 421. Section 421.01, on page 3, this policy states that CGTH follows the Department's 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/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. CGTH shall take a proactive approach regarding the prevention, detection, response and punishment of any type of sexual contact through education and training of staff, inmates, and the public.

Administrative Regulation 421 defines sexual abuse and sexual harassment. The policy explains what behaviors are violation of the PREA policy. The zero-tolerance policy includes the statement that disciplinary action will be taken, including possible prosecution on any staff/volunteer or contractor who violates the PREA policy.

Nevada Department of Corrections PREA Coordinator is Deborah Striplin. Ms. Striplin was assigned on January 1, 2019, as the PREA Coordinator for the Nevada Department of Corrections. During this PREA Audit, Ms. Striplin was readily available to assist the audit team and CGTH through the audit process. Prior to being appointed as the PREA Coordinator, Ms. Striplin assisted the Inspector General for the State of Nevada in developing, implementing, and overseeing the Nevada Department of Corrections efforts to comply with the PREA standards. During the interactions with Ms. Striplin, it is apparent that she is committed to ensuring that the State of Nevada is compliant with the PREA standards. She is actively involved with all of the facilities in Nevada, overseeing their PREA compliance efforts. The Director of Corrections has delegated Ms. Striplin the authority to implement agency wide policies, procedures and practices. She reports directly to the State Inspector General.

Jean Conservation Camp's Prison Rape Elimination Act Compliance Manager is Correctional Caseworker Specialist III Helen Peterson. Ms. Peterson has been assigned as the PREA Compliance

Manager at the Jean Conservation Camp since February 2020. Ms. Peterson reports directly to the Warden.

In an interview with the Agency PREA Coordinator, Ms. Striplin stated that she has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.

In an interview with the Jean Conservation Camp's PREA Compliance Manager, Ms. Peterson also stated that she has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

In an interview with the Director and the Warden, they both appear committed to ensuring the Jean Conservation Camp's commitment to preventing, detecting, responding to and reporting sexual abuse of inmates. Both confirmed the agency's commitment to achieving Prison Rape Elimination Act certification and the agency's zero tolerance policy.

During interviews, the staff at the Jean Conservation Camp look to Ms. Peterson, Ms. Striplin and the Camp's Manager to provide direction regarding Prison Rape Elimination Act compliance.

During interviews with staff and offenders, it was clear that Ms. Peterson and the Jean Camp Manager provides training, information and guidance to staff and the offender population concerning Prison Rape Elimination Act Standards on a regular basis.

During the offender interviews, the offenders knew about the Prison Rape Elimination Act, however, did not know the name of the PREA Compliance Manager. Since the PREA Compliance Manager is located at another facility, most offenders stated they do not see her on a daily basis but stated if they had any issues or concerns, while at the Jean Conservation Camp, they could easily talk to the Camp Manager or any of her staff.

During the Pre-audit, On-site audit and Post-Audit process, Ms. Peterson was very involved in providing communications and documentation in assisting the Audit team. Ms. Peterson provided information and documentation of how the Jean Conservation Camp is working toward prevention, detection and responding to all aspects of Prison Rape Elimination Act.

Corrective Action: No corrective action was required for this standard.

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

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

115.12 (a)

- 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.) Yes No NA

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Agency Organizational Chart
- Interviews with the following:
 - Agency Contract Administrator

The last contract that Nevada Department of Corrections entered to house inmates was with CoreCivics to house 200 NDOC inmates in October 2017. In November 2020, all Nevada Department of Corrections inmates were transferred out of the CoreCivics facility and returned to the State of Nevada.

During the interview with the Agency Contract Administrator, he stated that if a new contract were to be negotiated, he would check to see if the company had any recent audits posted on line. He said he would look at their training history, their facility PREA history, and their PREA standard compliance. He stated that he would work with the contract negotiation team to make sure that the proper PREA compliance language was in the contract.

During an interview with the Jean Conservation Camp's Warden, he stated that contracts for the confinement of offenders is enacted at an Agency/Department level and no staff, including himself, at the Jean Conservation Camp, were directly in charge of monitoring or responsible for any aspect of those contracts. The Warden also stated that if any contracts for the confinement of offenders that he controlled, were to be put into place in the future, all required language would be in compliance with the Prison Rape Elimination Act Standard.

During the interview with the PREA Coordinator, she stated there are no future plans to enter any contracts with any other entity to house inmates for the State of Nevada.

Further questions were asked to see if the Nevada Department of Corrections uses contracted facilities to house inmates for substance abuse programs or “half way houses” for paroled inmates and the auditor was told that Nevada Department of Corrections does not use outside contractors for these types of programs. The Nevada Department of Corrections PREA Coordinator stated that she would be involved if a contract were initiated with an external entity for this function. She would ensure that language in the contract is consistent with the requirements of PREA.

Corrective Action: No corrective action was required for this standard.

Standard 115.13: Supervision and monitoring

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

115.13 (a)

- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No NA

- 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 No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? Yes No

115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)
Yes No NA

115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? Yes No

115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? Yes No
- Is this policy and practice implemented for night shifts as well as day shifts? Yes No
- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Agency Organizational Chart
- Interviews with the following:
 - o Director
 - o Warden
 - o PREA Compliance Manager
 - o Intermediate or Higher-Level Facility Staff
- Observations of supervision ratios during our on-site review rounds

Administrative Regulation 326, Posting of Shifts, requires that at least once a year the PREA Coordinator shall assess, determine, and document whether adjustments are needed to the staffing plan and or video monitoring system. According to the Staffing Plan, Nevada Department of Corrections' PREA Coordinator initiated a review and discussion of the staffing patterns for Jean Conservation Camp with the Director of Corrections. The staffing plan considers:

Generally accepted detention and correctional practices;

- Any Judicial findings of inadequacy (none);
- Any findings of inadequacies from a federal investigation agency (none);
- Any findings of inadequacies from an internal or external oversight body (none);
- All components of the facilities physical plant;
- The composition of the inmate population;
- The number and placement of supervisory staff;
- Institutional programs occurring on a particular shift;
- Any applicable state or local laws or regulations (none);
- The prevalence of substantiated or unsubstantiated incidents of sexual abuse.

Operational Procedure 326, Posting of Shifts/Overtime, defines two separate levels of staffing. Minimum Staffing is the number of staff required to for normal operation of the facility. There are no modifications to program during this staffing level. Emergency Operations is when there is just enough staff to fill the minimum number of posts to maintain the security of the facility. Whenever a modification to program is made, due to lack of staff, an incident report is created in Nevada Offender Tracking Information System. According to a memorandum signed by the Facility Manager, Jean Conservation Camp has not had fewer staff than the minimum level during this audit period.

Operational Procedure 400.03, General Security Supervision, requires that supervisors make unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The policy also prohibits staff from alerting other staff members that the supervisory rounds are occurring. When supervisors make these rounds, they are required to document them in the facility log book and post an entry in NOTIS.

The Pre-Audit materials contained NOTIS entries demonstrating compliance with this standard.

During the tour of the facility, the auditors were informed that the staff in the control area enter the unannounced PREA rounds in NOTIS for the supervisor. A review of the NOTIS entries indicates that supervisor's rounds are being documented. There are a minimum of two staff on duty at all times. During the night time hours, the two staff are in constant communication with each other. At any given time both staff know where each other are.

During the interview with the Warden, he explained how the staffing plan is established, adjusted and enforced. The staffing plan is approved by the Nevada Legislature as part of the budget process. The plan is based on best practices, and the American Correctional Association's and National Institute of Correction's staffing models. Each year the plan is reviewed to see if adjustments need to be made based on mission changes, PREA and/or other serious incidents, program changes, legal challenges or legislative changes

The staffing plan contains an analysis of the inmate population by security level and security threat group. The Warden also stated that he may change the location and placement of staff based on new programs being added, change in mission for the institution, a number of assaults in certain areas of the facility or recommendations from the PREA committee. Additionally, he may request additional position authority if there appears to be insufficient staff to operate the institution safely.

A review of the 2020 staffing plan demonstrates that it is reviewed and shared with the Statewide PREA Coordinator. During her interview, the Statewide PREA Coordinator confirmed that she reviews and submits the staffing plan.

According to policy, supervisory staff are to make random unannounced rounds through the housing unit/pods several times a day on all different shifts. These rounds are to be documented in the log books maintained in the housing unit. The housing unit log was reviewed by the audit team.

Documentation in the facility log book demonstrated that supervisors' complete tours of the housing units routinely, during random times.

During the interviews with supervisory staff they noted that they conduct unannounced rounds. They stated that they attempt to prevent staff from alerting other staff by not disclosing where they are going next and changing their movement patterns.

Random staff interviews revealed that supervisors' complete tours of their housing units at different times and that they document these in the log.

115.13 Supervision and Monitoring

(5) All components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated)

- **Concern:**
During the on-site tour of the physical plant, auditors found that the on-site library and inmate canteen had areas that created blind spots. Several options were discussed on how to come into compliance.
- **Update:** On June 2, 2021, I received an email, with attached before and after photographs from the Jean Camp Manager, that indicated the new procedure that would eliminate the blind spots in both the library and canteen areas that were taken to mitigate this issue and show compliance to this Standard.

Corrective Action: No further corrective action was required for this standard.

Standard 115.14: Youthful inmates

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

115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No 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].) Yes No NA

115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No 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].) Yes No 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].) Yes No NA

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Agency Organizational Chart
- Interviews with the following:
 - Warden
 - PREA Compliance Manager

Nevada Department of Corrections requires that any juvenile inmate housed at an adult correctional facility shall be housed in a location out of sight, sound and physical contact of the adult inmates. The youthful inmates are not to be placed in isolation for this purpose.

At the time of the on-site audit, the Jean Conservation Camp did not house any youthful offenders. According to the Warden and the PREA Compliance Manager, they have not housed any youthful offenders at any time during this audit period. Currently any minors that get sentenced as an adult in Nevada go straight to another Nevada Department of Corrections facility, currently, Lovelock Correctional Center in Lovelock, Nevada.

Consistent with information reported, during the on-site tour, auditors observed no youthful inmates.

Corrective Action: No corrective action was required for this standard.

Standard 115.15: Limits to cross-gender viewing and searches

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

115.15 (a)

- 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 No

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)
 Yes No 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.) Yes No NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) Yes No NA

115.15 (d)

- 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 No
- 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 No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? Yes No

115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? Yes No
- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? Yes No

115.15 (f)

- Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Staff Roster
- Offender Roster
- Interviews with the following:
 - Random Staff
 - Random Offenders
- Observations of announcements being made by staff during our on-site review rounds

Operational Procedure 422, Searches and Seizure Procedures, section 422.03, states that the facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners. All cross-gender strip searches and cross-gender visual body cavity searches will be documented in NOTIS.

According to the staff and inmates interviewed, male staff have not conducted any strip searches on female inmates at the Jean Conservation Camp. Staff stated that they would only do a strip search of a cross gender inmate if it was an extreme emergency. These staff knew that in the event that they had to strip search a cross gender inmate, they would document it.

Operational Procedure 422, Search and Seizure Standards, section 422.03 states that the Jean Conservation Camp shall not permit cross-gender pat down searches of female inmates, absent exigent circumstances. Any cross-gender pat search of a female inmate must be documented in NOTIS. According to the Facility Manager, there have not been any pat searches of female inmates by male staff during this audit period.

Additionally, policy also states that the facility will enable 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 the routine performance of their job duties. Inmates are required to change clothes in the restroom area. There are doors on the toilet stalls and curtains on all of the functioning showers.

During interviews, all of the inmates stated that they are allowed to toilet, dress and shower without staff of the opposite gender watching them.

Operational Procedure 422, section 422.03, Staff of the opposite gender are required to be announced each and every time when entering a housing unit. The staff member who is entering the housing unit is required to make this announcement. According to an e-mail date July 17, 2020, directed to All Staff, the announcements are made very loudly as the staff walk into the housing unit and then documented in NOTIS.

During the inmate interviews, every inmate stated that female staff's presence is announced every time that they enter the housing unit. During the tour the announcements were always made in our presence. All staff stated that the announcements are routine and expected.

OP 422, Search and Seizure Standards, section 422.03, restricts staff from searching inmates for the sole purpose of determining their genital statues. Information on an offender's genital statues is to be obtained during routine conversation or a review of medical records. All of the staff interviewed stated that they do not search inmates to determine their genitalia statues. None of the inmates claimed to have been strip searched for this reason.

All staff of the opposite gender (female staff in a male facility or male staff in a female facility) shall announce their presence when entering an offender housing unit or bathroom area.

Custody staff, of the opposite gender to the ones housed in the facility, shall announce their presence to the offender population in the housing unit in which they are assigned, at the beginning of their duty shift or when the status quo changes. This announcement must be clear and done so in a manner that ensures all offenders in the unit were given reasonable notice of opposite gender staff being present. This was seen and heard, when needed, during our on-site tour.

The pre-audit questionnaire reported no incidents of cross gender strip or body cavity searches in the last 12 months.

During the interviews with the Warden and the PREA Compliance Manager, they stated there were no incidents of cross gender strip searches in the past 12 months.

During the tour, the escorting staff made the opposite gender announcement when an opposite gender auditor/staff person entered the living areas of each wing.

Of the 15 formal offenders interviewed, all reported that they were able to toilet, shower and change clothes outside the direct view of staff of the opposite gender viewing them. The offenders explained areas such as doors within the cell area and curtains covering the shower areas prevent staff from seeing their genitalia. The offenders reported hearing opposite gender staff announce their presence when entering the housing unit.

There were 17 formal staff questioned about cross gender search practices. All staff reported that cross gender strip searches or cross gender body cavity searches do not occur at this facility and they had not heard of any recent time that it occurred.

All staff interviewed reported that opposite gender staff announcements are made when entering the housing units. Further, staff indicated that cross gender search techniques are taught in training but no staff member had performed a cross gender search that they could remember, during this audit period.

Corrective Action: No further corrective action is required for this standard.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

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

115.16 (a)

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)? Yes No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? Yes No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? Yes No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? Yes No

115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? Yes No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No

115.16 (c)

- 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 No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Offender Rosters
- Interviews with the following:
 - Director
 - Random Staff

Administrative Regulation 421, Prison Rape Elimination Act, section 421.07, states that all inmates will be afforded PREA education, including inmates who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The PREA resource Manual requires that the facility utilize the necessary resources that are available to assist inmates who have disabilities to ensure those inmates have equal access to participate in or benefit from every aspect of the prevention, detection and response to sexual abuse and sexual harassment.

Operational Procedure 421, Prison Rape Elimination Act, section 421.07, states that the Jean Conservation Camp will provide the inmate education in formats accessible to all inmates, including those inmates who are limited English proficient, deaf, visually impaired or otherwise disabled as well as to those who have limited reading skills. If it appears that an inmate is unable to comprehend the information being provided, staff will utilize effective communication (i.e., using simple language, requesting feedback confirming comprehension) to convey the PREA information to the inmate.

The inmates receive the PREA information in the Prison Rape Elimination Act Education and Information Sheet when they first arrive at the facility. The PREA information sheets are available in both English and Spanish. All inmates are also required to watch a 15-minute video on Nevada department of Correction's PREA policy. The video and handout are available in both English and Spanish. The video does have closed caption for the hearing impaired. The policy is also available in braille format. The PREA Compliance Manager stated that she is able to obtain the PREA policy in braille if a blind inmate were to be housed at the Jean Conservation Camp. Inmates are required to sign acknowledgement of receiving the information.

Written documents, to include the Prison Rape Elimination Act brochures and posters are provided in English and Spanish to the offender population. During the tour, it was noted that Prison Rape Elimination Act posters and Victim Advocate memorandums were prominently displayed in areas in both English and Spanish. Additionally, the telephone numbers to a Victim Advocate and to a reporting line are posted on the walls near the offender accessible telephone. The information provided, which is in English and Spanish languages, is that the calls are not recorded, not monitored and are free of charge.

Administrative Regulation 658, Reasonable Accommodations, section 658.07, states that the ADA Coordinator, with the assistance on the Medical Department, will ensure that hearing and vision impaired inmates have access to auxiliary aids when required for effective communication in assessing and participating in programs and services, including PREA reporting and follow-up. Since all inmates arriving at the Jean Conservation Camp are transferred from a different facility, their medical appliances are transferred with them.

Nevada Department of Corrections has contracted with CTS Language Link to provide both spoken interpretation and written translation services. Information on how to access those services can be found in the Supervisor's office and the caseworker's offices. The audit team was provided copies of the contract with CTS Language Link. At the time of the audit there were no inmates housed at the Jean Conservation Camp that did not speak fluent English.

Nevada Department of Correction's PREA Manual states that staff shall not use and/or rely upon inmate interpreters, inmate readers, or other types of inmate assistants. All of the staff knew the limit of utilizing an inmate interpreter. A majority of the staff were aware of and knew how to use the language link.

The Jean Conservation Camp 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-responder duties, of the investigation of the inmate's allegations. The use of inmate interpreters in these limited circumstances will be documented. Staff interpretation will be conducted within a confidential office and the staff member

will be responsible for documenting the interpretation in NOTIS. The interpreting staff member will maintain confidentiality regarding all information that was interpreted.

During the 17 random staff that were interviewed, all knew there was a process of utilizing a telephonic interpreter for interpreter services. All interviewees indicated they would first try to find an on-site staff member to provide translation and, if they could not, they would then contact a supervisor. The supervisory staff interviewed were all aware of the posting that included the phone numbers and the interpreter access process. The telephone numbers for the translator service were posted in the supervisor's office. Supervisory staff indicated they knew where the Language Link contact information was and further stated that they had not needed the services of the Language Line while they have worked at the Jean Conservation Camp.

While interviewing intake staff, they explained the process of how they read the Prison Rape Elimination Act policy, and other pertinent information, to offenders who are vision impaired or unable to read or clearly understand English. Intake staff take their jobs as communicators very seriously when dealing with new arriving offenders.

Corrective Action: No corrective action was required for this standard.

Standard 115.17: Hiring and promotion decisions

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

115.17 (a)

- 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 No
- 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 No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No

115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? Yes No
- 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 No

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check? Yes No
- Before hiring new employees who, may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? Yes No

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? Yes No

115.17 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? Yes No

115.17 (f)

- 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 No
- 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 No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? Yes No

115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? Yes No

115.17 (h)

- 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 No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Pre-Employment Questionnaire for new applicants
- Interviews with the following:
 - Administrative (Human Resources) Staff
- Personnel files for current employees, new employees and employees receiving promotions.

Nevada Department of Corrections Prison Rape Elimination Act Manual, mandates that the Department shall not hire or promote an individual to a position that may have contact with offenders who meets any of the three criteria listed in section 115.17 (a). NDOC requires that every applicant/volunteer/contractor who may have contact with an inmate disclose the following information prior to entering into any Nevada Department of Corrections facility:

- Have they engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, or have they 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 they been civilly or administratively adjudicated to have engaged in the activity described in any part of this question.
- Have they 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.

- Answering affirmative to either of these questions can result in the denial of employment or, in the case of contractors and volunteers, denial of access into the facility. Providing false information is grounds for dismissal. Staff answer these questions during the initial interview process, and during any promotional interview. A review of the personnel and volunteer's files demonstrated compliance with this policy. Every file reviewed had a copy of these questions answered by the employee.

Nevada Department of Corrections Administrative Regulation 300 requires that NDOC complete a background check before hiring or promoting any staff member. Nevada Department of Corrections uses National Crime Information Center (NCIC) and the Nevada Department of Public Safety, Records, communications and Compliance Division to complete background clearances. Sixteen employee's personnel files were reviewed. All sixteen of the personnel filed showed that a background check had been completed upon initial hiring or during the last promotion.

Human Resources must make its best effort 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.

Nevada Department of Corrections policy requires Human Resources to disclose any substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom the employee has applied for work.

Nevada Department of Corrections Operational Procedure SS-0063, Background Clearance Application Procedure, requires that every contractor must have a background check completed prior to entering the facility. Additionally, AR 212 requires that the background check be completed every three years thereafter. According to this policy, a contractor is always denied if they have any type of sexual conviction.

Fifteen personnel files were reviewed, and all 15 of the personnel filed showed that a background check had been completed upon initial hiring or during the last promotion.

The office of the Inspector General is required to do a biannual audit of random Human Resources files for employees of the Department who were hired in the previous six months to ensure compliance with the required background check. Nevada Department of Corrections conducts background checks on all current employees every three years. The month that the employee was hired determines which month the follow-up background check will be conducted.

Nevada Department of Corrections policy requires Human Resources to disclose any substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom the employee has applied for work.

Background Clearance Application Procedure requires that every contractor must have a background check completed prior to entering the facility. Additionally, Administrative Regulations requires that the background check be completed every three years thereafter. According to this policy, a contractor is always denied if they have any type of sexual conviction.

The Jean Conservation Camp was able to provide the documents that all contractors and volunteers must fill out and sign prior to being allowed to have contact with inmates. They are also required to disclose any prior sexual misconduct convictions, administrative or civil actions, annually during their PREA training. Policy requires the volunteer or contractor to disclose any sexual misconduct. Failure to do so would result in restriction from grounds. A list of all of the volunteers and contract staff approved to enter Nevada Department of Corrections facilities was provided to this auditor. The three contractor

files and two volunteer files were reviewed by the audit team. The documents viewed by this audit team showed that all of the approved individuals have had their background cleared within the past three years and had signed a document disclosing any prior sexual misconduct in an institutional setting.

Policy states that staff shall adhere to the following principles:

- I shall maintain high standards of honesty, integrity and impartiality free from any personal considerations, favoritism or partisan demands in connection with my duties.
- I shall be courteous, considerate and prompt when dealing with the public, realizing that as state employees and employees of the Department, we serve the public.
- I shall maintain mutual respect and professional cooperation in my relationships with other staff of the Department of Correction.
- I shall be firm, fair and consistent in the performance of my duties and shall not allow my personal convictions, beliefs, prejudices, or biases to interfere with my official acts or decisions.

The PREA Coordinator shall research the Sexual Incident Report System for substantiated incidents involving the former employee, accurately complete the form, and return to the institutional/correctional employer.

Completed Reference Checks, Authorization to Release Information, Acknowledgement and Disclosure and Performance and Conduct forms were all provided and reviewed for compliance.

Of the 15 personnel files reviewed by the audit team, all were up to date with the current questions and documentation. The thoroughness of this form captures all Prison Rape Elimination Act related information required.

During the interview with the Warden, he explained that in the event that a contractor, volunteer or an employee is no longer allowed on grounds or access to offenders, due to violation of sexual abuse policy, their name is placed on a statewide 'Do Not Allow' or 'Stop' list.

This list is reviewed when completing security clearances for new contractors, volunteers or employees and placed at the front security office of each facility.

During the interview with the Supervisor of Human Resources, she stated the facility performs criminal record background checks, on all employees every three years, through the National Crime Information Center, and considers pertinent civil or administrative adjudications for all newly hired employees who may have contact with offenders and all employees being considered for promotions.

Corrective Action: No corrective action was required for this standard.

Standard 115.18: Upgrades to facilities and technologies

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

115.18 (a)

- 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.) Yes No
 NA

115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)
Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Director
 - Warden
 - PREA Coordinator
 - PREA Compliance Manager
- Observations of physical plant during our on-site review rounds

OP 421, the Nevada Department of Corrections PREA Manual, requires that when the Department is designing or acquiring any new facility or planning any major expansion, acquisition or modification, that the Director, Deputy Director and designee consider the effect of the design, acquisition, expansion or modification on the Department's ability to protect inmates from sexual abuse. Additionally, the manual requires the Department when installing new electronic monitoring systems, to consider how the technology will enhance the Department's ability to protect inmates from sexual abuse.

Each facility shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect offenders against sexual abuse.

During an interview with the Warden, he told the auditor that the Jean Conservation Camp reviews any/all previous Prison Rape Elimination Act reports and considers identified blind spots, offender movement or staffing issues in determining, if needed, the placement of cameras. The Warden also stated that the Jean Conservation Camp did not have any physical upgrade to buildings since the last audit.

During interviews with the Statewide PREA Coordinator, she stated that when any projects where installation or updating of video equipment is anticipated, a case-by-case review is included in the determination of locations within any facility.

The Institutional PREA Compliance Manager indicated there have not been recent modifications/additions to the buildings or video monitoring system. Ongoing reviews occur at an institutional and state level for the possible need to add monitoring equipment.

Corrective Action: No corrective action was required for this standard.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

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

115.21 (a)

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)
 Yes No NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA
- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)
 Yes No NA

115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? Yes No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? Yes No

- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? Yes No
- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? Yes No
- 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 No NA
- Has the agency documented its efforts to secure services from rape crisis centers? Yes No

115.21 (e)

- 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 No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) Yes No NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- 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 No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Offender Roster
- Interviews with the following:
 - PREA Compliance Manager
 - Random Staff
 - Required SAFE/SANE staff from the University Medical Center in Las Vegas Nevada.
 - Required Victim Advocate staff from Rape Crisis Center in Las Vegas, Nevada

Administrative Regulation 421, section 421.12, states that Nevada Department of Corrections Office of the Inspector General, will investigate all allegations of staff on inmate sexual abuse and sexual harassment and all inmate-on-inmate sexual abuse. Operational Procedure 421.12, Prison Rape Elimination Act, address the protocols for collection of evidence for use in an administrative proceedings and criminal prosecution. The policies include discovery, handling, delivery, retrieval, logging, storage, retention and destruction of all evidence.

Nevada Department of Corrections policies mirror the National Protocol for Sexual Assault Medical Forensic Examinations as set forth by the Office of Violence Against Women. Jean Conservation Camp uses a coordinated team approach to respond to reports of sexual assault. They provide access to a victim advocate, and provide immediate medical care through the local medical center. All allegations are investigated. Jean Conservation Camp utilizes a qualified SAFE/SANE nurse from the community to conduct medical exams and the process is handled, keeping the victim's confidentiality in mind. The policy states that the inmate will be provided medical and emotional support at no cost to the inmate.

Operational Procedure 421, Prison Rape Elimination Act, sections 421.12 and 421.13, provides staff with guidance on to transport an inmate that is in need of a forensic exam. The procedure explains the evidence collection process, prior to the exam, the time frames for conducting the exam and the location to transport the inmate victim to. The facility utilizes a check list (form B2093 and C2094) to make sure that all procedures are followed during the initial PREA response. These check lists cover evidence collection, crime scene preservation, medical referral and transfer to a medical exam. No inmates have required a forensic exam during this audit period.

Nevada Department of Corrections and Jean Conservation camp utilize a local hospital's Sexual Assault Nurse Examiner to conduct the forensic exams. Currently Nevada Department of Corrections has an

agreement with University Medical Center in Las Vegas Nevada to conduct forensic exams. The audit team contacted the SAFE/SANE Coordinator with University Medical Center and confirmed that they conduct the forensic exams for Jean Conservation Camp. If an inmate is taken to University Medical Center for a SAFE/SANE exam, they report to the emergency room. A SAFE/SANE nurse is called in to perform the exam. If there is no SAFE/SANE nurse available, the physician on duty will perform the exam. The person that the team spoke to stated that all of the certified SAFE/SANE nurses' training follows the National Protocol for Sexual Assault Medical Forensic Examinations as set forth by the Office of Violence Against Women.

Jean Conservation Camp uses the Rape Crisis Center in Las Vegas for victim advocacy services. The audit team was provided a copy of the contract however, the Rape Crisis Center has not signed the agreement as of the time of the audit. The victim advocate is still providing emotional support services and schedules ongoing emotional support telephonic meetings with offenders. Telephonic meetings are currently the scope of services due COVID-19. According to the coordinator, they will accompany the offender, if requested, during the exam and investigation process under normal, non-pandemic conditions. Nevada Department of Corrections is working with the Rape Crisis Center to update the contract. Rape Crisis Center has either staff or volunteers answering the rape hotline 24 hours a day, seven days a week. All of the volunteers are required to take a 50-hour training course on crisis intervention.

During the interviews with the investigators and the PREA Compliance Manager, they stated that inmates are offered a victim advocate in the event that they are going to have a forensic exam. The investigators also stated that they would let the victim advocate accompany the victim inmate during the investigation interview if the inmate requests it. They had not had any inmates request a victim advocate during the interview in the past.

According to the PAQ, in the past 12 months, there were no forensic medical exams conducted.

During formal interviews with 17 formal random staff, when asked about their actions, when notified of a sexual assault, they indicated they would separate the victim and subject (if known). Staff would quickly assess the need for Medical or Mental Health assistance. Then staff would contact their supervisor, initiate evidence protocols by closing off the crime scene area to limit who had access. Further, staff would make sure all available evidence was collected and the offender was offered a SAFE/SANE exam, if warranted. Staff indicated that they begin the process but the investigators from their facility or Headquarters, usually handles the most part of the process.

If requested by the victim, a victim advocate provides assistance and support during the forensic medical examinations through the local court process. Victims are provided with the victim advocate contact information and are given education, mental health referrals, and offered follow-up services.

According to the Pre-Audit Questionnaire, interviews with all involved in the process and document reviews, over the past 12 months, zero forensic medical exams had been required, requested or conducted.

Standard 115.22: Policies to ensure referrals of allegations for investigations

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

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? Yes No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? Yes No

115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? Yes No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? Yes No
- Does the agency document all such referrals? Yes No

115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).) Yes No NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Agency Organizational Chart
- Interviews with the following:
 - Director
 - Investigative Staff

Administrative Regulation 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.12, 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." Additionally, the Administrative Regulation states that all substantiated criminal cases shall be referred to the applicable prosecutorial authority for review of prosecution. This information is on the Nevada Department of Corrections website. Administrative Regulation 457, Investigations, states that all incidents shall be reported to the Inspector General per the requirements of AR 332. The Inspector General or designee shall be immediately notified of PREA related or serious incidents involving suspected criminal activity by inmates, staff, or outside parties; or serious violations of Department policy.

Jean Conservation Camp Operational Procedure 421, Prison Rape Elimination Act, section 421.21, requires that all allegations of sexual abuse and sexual harassment will be investigated by the Inspector General. It is the responsibility of every employee, regardless of assignment or class, to report Sexual assault/abuse/harassment according with PREA Standard 115.22.

The audit team spoke with the Inspector General for the Nevada Department of Corrections. He confirmed that it is the Inspector General Office's responsibility to investigate PREA allegations in the Nevada Department of Corrections. The Inspector General's office is notified via the Nevada Offender Tracking Information System the electronic incident notice system used by Nevada Department of Corrections. In emergency cases they are notified via telephone. Once the Inspector General's office receives the notice, they will assign an investigator to the case. At the conclusion of the investigation, if it appears that a felony has taken place, the Inspector General will refer the case to the Attorney General. The Nevada Department of Corrections Prison Rape Elimination Act Manual provides further direction on the Office of Inspector General's responsibility while conducting a criminal investigation.

Members of the audit team interviewed the Supervising Investigators for the Inspector General's Office regarding the investigation of PREA allegations. The investigator stated that they (the Inspector General's Office) investigate all PREA cases that may result in prosecution. If the incident does not appear to be a criminal act, or involve a staff member, the case may be assigned to a supervisor at the institution for fact finding and investigation. One of the institutional investigators was also interviewed. He stated that, if an investigation is not criminal or involve staff, the investigation may be delegated to him through the Facility Manager's Office.

A log is maintained by the Inspector General's office of all sexual abuse and sexual harassment allegations and the outcome of each. The 2020 and 2021 logs were provided to the auditor. Jean Conservation Camp had two allegations of sexual abuse and sexual harassment during the 18-month audit review period.

During the 15 formal interviews with the offender population, all interviewed knew at least two ways to notify someone of a Prison Rape Elimination Act issue or concern. A majority knew four to five different ways.

During the interview with the Warden, he stated that all allegations of sexual abuse and sexual harassment are taken seriously. He ensures that every allegation received is investigated completely.

During the interview with the Director, he stated that the agency, through the Prison Rape Elimination Act Statewide Coordinator, ensures that an administrative or criminal investigation is tracked and completed for all allegations of sexual abuse or sexual harassment.

All non-confidential policies are on the Nevada Department of Correction's public website.

Corrective Action: No corrective action was required for this standard.

TRAINING AND EDUCATION

Standard 115.31: Employee training

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

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? Yes No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment Yes No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? Yes No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? Yes No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? Yes No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? Yes No
- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? Yes No

115.31 (c)

- Have all current employees who may have contact with inmates received such training? Yes No
- 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 No
- 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 No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions.

This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Random Staff
 - In-Service Training Records

- Training curriculum, both hard copy/electronic
- Training verification Logs
- Employee training records

The policy requires staff to be trained initially in PREA upon employment through the Correctional Employee/Officer Basic Pre-Service Training (PST). After the PST, the training is required every two years. In years which an employee does not receive PREA refresher training, the employee shall receive refresher information on current PREA policies.

Operational Procedure 421, Prison Rape Elimination Act, section 421.05, states that in a staff member transfers from an all-male facility, they will receive PREA training tailored specifically toward female offenders. Completed training will be documented on an On-The-Job training form and placed in the employee's training file.

In 2017, all current employees were to receive training in cross gender/transgender pat down searches. Any employee that is hired after 2017 receives the training in the PST. Additionally, this training is provided in the annual Defensive Tactics Course. PREA training for 2019, 2020 and 2021 are computer-based training. This is a full PREA training course, including any relevant updates or changes to PREA policies. Participants must pass a quiz to receive credit for the course. A certificate of completion is printed at the completion of these courses.

All general training for the Jean Conservation Camp staff is conducted by the Nevada Department of Corrections Central Office. In an attempt to determine compliance with this standard, the audit team was provided with a printout of all staff that work at Jean Conservation Camp who have received the training for 2017 (pat-down search of transgender inmates), 2019 (current PREA training) and 2020, (refresher PREA training) from the Training Manager. The Training Manager was able to provide the lists of staff who completed the training and staff who had not completed the training. A review 15 of the training files showed that all staff attend the required PREA training in 2019 and 2020. Computer generated certificates of completion were provided to the auditor

Administrative Regulation 360, Correctional Employee/Officer Basic Training Program, requires that all staff attend the 80-hour new employee training upon employment. Included in this training is PREA training. The training syllabus was provided with the pre-audit materials. The training includes the following:

- Zero Tolerance Policy
- How to report, detect, prevent and respond to such allegations
- Inmate's rights to be free from sexual abuse/harassment
- Inmate's rights to be free from retaliation from reporting incidents
- The dynamics of sexual abuse and harassment in confinement
- The common reactions of sexual abuse and harassment victims
- How to detect and respond to signs of threatened and actual abuse
- How to avoid inappropriate relationships with inmates
- How to communicate effectively and professionally with the offenders who are Lesbian, Gay, Bisexual, Transgender or Intersex (LGBTI)
- How to comply with relevant laws related to mandatory reporting

All of the staff interviewed were able to explain their role in the PREA process. Every staff knew the zero-tolerance policy. They knew that they were mandated to report any PREA allegation to their supervisor and to maintain confidentiality. The staff stated that they would make sure the alleged victim was safe and preserve any crime scene. The general view of the staff that were interviewed was that they would take any allegation serious and would respond accordingly.

All employee training will be documented and confirmed by signature and will be maintained in the employee's supervisory and training files.

Once the training is provided, the employees are required to sign an acknowledgement of receipt or print out their completed certificate of training and brochure. Employees are required to attend the training on an annual basis. At the Jean Conservation Camp, the training is tailored toward a female offender population.

In review of all 15 formal random staff interviews, the auditors learned that all 15 staff had either received formal training and/or the refresher On-the-job training on Prison Rape Elimination Act within the last 24 months. The training included prevention, detection, reporting and response. Additionally, all staff interviewed stated they had received the training and signed an acknowledgement form stating they understood the content. Staff also indicated they had been provided with written information.

During the on-site visit, all 15 training record reviews were conducted and it was determined that all 15 staff reviewed, as well as the contractors, had received and are current in the mandatory Prison Rape Elimination Act training.

I was very impressed with the Jean Conservation Camp's current and past training. Their tracking system, oversight and the daily checking and re-checking of staff currently working, to ensure compliance, was very efficient. This showed they took offender sexual safety seriously.

115.31 Employee Training

(d) The agency shall document, through employee signature, or electronic verification, that employees understand the training they have received.

- **Concern:**
During the on-site personnel file reviews, auditors found that documented PREA training verification of two staff members was not in their files. We discussed how to come into compliance.
- **Update:** On June 11, 2021, I received an email, with the attached training documentation, from the PREA Compliance Manager, of the remaining two staff members PREA training. The training had been completed prior to my review and a copy has now been added to their file to show compliance to this Standard.

Corrective Action: No additional corrective action is required for this standard.

Standard 115.32: Volunteer and contractor training

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

115.32 (a)

- 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 No

115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? Yes No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Contractors
- Training curriculum, both hard copy/electronic.
- Training verification Logs
- Contractor training records

It should be noted, that due to the COVID-19 pandemic, no volunteers were on-site during this audit period. I spoke to two volunteers, by telephone, during the post-audit portion of this audit. Proper paperwork and education of volunteers were reviewed.

Administrative Regulation 802, Community Volunteer Program, requires that all volunteers and contractual staff shall attend PREA training. The training covers the Nevada Department of Corrections zero tolerance policy, and the volunteer/contractor's responsibility under the Nevada Department of Correction's sexual abuse and sexual harassment prevention, detection and response policies and procedures. An acknowledgment of receipt of training is then signed by the volunteer or contractual staff. This training is required prior to having contact with inmates and then every three years after that.

Jean Conservation Camp has several volunteers in a variety of programs that normally come into the facility. None of the volunteers were on-site at the facility within the past year due to COVID-19

precautions. Three examples of the zero-tolerance acknowledgment forms were provided with the pre-audit materials. Documentation was provided showing that all volunteers listed had received prior PREA training, but were currently outdated. They will receive training again prior to coming back to the facility. All of them signed acknowledging that they have received and understood the PREA training. All of the documents were signed by the volunteer within the past 24 months.

Five contractor, Nevada Department of Forestry, currently are able to provide services to the inmate population. The facility provided proof that the contractors attended PREA training.

During the interview with the contractors, they were able to explain the Nevada Department of Corrections zero tolerance policy. They knew their responsibility to report sexual abuse/sexual harassment and they were able to adequately describe what they would do if an inmate disclosed to them that they had been sexually abused or harassed.

No volunteers were interviewed on-site due to COVID-19 restrictions.

There were no volunteers on-site during our audit that are currently serving at the Jean Conservation Camp. Contact information of two volunteers, that provide community outreach, education, vocational and the other volunteer services, were provided. Three of the five contracted staff, that were on-site during our audit, were members of the Nevada Department of Forestry. All five contractors and both of the volunteers, that were interviewed by telephone, were well versed in the Zero-Tolerance policy and gave examples of what to look for and who to report to, in case of a PREA allegation or suspected PREA concerns. Everyone interviewed stated they would document any information required prior to leaving grounds.

A review of the training presentation guide confirms that all 10 topics required by section 115.31 of the Prison Rape Elimination Act are included in the PREA class provided.

Mandatory training includes:

- Nevada Department of Correction's zero tolerance policy for sexual abuse and sexual harassment
- How to prevent, detect and report sexual abuse and sexual harassment
- The offender's rights to be free from sexual abuse and sexual harassment
- The rights of employees and offenders to be free from retaliation for reporting sexual abuse and sexual harassment
- The dynamic of sexual abuse and sexual harassment in a confined setting
- Common victim's reactions to sexual abuse and sexual harassment
- How to detect and respond to signs of actual and threatened sexual abuse
- How to avoid inappropriate relationships with offenders
- How to effectively communicate with offenders of the Lesbian, Gay, Bi-Sexual, Transgender or Intersex population
- How to comply with mandatory reporting laws

Corrective Action: No corrective action was required for this standard.

Standard 115.33: Inmate education

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

115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? Yes No

115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? Yes No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? Yes No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? Yes No

115.33 (c)

- Have all inmates received the comprehensive education referenced in 115.33(b)? Yes No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility? Yes No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? Yes No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions? Yes No

115.33 (f)

- 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 No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Intake staff
 - Random Offenders
- Facility Orientation Booklet
- Facility PREA Brochure
- On-site review of physical plant, PREA poster locations, educational material within housing units, common areas, education areas and work/recreation stations.

Administrative Regulation 511, Inmate Orientation Program, requires that inmates receive information on PREA upon arrival. The inmates are provided an orientation handbook and a PREA Information and Education Sheet. This document explains the Nevada Department of Corrections zero tolerance policy, the inmate's rights under PREA and how to report a PREA incident. The Information and Education Sheet are available in both English and Spanish. Administrative Regulation 511 requires that when a literacy problem exists, staff will assist an inmate in understanding the material. Administrative Regulation 421 states that inmates are shown the Nevada Department of Corrections Comprehensive PREA video within 30 minutes of upon arrival. The inmates then sign a document acknowledging that they watched the video and understand the information. The information that the inmate received the training is input into NOTIS. Jean Conservation Camp Operational Plan 504, Reception and Initial Classification Process, section 504.1, reiterates the Nevada Department of Corrections policy on educating newly arrived inmates to the facility.

The Offender Handbook contains the Nevada Department of Corrections zero tolerance policy on sexual abuse and sexual harassment, that inmates have a right to be free from sexual abuse/harassment and

how to report sexual abuse/harassment. The handbook provides the phone numbers and addresses to the State of Nevada's Inspector General's Office, the Rape Crisis Center in Las Vegas and the New Mexico Department of Correction PREA Unit so that inmates can report to an outside government agency. Nevada Department of Corrections has a contract in place with CTS Language Link to provide interpretive services for offenders who do not understand English.

Jean Conservation Camp has the policy available in written format in both Spanish and English. The video is available in both Spanish and English and includes closed caption for the hearing impaired. JCC has access to the PREA policy in braille for inmates who are vision impaired. According to the intakes staff who provide the inmates the education, if the inmate is unable to comprehend the information, it is explained to them in detail.

The audit team requested that the intake staff show them through the intake process. When the inmates first arrive, they are shown a 15-minute video. This video explains the Nevada Department of Corrections zero tolerance policy and how to report a PREA allegation. The inmates are then interviewed and asked the PREA screening questions addressed in standard 115.41. The inmates are also provided the inmate handbook and PREA information and Education Sheet. The caseworker then interviews the inmate and discusses the PREA information that was provided with the inmate to make sure that the inmate understands the information that they are received. The inmate then signs the acknowledgment sheet at that time. If the inmate arrives after normal business hours, they are provided the information the next day. The intake staff explained to the audit team what they do if an inmate does not comprehend English. They provide the Spanish version of the video for them to watch and give them copies of PREA Information and Education Sheet in Spanish. If the inmate does not speak either English or Spanish, they would use the Language Link. According to the intake staff, they have not had to use the Language Link in the past. At the time of the on-site portion of the audit, there were no inmates that did not speak fluent English.

None of the inmates currently housed at Jean Conservation Camp were housed at Jean Conservation Camp prior to Nevada Department of Correction's implementation of the PREA policies.

Fifteen examples of the inmate education acknowledgment forms were provided with the pre-audit materials. Documentation provided to this auditor, along with random reviews of fifteen inmate files, and inmate interviews indicated that the inmate education portion of PREA is well within the standard. A review of inmate files revealed that copies of the signed acknowledgement form were in 15 of the 15 files reviewed. All of the inmates were provided the comprehensive PREA education on the day of arrival or the next day

Of the inmates 15 inmates interviewed, all of those stated that they remember receiving the PREA information upon arrival. All 15 inmates were familiar with the PREA policy and knew that sexual assault and harassment were a violation of the rules. Every one of the inmates that were interviewed knew at least three ways that they could report a PREA.

All of the common areas had posters, in English and Spanish, explaining the Nevada Department of Corrections PREA zero tolerance policy and how to report sexual abuse/sexual harassment visible to the inmate population. Additionally, the posters with the zero-tolerance policy and the telephone numbers to report sexual abuse to an outside agency are painted on the walls near the inmate telephones.

Corrective Action: No corrective action was required for this standard.

Standard 115.34: Specialized training: Investigations

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

115.34 (a)

- 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 No NA

115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA
- Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA
- Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA
- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Agency Organizational Chart
- Interviews with the following:
 - Investigative Services staff
- Training curriculum
- Training verification certificates for investigators

Nevada Department of Corrections utilizes investigators from the Inspector General's Office to conduct all PREA allegation investigations. The investigators are required to attend the same PREA training as all Nevada Department of Corrections employees. Additionally, they are required to take the National Institute of Corrections course on Investigating Sexual Abuse in a Confined Setting. This course covers techniques for interviewing sexual abuse victims, compelled interview warnings, sexual abuse evidence collection and criteria and evidence required to substantiate a case for administrative or criminal prosecution.

This auditor was provided a copy of the training syllabus and completion certificates of the investigators for the Inspector General's Office. The Inspector General's Office has nineteen PREA trained investigators. The audit team was provided copies of all nineteen investigator's training certificates. Jean Conservation Camp has one supervisor that are used as local investigators to investigate non-criminal, non-staff PREA cases. Their training certificate, demonstrating completion of the National Institute of Corrections courses, were provided to the audit team for review.

The audit team interviewed the investigator from Jean Conservation Camp and two investigators from the Inspector General's Office. During the interview with the investigators, they demonstrated knowledge on how to conduct a PREA investigation. This knowledge included what evidence to look for during an investigation, how to interview the alleged victim, suspect and potential witnesses. The investigators were able to explain how and when they would refer a case for prosecution. All three of the investigators interviewed knew how to conduct compelled interviews.

115.34 Specialized Training

(c) The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

- **Concern:** During the on-site staff file reviews; we could not locate the specialized training certificate indicating that the Camp Manager had received training in conducting Administrative investigations in confinement settings.
- **Update:** On June 2, 2021, I received an email, showing the training documentation and completed specialized training certificate that the Camp Manager received in August of 2020. This documentation shows compliance to this Standard.

Corrective Action: No corrective action was required for this standard.

Standard 115.35: Specialized training: Medical and mental health care

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

115.35 (a)

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (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 No NA
- 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 No NA
- 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 No NA
- 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 No NA

115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.) Yes No NA

115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (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 No NA

115.35 (d)

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 No NA

- 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 No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Agency Organizational Chart
- Interviews with the following:
 - Medical staff
 - Mental Health staff
- Training curriculum and certificates

Nevada Department of Corrections policy on medical training requires that all full and part time medical and mental health care practitioners who work regularly in the facility receive specialized PREA training.

The Nevada Department of Corrections PREA Manual states that all medical and mental health employees assigned in the Department will complete specialized training specifically in:

- How to detect and assess signs of sexual abuse and sexual harassment
- How to preserve physical evidence of sexual harassment
- How to respond effectively and professionally to victims of sexual abuse and sexual harassment
- How and to whom to report allegations or suspicions of sexual abuse and sexual harassment

This training is provided by the National Institute of Corrections on-line training facility. A printed certificate documenting the completion of the class is to be placed in the employee's supervisory file at the institution and within the Department's employee training file. The two on-line classes that medical/mental health staff are required to take to fulfill this standard are "Medical Health Care for Sexual Assault Victims in a Confined Setting" and "Behavioral Health Care for Sexual Assault Victims in a Confined Setting".

All medical and mental health care practitioners are also required to receive the training mandated for employees in PREA standards 115.31 and 115.32, depending on their employment status.

Administrative Regulation 360, Correctional Employee/Officer Basic Training Program, requires that all staff attend the 80-hour new employee training upon employment. Included in this training is PREA training. Medical Staff are not excluded from this requirement.

Jean Conservation Camp has one medical and one mental health staff member assigned to the facility. There are medical and mental health staff, which work at the other State Prisons in the area, who regularly visit Jean Conservation Camp to provide routine medical and mental health services to the inmate population. In the event of a medical or mental health emergency, the inmate is transferred to the local hospital or a local Nevada Department of Corrections facility (Florence McClure Women's Correctional Center for females).

Corrective Action: No corrective action was required for this standard.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

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

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility? Yes No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument? Yes No

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? Yes No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? Yes No

115.41 (e)

- 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 No
- 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 No
- 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 No

115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? Yes No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a referral? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a request? Yes No
- Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? Yes No
- 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 No

115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? Yes No

115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.

- Interviews with the following:
 - Staff responsible to screen for risk of victimization
 - Random Offenders
 - PREA Coordinator
 - PREA Compliance Manager
- Offender electronic files
- Risk Screening tool: Electronic
- Mental Health Referral forms

The PREA Risk Assessment Tool (DOC 2097) utilized by NDOC has 10 questions to assess the inmate's vulnerability toward victimization and 4 questions to assess his potential toward predatory behavior.

The PREA Risk Assessment, that will be conducted within 72-hours from arrival, will be used for all screenings and assessments include the following factors:

- Possible Victim Factors:
 - Whether the inmate has a mental, physical or developmental disability.
 - The age of the inmate.
 - The physical build of the inmate.
 - Whether the inmate has previously been incarcerated.
 - Whether the inmate's criminal history is exclusively nonviolent.
 - Whether the inmate has prior convictions for sex offenses.
 - Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming.
 - Whether the inmate has previously experienced sexual victimization.
 - The inmate's own perception of vulnerability.
 - A transgender and/or intersex inmate's own views with respect to his/her safety shall be given serious consideration.
- Possible Aggressor Factors:
 - History of institutional violent behavior.
 - Any history of sexual abuse.
 - History of convictions for violent offenses.
 - History of correctional facility sexual abuse, which may include violations contained in AR 707 that are of a sexual nature.

A corresponding alert in NOTIS will be entered on all known victims (PREA-High Risk of Sexual Victimization) and all known predators (PREA-High Risk of Sexual Abusiveness).

The audit team reviewed the intake process during the on-site tour. When an Inmate arrives at Jean Conservation Camp, a designated Correctional Casework Specialist interviews the inmate in a confidential, secure office. The Correctional Casework Specialist completes the objective screening assessment, with the input of the inmate. A case note is entered in NOTIS to document that the assessment tool was completed and note if any alerts were added. All data will be entered into the Microsoft Access PREA tracking database. Once the assessment tool is completed, it will be placed in the I-file. If Jean Conservation Camp receives an inmate from another Nevada Department of Corrections facility after normal business hours, the inmate is screened the next business day.

Policy requires that the inmate is personally interviewed again within 30 days. If there are no additional concerns, a case note (PREA 30 Day Follow Up) is generated to reflect that there have been no changes to the PREA Intake Assessment. If, upon interview, additional information is received, a PREA Risk Assessment is completed. A corresponding Alert in NOTIS is entered on all known victims (PREA High Risk of Sexual Victimization) and all known predators (PREA High Risk of Sexual Abusiveness).

Inmates are reassessed at each 12-month regular review and a PREA Regular Review Assessment case note will be entered to document said action. Inmates will also be reassessed if; the inmate requests it, a staff member refers an inmate for reassessment, if additional information is received or if the inmate is involved in an incident of sexual abuse. According to the Operational Procedure, Inmates cannot be disciplined for refusing to answer these questions. The PCM and the caseworker, both stated that the inmates are not disciplined if they refuse to answer the screening questions.

The audit team reviewed fifteen random inmate files. All of the files included the initial screening and fourteen contained the information of the 30-day follow-up screening. The one had only been at the Jean Conservation Camp for sixteen days.

During interviews with a sample of the inmate population all 15 inmates interviewed remember going through the PREA screening process on the day of arrival. Of those same 15 inmates, all but one remembers being asked questions regarding their sexual safety a second time within one month of arrival (most said within a few days).

Only staff have access to the files. The results of the risk assessment are not shared with any other inmates.

Corrective Action: No additional corrective action is required for this standard

Standard 115.42: Use of screening information

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

115.42 (a)

- 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 No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? Yes No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? Yes No

115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? Yes No
- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? Yes No

115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? Yes No

115.42 (e)

- 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 No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? Yes No

115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?
- (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 No NA
- 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 No NA

- 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 No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Staff responsible for Risk of Victimization
 - PREA Coordinator
 - PREA Compliance Manager
- Offender electronic file
- Risk Screening tool: Electronic form
- Mental Health Referral form

Note: At the time of the audit, the Jean Conservation Camp did not have any offenders identified as Transgender or Intersex.

Administrative Regulation 573, Prison Rape Elimination Act Screening and Classification, section 573.03, states 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. Prior to initiating a bed move, the caseworker must check PREA Alerts for victimization and/or abusiveness. At no time will a known victim and a known aggressor be housed together in a two-person cell. A possible victim and a possible aggressor should not be housed together unless necessary. Non-victims and non-aggressors may be housed with any other category, subject to individual case factors.

Jean Conservation Camp is a working Firefighting Camp. Out of the 126 offenders at the Jean Conservation Camp, 80 currently work for the Nevada Division of Forestry, 32 work on-site at the Camp

and 14 are currently pending classification or are unassigned. The physical design of the facility is comprised of five dorm-style housing units. Each housing unit can house up to 48 female offenders. If the facility had any inmates classified as victim likely or aggressor likely, they would not be housed in the same housing unit. At the time of the audit, there were no offenders housed at the Jean Conservation Camp classified in either category.

All Nevada Department of Corrections inmates' safety and program needs are reassessed every twelve months. Jean Conservation Camp's Operational Plan 573, PREA Screening and Classification, section 573.01, states that Placement and programming assignments for each transgender or intersex inmate will be reassessed at least twice each year to review any threats to safety experienced by the inmate. These reassessments should be completed in conjunction with the inmate's regularly scheduled periodic/six-month review. Inmates will be personally interviewed by a Caseworker, a PREA Special Assessment will be completed in NOTIS, and a PREA Special Referral case note will be generated documenting that the assessment was completed. Policy requires that the view of the transgender or intersex inmate toward their safety will be given serious consideration. There were no transgender or intersex inmates housed at Jean Conservation Camp during the time of this audit.

Administrative Regulation 573, section 573.02, requires that transgender and intersex inmates are given the opportunity to shower separately from the other inmates. The design of the showers at Jean Conservation Camp allows all inmates to shower separately from each other. Again, there were no transgender inmates housed at JCC during the time of this audit.

Nevada Department of Corrections does not house transgender, intersex, lesbian, gay or bisexual inmates in specific facilities. Jean Conservation Camp does not house transgender, intersex, homosexual or bi-sexual inmates in specific housing units. At the time of the on-site portion of the audit, there were no inmates at Jean Conservation Camp that were identified as transgender, intersex, or gay. There were several offenders identified as lesbian and/or bisexual. A majority of those offenders were interviewed.

During the tour of the facility, the auditor noted that all shower facilities are individual showers with only one shower head in each. Each shower stall has a shower curtain which covers the open front of the shower stall.

The caseworker indicated the information gathered from the risk screening is used to separate potential victims from potential aggressors. They do not receive many, if any, offenders that score as a potential victim or as a potential aggressor, so it is generally not a problem to house an inmate, if someone in that category arrives. Both caseworkers stated that there are no transgender inmates currently housed at the Jean Conservation Camp but if they did, the inmate would be reassessed once each six months. All inmates are reviewed in classification every six months. For a transgender inmate a new PREA Risk Assessment would also be done. The caseworker said that transgender and intersex inmate would be able to shower separately because the Jean Conservation Camp has individual shower stalls with curtains.

Policy states that transgender and intersex offender's own views are seriously considered when determining housing placement and programming assignments. The Jean Conservation Camp reassesses all offenders twice a year and all views are taken seriously.

Corrective Action: No additional corrective action is required for this standard.

Standard 115.43: Protective Custody

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

115.43 (a)

- 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 No
- 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 No

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? Yes No
- 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 No NA
- If the facility restricts any 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 No NA
- If the facility restricts any 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 No NA

115.43 (c)

- 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 No
- Does such an assignment not ordinarily exceed a period of 30 days? Yes No

115.43 (d)

- 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 No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document the reason why no alternative means of separation can be arranged? Yes No

115.43 (e)

- 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 No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Warden
- Physical layout of the facility

Note: The Jean Conservation Camp does not have a Segregated Housing Unit. If needed, the offender is transferred to another facility.

Nevada Department of Corrections does not allow inmates to be placed in involuntary segregated housing based solely on victimization concerns unless there are no other safe housing options. Administrative Regulation 573.04, 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. During the weekends or holidays the on-duty Associate Warden must be notified to make appropriate arrangements. If the inmate voluntarily requests

segregated housing, the inmate will be seen by classification within 72 hours of segregation. 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 shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged and such assignment shall not ordinarily exceed a period of 30 days. If an involuntary segregated housing assignment is made the facility shall clearly document the basis for the facility's concern for the inmate's safety and the reason why no alternative means of separation can be arranged. Every 30-days the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population."

Jean Conservation Camp does not have any form of Segregated Housing. Any inmate that requests separation is transferred to the Florence McClure Women's Correctional Center. There have been no inmates transferred from Jean Conservation Camp due to victimization concerns during this audit period.

Corrective Action: No corrective action was required for this standard.

REPORTING

Standard 115.51: Inmate reporting

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

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for inmates to privately report retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for inmates to privately report staff neglect or violation of responsibilities that may have contributed to such incidents? Yes No

115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? Yes No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? Yes No
- Does that private entity or office allow the inmate to remain anonymous upon request? Yes No

- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility *never* houses inmates detained solely for civil immigration purposes) Yes No
 NA

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? Yes No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment? Yes No

115.51 (d)

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

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - PREA Compliance Manager
 - Random Staff
 - Random Offenders
- Offender Orientation Booklet
- Observations of the physical plant during our on-site review rounds, to include available information concerning Prison Rape Elimination Act issue that the offenders can access.

Administrative Regulation 421, Custodial Sexual Misconduct, Inmate Sexual Offences, requires the facility to provide multiple internal ways for offenders to privately report sexual abuse/harassment, retaliation by other offenders or staff for reporting sexual abuse/harassment, and staff neglect or

violations of responsibilities that may have contributed to such incidents. It further mandates the facility to provide at least one way for offenders to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward offender reports of sexual abuse/harassment to agency officials, allowing the offender to remain anonymous upon request. It requires that offenders detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the department of homeland security. Through discussion with the PREA Coordinator, Nevada Department of Corrections does not house offenders detained solely for civil immigration reasons.

Operational Plan 421 also states: The Jean Conservation Camp staff will accept reports from any and all sources to include but not limited to: inmates, visitors, inmate family members, associates, and other community members. These individuals can privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Such reporting can include, but is not limited to:

- Verbal complaints to any Departmental employee
- Written complaints, which may be made through the following processes:
 - 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 Associate Warden followed by a confidential report completed in NOTIS.
 - 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.
 - Nevada Department of Corrections Family Services Office by phone or email at info@doc.nv.gov
 - Writing the Nevada Attorney General's Office
 - Calling the internal PREA Hotline telephone number.
 - Written documentation received by custody staff will be forwarded to the PREA Compliance Manager for retention after the allegation has been handled appropriately.

Policy also requires staff to accept reports made verbally, in writing, anonymously, and from 3rd parties and to promptly document any verbal reports. Policy mandates the facility to provide a method for staff to privately report sexual abuse and sexual harassment of offenders. This is accomplished through the chain of command or by contacting the Jean Conservation Camp's PREA Compliance Manager.

The Nevada Department of Corrections has an agreement with the New Mexico Department of Corrections to accept PREA allegations from Nevada Department of Corrections inmates, family or public. This gives the inmates a chance to report PREA to another law enforcement agency that is not associated with Nevada Department of Corrections. The contact information for the PREA Coordinator at New Mexico Department of Corrections is provided to the inmates via the PREA Information and Education Sheet, the PREA inmate handbook and it is posted on the walls in common areas around the facility. The letters and envelopes for New Mexico Department of Corrections is maintained in the caseworker's offices of each housing units. Unfortunately, most of the staff working the housing units did not know where this information was maintained. Prior to this report, staff a Jean Conservation Camp were retrained on the New Mexico PREA reporting forms. The staff signed acknowledgment of the training upon completion. All of the signed training documents were provided to this auditor.

There are three ways an inmate can make PREA calls, all anonymous.

- calling the Nevada Department of Corrections Inspector General's number 775-887-3152, (as a free call) directly from the inmate phone system.
- selecting the PREA prompt options from the inmate phone system
- calling the Just Detention International number (213) 384-1400, (as a free call) directly from the inmate phone system.

Offenders shall be permitted to make these reports to any staff person or to an outside organization that has been arranged through a Community Partnership Agreement or another State agency, remaining anonymous if requested. Offenders shall have access to the outside organization through a toll-free hotline or mailing address. If the offender is not comfortable with making the report to the immediate point of contact line staff, the offender shall be allowed to make the report to a staff person with whom he is comfortable in speaking about the allegations.

All reports of sexual abuse and sexual harassment shall be documented in an Incident Report prior to the end of the shift.

During the 15 formal staff interviews, staff indicated they would accept any type of report from the offender and document on a memorandum to be forwarded to their supervisor. Additionally, they shared those offenders can report various ways including verbally reporting to any staff, calling the number on the posters, internal voice mail to the Prison Rape Elimination Act Compliance Manager, external calls to the Nevada Department of Corrections Inspector General's office, writing letters to staff, writing a confidential letter, telling a peer and telling family. Staff who were interviewed stated that they can privately report sexual abuse or harassment of offenders. In all cases, staff believed they could report to a supervisor, and it would be kept private.

The 15 offenders that were formally interviewed reported that there are several ways they could report. These include telling staff, use the telephone number from the posters or the painted numbers near the telephones, victim advocates, tell family, tell staff, and put a note in the mail box or confidential appeals or medical box. Most indicated they would just tell staff if anything was to happen.

During the tour, the auditor noted the posters information for the Nevada Department of Corrections and Rape Crisis Center contact information, providing reporting information in English and Spanish. The audit team were also given brochures that are provided to offenders. The numbers posted were tested, utilizing the inmate accessible telephones, and received person. On the call to the Rape Crisis Center telephone line, a person answered the call and explained the call is monitored 24 hours a day, 7 days a week. On the call to the Inspector General's office, a message was left, explaining the reason for the call. A response call-back was received approximately 15 minutes later.

Jean Conservation Camp does not house any inmates solely for civil immigration purposes.

Corrective Action: No corrective action was required for this standard.

Standard 115.52: Exhaustion of administrative remedies

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

115.52 (a)

- 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 No

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) Yes No NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) Yes No NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA

- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) Yes No NA
- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (f)

- 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 No NA
- 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 No NA
- 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 No NA
- 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 No NA
- 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 No NA
- Does the initial response document the agency's action(s) take in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency's final decision document the agency's action(s) take in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (g)

- 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 No NA

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - PREA Compliance Manager
- Offender Orientation Booklet
- Observations of the physical plant during our on-site review rounds, to include available information concerning PREA issue that the offenders can access.

Administrative Regulation 740, Inmate Grievance Procedure, section 740.06, states that all grievances containing allegations of sexual abuse will be referred to the Inspector General's Office for investigation and they will be designated as "Partially Granted" indicating that it has been submitted for investigation by the Inspector General's Office. Operational Procedure 740, Inmate Grievance Procedure, section 740.08, removes all time frame restrictions for the filing of a grievance when the grievance alleges sexual abuse.

Operational Procedure 740, section 740.03, states that any grievance that alleges sexual assault by a staff member, the inmate is not required to give the grievance to the staff member named in the grievance, nor is the inmate required to attempt to resolve the issue with that staff member. Administrative Regulation 740 states that the grievance will not be forwarded to the staff member who is the subject of the complaint.

Policy requires that all grievances alleging sexual abuse are forwarded to the Inspector General's Office. The Inspector General's Office will render a decision of the outcome of the appeal within 90 days and initiate an investigation, if appropriate. In the event that more time is needed to resolve the grievance the Inspector General's Office may ask for a 70-day extension. If an extension is needed, the Inspector General's Office will notify the inmate of the extension and the expected date of the reply. Upon the completion of the investigation the Inspector General's Office will notify the inmate of the results of the investigation. If the inmate does not receive a response within the allotted time limits, the inmate may consider this a denial.

Nevada department of Corrections and Jean Conservation Camp's Operational Procedures allow for third party reporting. Third party individuals could be a fellow inmate, staff member, family member, attorney or an outside advocate. If a grievance is filed via third party, the inmate is to be interviewed. The inmate must confirm the allegation and agree to the administrative remedies. If the inmate declines to have the request processed, it shall be documented in the tracking log and on the Nevada Offender Tracking Information System.

Operational Procedure 740, section 740.10, addresses the emergency grievance process. If an inmate submits an emergency grievance, the Shift Supervisor will be notified immediately. The Shift Supervisor is to determine if the grievance constitutes an emergency. The highest-ranking officer on duty will respond to the grievance. At any time, an inmate may file an Emergency Grievance for issues involving substantial risk of imminent sexual abuse. The person responding to the Emergency Grievance alleging substantial risk of imminent sexual abuse will separate the inmate, speak to the inmate, and give the inmate a bed move, if necessary to protect them. The grievance will be responded to on the same day it is received and the response to the will be documented in Nevada Offender Tracking Information System.

According to the PREA Compliance Manager and Camp Commander, there have been zero grievances received that alleged sexual abuse in the past 12 months at the Jean Conservation Camp. They also stated that there have been zero third-party sexual assault grievances filed 12 months at the Jean Conservation Camp.

Of the 15 formal offender interviews, no offender stated they filed a grievance concerning sexual abuse or harassment.

I reviewed the Grievance Logs and did not find any Prison Rape Elimination Act related grievances filed in the past 12 months.

Corrective Action: No corrective action was required for this standard.

Standard 115.53: Inmate access to outside confidential support services

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

115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? Yes No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility *never* has persons detained solely for civil immigration purposes.) Yes No NA
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? Yes No

115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? Yes No

115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? Yes No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - PREA Compliance Manager
 - Random Offenders
 - Agency Director of the Victim Advocate staff from the Rape Crisis Center, Las Vegas, Nevada.
 - Observations of the physical plant during our on-site review rounds, to include available information concerning Prison Rape Elimination Act issues that the offenders can access, to include Rape Crisis Center telephone numbers

Currently Jean Conservation Camp utilizes the Rape Crisis Center in Las Vegas for victim advocacy. Nevada Department of Corrections is in the process of renewing the Memorandum of Understanding with Community Action Against Rape, DBA the Rape Crisis Center in Las Vegas to provide inmates emotional support in the event of a sexual assault. The inmates receive the information via PREA Education and Information Sheet and the PREA handbook when they first arrive at the facility; additionally, there are posters on the walls of the housing units with this information and the phone number is posted on the wall by the telephones. Only about 10 of 15 inmates interviewed knew about these specific services, however, the information was visible everywhere.

Phone calls to the Inspector General's office are recorded by the Inspector General's office only. The recordings can only be shared for investigation or security reasons. Phone calls to the Rape Crisis Center are not recorded. Any mail to the Rape Crisis Center or Inspector General's office is treated as legal mail and not read by the staff. This information is included on the posters, the PREA Education and Information Sheet and the PREA handbook that the inmates receive upon arrival.

Copies of the MOU (pending signatures), the PREA Information and Education Sheet and Inmate PREA handbook were provided to the auditors with the pre-audit materials.

The Victim Advocate from the Rape Crisis Center was interviewed on May 19, 2021. She stated that she has not had any contact with any inmates at JCC. If she were to receive a request for emotional support from an inmate at Jean Conservation Center, she would provide the support and teach coping skills over the phone. If the inmate needed direct contact, she would request a meeting with the inmate through the PREA Compliance Manager. She further stated, that if an inmate were reporting an incident to her, she would receive consent from the inmate prior to reporting it as a third party.

Corrective Action: No corrective action was required for this standard

Standard 115.54: Third-party reporting

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

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? Yes No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - PREA Compliance Manager
- Offender Orientation Booklet

- Observations of the physical plant and visiting areas during our on-site review rounds, to include available information concerning PREA issue that the offenders can access concerning 3rd party notification

Due to the COVID-19 pandemic, the visiting program did not occur during this audit process.

Operational Procedure 421, Custodial Sexual Misconduct, Inmate Sexual Offenses (PREA), section 421.02, reiterates that inmates, family, friends and associates may file a PREA allegation on an inmate’s behalf. Staff must report all allegations, even those received from third party. Administrative Regulation 421 states that inmates, visitors, inmate family members, associates, and other community members can privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

The Offender Handbook provided to the inmates as they arrive at the Jean Conservation Camp staff explains that a PREA allegation can be reported to family or friends who can report on their behalf (third party reporting). This information is also on the posters in the housing units and in the visiting room. The Inspector General’s website contains this information and is available to the public. The visiting rules provided to visitors by Jean Conservation Camp contains the information on how to report a PREA on behalf of an inmate.

During offender interviews, all 15 offenders knew that they could have somebody else (friend, family member or another inmate) report the allegation for them and that they could report a PREA allegation for another inmate. Most of the inmates stated that this was one of the methods that they would use to report a PREA incident.

All 15 random staff interviewed indicated they would accept a third party PREA report the same as a first party report when asked. All three investigators that were interviewed stated that they would investigate a third-party report, just like any other allegation.

Reporting information is also on the Nevada Department of Corrections website.

Corrective Action: No corrective action was required for this standard.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

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

115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities

that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?
 Yes No

115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? Yes No

115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?
Yes No
- 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 No

115.61 (d)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable person's statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? Yes No

115.61 (e)

- Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Warden
 - PREA Coordinator
 - Random staff
 - Medical staff
 - Mental Health staff
- Internal Investigative reports

Administrative Regulation 421, section 421.05, requires that all staff must report immediately any knowledge, suspicion, or information regarding any incidents of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. Staff is required to report known incidents involving both other staff and inmates. Policy also requires an employee to report any other employee's neglect or violation of responsibilities that may have contributed to an incident of sexual abuse, sexual harassment or retaliation. Jean Conservation Camp Operational Plan 421, Prison Rape Elimination Act, section 421.02, reiterates the employee's responsibility to report any knowledge or reasonable suspicion of sexual misconduct by another employee, contractor or volunteer to a supervisor or Inspector General.

Jean Conservation Camp Operational Procedure 421, Custodial Sexual Misconduct, Inmate Sexual Offenses (PREA), section 421.10, states JCC will accept reports from any and all sources to include but not limited to: inmates, visitors, inmate family members, associates, and other community members. These individuals can privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Nevada Department of Corrections policy requires that all allegations of sexual abuse and sexual harassment, including third party reports, be forwarded to the Inspector General's Office for review and possible investigation. The Inspector General's Office then either assigns an investigator from the IG's Office or refers the case back to the PREA Compliance Manager to handle the case administratively. The PREA Compliance Manager then assigns a local investigator to investigate the allegations.

Additionally, staff shall not reveal any information related to a sexual abuse report to anyone other than their immediate supervisor. All reports of sexual abuse to include inmates and staff are to be kept confidential. These individuals can privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Interviews with 15 formal random staff and specialized staff at all levels of this facility indicate that all Prison Rape Elimination Act related allegations/reports go to the facility Prison Rape Elimination Act investigators for investigation. During the random interviews with staff, it was confirmed that staff is aware of this requirement and could explain how they would immediately report an allegation of sexual abuse. They further stated that the information they received from the victim should remain confidential, with them only notifying staff that had a need to know such as their supervisor and medical staff.

During the staff interviews, staff knew their responsibility to report all allegations of sexual abuse and sexual harassment. They stated that they would report the information immediately to their supervisor or the PREA Compliance Manager. They also explained that they would not share any information about a PREA incident with any other staff except of those that have a need to know (such as an investigator). The Shift Commander stated that he makes sure that all PREA allegations are entered into the Nevada

Offender Tracking Information System. According to the Inspector General, their office receives all NOTIS entries. They would receive any PREA allegation entered in the system and immediately initiate a response by contacting the facility to provide direction or obtain additional information

During interviews with medical and mental health staff, they shared their understanding of the policy and their duty to report. They also stated that they explain to the offender the limitations of confidentiality prior to the initiation of services. Further, the staff provided me with the forms they use to document any reports.

During an interview with the Warden, he informed the audit team that the Jean Conservation Camp does not house offenders under the age of 18 and has not anytime during this audit period. Additionally, there have been no cases of vulnerable adults as alleged victims of sexual abuse or sexual harassment in the past 12 months.

Corrective Action: No corrective action was required for this standard.

Standard 115.62: Agency protection duties

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

115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Director
 - Warden

- Random staff

AR 421, Custodial Sexual Misconduct, Inmate Sexual Offenses, and Prison Rape Elimination Act requires 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, volunteer or offender, is required to immediately report the knowledge, suspicion, information to his or her immediate supervisor. It also states, those grievances alleging staff on inmate or inmate on inmate sexual abuse or sexual harassment are forwarded immediately to the PREA Compliance Manager and the Associate Warden.

OP 421 states: If any Nevada Department of Corrections employee becomes aware that an inmate is subject to a substantial risk of imminent sexual abuse at the Jean Conservation Camp, they shall take immediate action to protect the inmate. If the knowledge is obtained by receiving a verbal/written report, the employee will immediately notify the on-duty shift supervisor. If the knowledge is obtained by visual observance, the employee will initiate first responder duties in accordance with PREA guidelines.

Finally, policy states that if the first employee or service provider, to learn of an allegation that an offender was sexually abused, is not security staff, the employee or service provider will request that the alleged victim not take any actions that could destroy physical evidence, take reasonable steps to ensure the victim's safety, and immediately notify a custody supervisor.

During the interview, the Director indicated that if he received such information, he would notify the facility where the offender is housed and direct the staff to take immediate action to protect the offender. All of the actions taken would be documented in Nevada Offender Tracking Information System.

During the interview with the Warden, he stated that if he received an allegation, he would take immediate action to protect the offender. This may require that they move the offender to a place where he would be safe until the suspect is identified and the investigation was concluded. As a last resort, this may require that the offender be transferred to another institution. All of the actions taken would be documented in Nevada Offender Tracking Information System.

Through 15 random staff interviews, they explained what they would do if they received information that an inmate was at imminent risk of being sexually assaulted. All of the staff responses were variations of what policy requires. In general, most staff responses were as follows: Based on how the information was received, they would interview the potential victim to ensure their safety. They would notify their supervisor and advise them of the situation. They would separate the potential victim from the potential predator while arrangements were made to rehouse either or both inmates or to transfer to alternate institutions. All of the actions taken would be documented in NOTIS. If the potential victim made a PREA allegation, the Inspector General's Office would be notified.

Corrective Action: No corrective action was required for this standard.

Standard 115.63: Reporting to other confinement facilities

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

115.63 (a)

- 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 No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? Yes No

115.63 (c)

- Does the agency document that it has provided such notification? Yes No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Director
 - Warden
 - Investigative Services staff
 - PREA Compliance Manager

Operational Procedure 421, Prison Rape Elimination Act, Section 421.20, states that upon receiving an allegation that an inmate was sexually abused while confined at another institution/ facility, the PREA Compliance Manager or Facility Manager must be notified immediately. If the inmate reports that this sexual abuse had been previously reported, a review of NOTIS will be conducted, and if necessary, the PREA Coordinator will be contacted, in an attempt to ascertain if there is documentation of the report. The Facility Manager will notify the head of the facility or appropriate office of the agency where the alleged abuse occurred as soon as possible but no later than 72 hours after receiving the allegation. The PREA Coordinator will also be notified.

During the interview with the Director, he stated that if any such allegation is received, it is referred to the Investigations Department and the Warden of the facility where the allegation occurred, with a copy to the Statewide PREA Coordinator. Contact is made with the PREA Compliance Manager of the involved facility and an investigator is assigned to conduct the review.

During the interview with the Warden, he stated that when the notification comes, via email, from the Warden/Superintendent/Commander of the other facility to him, it is acted upon immediately as it were other allegations. A follow-up phone call is made if needed.

Both the Warden and the PREA Compliance Manager indicated that once an allegation of sexual abuse is received from another agency, it is assigned to an investigator to conduct the investigation.

During the interview with two of the Investigators, they indicated that work closely with all other outside agencies, to include the local law enforcement, other Nevada Department of Corrections institutions and the local District Attorney's office, to name a few. Staff indicated they continually monitor any open case file for any follow-up information needed. Investigative staff stated they make telephone calls or send emails weekly to ensure timelines are not delayed and information is sent to the right department when required.

Corrective Action: No corrective action was required for this standard.

Standard 115.64: Staff first responder duties

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

115.64 (a)

- 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 No
- 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 No
- 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 No
- 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 No

115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Warden
 - First Responder staff
 - Random staff
- First Responder training curriculum

Administrative Regulation 421, Custodial Sexual Misconduct, Inmate Sexual Offenses, states that upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to:

- A. Separate the alleged victim and abuser
- B. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence
- C. If the abuse occurred within a time period that still allows for the collection of physical evidence, 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; and/or
- D. If the abuse occurred within a time period that still allows for the collection of physical evidence, 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.

The supervisor will complete the check list, notify the Facility Manager, PMC and the Inspector General's Office. The supervisor will complete all reports in NOTIS;

If the alleged victim agrees to a forensic exam, they will be transferred to University Medical Center to be evaluated by the SAFE/SANE Nurse. Upon completion of the exam the inmate will be transferred to the Florence McClure Women's Correctional Center medical department;

If the inmate declines the forensic exam, the inmate will be transferred to the Florence McClure Women's Correctional Center medical department;

Nevada Department of Corrections policy and training states that whomever receives the allegation from the inmate is a first responder.

Per the PAQ, in the past 12 months, there was two allegations of either sexual abuse or sexual harassment.

The custodial first responders that were interviewed during the on-site portion of this audit were all able to explain most of their responsibility during a Prison Rape Elimination Act incident including: separating the suspect from the victim; taking steps to preserve any potential crime scene and placing suspects under constant supervision.

There was some initial confusion as to whether to allow the victim to take a shower, wash their face or change clothes, as that may destroy physical evidence. After we shared the information from the Standard and additional training was conducted, all staff are aware of their procedures.

Non-custody staff First Responders said they would notify custody staff and request the alleged victim to not destroy evidence. Through those interviews, staff stated they would protect the offender, separate him from the alleged perpetrator, call the supervisor or security staff for further direction. All would be kept confidential except for staff that has a need to know.

During the interview with the Warden, he stated that all staff are trained on the entire Prison Rape Elimination Act policy and procedures.

During training, staff, from all work categories, are given the information verbally and in written form. Then, at the completion of class, they are asked what they have learned and how they would respond.

Although the First Responders are trained in evidence collection, responding Investigator may also collect the evidence.

115.64 Staff first responder duties

(3) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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; and

(4) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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.

- **Concern:** During staff interviews, most staff did not fully understand the 'Request a Victim and Ensure a Suspect' aspect of First Responder duties as it pertains to the above listed Standard.

Update: On June 14, 2021, I received an email, from the Jean Camp Manager, which included training covered in 115.64 (3&4), with signed acknowledgement forms from all Jean Conservation Camp custodial staff. This documentation showing updated training shows compliance to this Standard.

Corrective Action: No additional corrective action is required for this standard.

Standard 115.65: Coordinated response

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

115.65 (a)

- 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 No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Warden
 - First Responder staff
 - PREA Compliance Manager
- PREA Incident Operational Plan
- Various First Responder Checklist

Operational Procedure 421.2, PREA Sexual Assault Response-Staff First Responder Duties, provides a detailed process for a coordinated response to a sexual assault. The OP requires upon learning of an allegation that an inmate was sexually abused; the first security staff member to respond to the report shall be required to separate the alleged victim and abuser. The victim and suspected abuser shall not have any contact with one another either visually or audibly. The victim shall be held in the clinic until transportation to the Florence McClure Women's Correctional Center medical area can be achieved. The suspected abuser shall be secured in a temporary holding cell. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. If the abuse occurred within a time period

that still allows for the collection of physical evidence, 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. The Custody Officer shall notify the Facility Manager immediately, who will then notify the Inspector General's Office as soon as practical. The Custody Officer will complete a detailed NOTIS entry and the Facility Manager will complete an Incident Report for the Deputy Director. Custody staff shall collect and book into evidence all clothing from the inmate victim. The inmate will wear an orange jumpsuit to the forensic examination. If the inmate victim agrees to a forensic exam, transportation to the contracted provider to be evaluated by the SAFE/SANE nurse shall be arranged. The inmate victim shall be transported to Florence McClure Women's Correctional Center Medical for a follow-up medical exam. Staff are to secure the incident area and treat it as a crime scene until released by the Deputy Director, Inspector General or designee.

The Warden stated that the facility has a local procedure which describes the coordinated actions to be taken by the facilities Sexual Assault Response Team members. This response procedure mirrors the agency policy.

During the interviews with staff from different disciplines, all of them now know their responsibilities when responding to a sexual assault.

The PREA Compliance Manager was able to tell the auditing team, step by step, how the Jean Conservation Camp staff would respond to a Prison Rape Elimination Act incident. In addition to the policy and check list, the Shift Commander has contact information for managers who play a more significant role in the response to Prison Rape Elimination Act so that they can be reached at any time of day or night. All of the staff, volunteers, and contractors interviewed knew what their specific role was when responding to a Prison Rape Elimination Act incident.

Corrective Action: No corrective action was required for this standard.

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

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

115.66 (a)

- 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 limits 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 No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp’s completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Director
 - Warden

The State of Nevada signed collective bargaining into law in 2019. As of the date of the audit the bargaining unit agreements have not been signed.

In an interview with the State of Nevada PREA Coordinator, the contract is still in the negotiation process and the negotiator has been provided the language included in PREA standard 115.66

Interviews with the Director and the Jean Conservation Camp’s Warden, confirmed that they currently do not have Collecting Bargaining and has not had during this audit period.

Corrective Action: No corrective action was required for this standard.

Standard 115.67: Agency protection against retaliation

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

115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? Yes No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? Yes No

115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services, for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? Yes No

115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? Yes No
- 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 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 inmate housing changes? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? Yes No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks? Yes No

115.67 (e)

- 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 No
-

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Director
 - Warden
 - Staff charged with Monitoring Retaliation
 - PREA Compliance Manager

Administrative Regulation 421 states that staff shall monitor and protect all inmates and staff who report sexual abuse or cooperate with any investigation, from retaliation by both inmates and/or staff. Policy further states the monitoring shall be conducted and documented by a designated Lieutenant. A weekly check of NOTIS, where all new PREA Incident's will be added, will be conducted. Twice monthly, the Lieutenant will email the PCM that the Retaliation checks have been completed and an entry will be entered on the tracking log for each inmate who has been tracked for protection purposes. All inmates and staff will be monitored for a minimum of 90 days. Reason for continuance of more than 90 days, termination to an unfounded investigation, or transfers to another institution, will all be documented. In the case of transfer, the other institution will continue the process.

The Caseworker is responsible to meet with the inmate who is being monitored at least every 30 days for a total of 90 days. The caseworker will review documents such as housing assignments, job assignments and disciplinary reports to determine if retaliation is occurring. Once per month, the Caseworker completes a NOTIS Chrono entry for each inmate who has been tracked for protection purposes.

If any facility staff member learns of or receives information that a person who cooperated with an investigation, including 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 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.

There have not any inmates at the Jean Conservation Camp or have been any inmates transferred to the Jean Conservation Camp, from other facilities, which were currently being monitored for retaliation.

The facility or division's responsibility to monitor retaliation can be terminated if the facility or division is notified that the allegation is unfounded.

The auditor was provided with the PAQ which states that there have been no instances of retaliation during the review period.

The Director indicated that through the admonishments at the beginning of the investigation, all individuals are warned about retaliation and told about the penalty if they participate in any form of retaliation. The PREA Compliance Manager at each facility is responsible to monitor overall retaliation for victims, reporters, and witnesses, as appropriate for not-less-than 90-days. He stated that if an individual who cooperates with an investigation expresses a fear of retaliation, the reasons for those fears will be documented and an investigation will be initiated by the Inspector General, if warranted. He indicated that if a staff member is found to be retaliating, it is a dismissible offense. If it rises to the level of criminal, it will be referred to the Attorney General for prosecution.

The Warden indicated that for allegations of sexual abuse or sexual harassment, they maintain confidentiality of the information, to the extent possible; take steps to protect the victim; consider modified duty if staff are involved, monitor all involved individuals for signs of retaliation by the shift commander, Inspector General staff and the PREA Compliance Manager. He stated when he suspects retaliation, he initiates an investigation immediately. He directs staff to take the actions necessary to stop any retaliation that may be occurring. The Warden indicated that agency policy prohibits placing inmates at high risk of sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas unless an assessment has determined that there are no available alternative measures of separation from potential abusers. He stated inmates at high risk for sexual victimization or who have alleged sexual abuse are not placed in involuntary segregated housing, unless there is no other alternative means to house him. If an inmate was placed in involuntary segregated housing, it would only be until he could be transported to another facility with safe housing. He further indicated there have been no examples in the last 12 months where an inmate was placed in segregated housing for making an allegation of sexual abuse.

Auditors reviewed investigation template that would be used when an allegation is made and a Protection Against Retaliation is needed. This form contained the following:

- Date of meeting
- Date of time period covered

- Those in attendance
- Notification numbers
- Annual Review updates
- Number of allegations that were reported for the particular month
- Number of allegations currently open
- Reviews of each allegation
- Protection Against Retaliation form (If needed)

Auditors also received copy of the Prison Rape Elimination Act Retaliation Monitoring Data Sheets. This contains the time frames on when to monitor, what to look for and how to respond to actions taken. This form will have information for both offender and staff monitoring.

The check-off at the bottom of the page shows the Monitoring Results to include:

- No Retaliation Found
- Continue Monitoring
- Retaliation Found and Addressed with Protective Measures
- Monitoring Ended due to result of allegation investigation being Unfounded

This form will have information for both offender and staff monitoring.

Interviews with the PREA Compliance Manager and Staff charged with Monitoring Retaliation stated that all offenders and/or staff will be monitored for a minimum of 90 days, unless the allegation becomes Unfounded. If staff believe the monitoring should extend past 90 days, they will document their reason and end date.

In the case of transfer, the other institution will continue the process and send the copies back to the original institution, who will maintain control of the investigation file.

Corrective Action: No corrective action was required for this standard.

Standard 115.68: Post-allegation protective custody

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

115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire and supporting documentation provided.
- Interviews with the following:
 - Warden

Note: The Jean Conservation Camp does not have a Segregation Housing Unit.

Operational Procedure 573, PREA Screening and Classification, section 573.03, states that inmates who have been a victim of sexual assault shall not be placed 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. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.

Administrative Regulation 573.04, states "Any use of Segregated Housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of standard 115.43."

Policy states that the facility caseworker would be responsible for tracking all PREA inmates placed in segregation via the Administrative/Disciplinary Segregation Tracking Log. It is the unit caseworker's responsibility to ensure that no inmates, at high risk of sexual victimization, shall be placed in involuntary segregation housing unless all assessments of available alternative have been made, and a determination has been made that there are no other means of separation of a likely abuser. Finally, a review will be completed every 30 days, if needed.

Per the PAQ, there have been no inmates at the Jean Conservation Camp retained in involuntary segregated housing during this review period, for any PREA related act.

The PREA Compliance Manager and Prison Rape Elimination Act Committee shall review the record and history of those offenders receiving a Sexual Violence Assessment Tool flag of Potential Aggressor or flag of Potential Victim as a recommended override by staff completing the assessment. The committee shall then reach a consensus on the Prison Rape Elimination Act flag status of those offenders in question. Offenders identified as a "likely Prison Rape Elimination Act aggressor" may be considered for housing in Administrative Restrictive Status Housing.

During document reviews and on-site tours, the audit team did not observe any Jean Conservation Camp offender, who alleged to have suffered sexual abuse, being held in involuntary segregated housing in past 12 months.

The Warden stated that the facility has limited housing options or programs that give the facility the ability to separate offenders. Also, the facility has not housed any offenders in protective custody/restricted housing, who have alleged to have suffered sexual abuse, during the past 12 months. During the audit tour and document review, the audit team could not find any cases where this had occurred.

Corrective Action: No corrective action was required for this standard.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

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

115.71 (a)

- 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 No NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA

115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? Yes No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? Yes No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?
Yes No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? Yes No

115.71 (d)

- 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 No

115.71 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? Yes No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? Yes No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? Yes No
- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? Yes No

115.71 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? Yes No

115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? Yes No

115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? Yes No

115.71 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? Yes No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Warden
 - PREA Coordinator
 - PREA Compliance Manager
 - Investigative staff
- Investigative Reports
- Training Records for Investigators

Note: The Investigators that would investigate Criminal cases are not posted at the Jean Conservation Camp. However, they respond to the site and complete the entire investigation process.

Administrative Regulation 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, mandates that the NDOC, Office of the Inspector General, will investigate all allegations of staff on inmate sexual abuse, sexual harassment and inmate on inmate sexual abuse within the Nevada Department of Corrections. This includes third party and anonymous reporting of a PREA allegation. Investigators are assigned to cases via the Inspector General's Office as soon as a complaint is received. The investigators are trained in how to do criminal and sexual assault investigations. This includes a thorough, complete and objective investigation. 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. If the case is determined to be none criminal, and does not involve staff, the Inspector General's Office may assign it to an investigator from the facility.

The Inspector General's Office has a team of 19 investigators trained in investigating sexual assault cases. The training includes conducting sexual assault investigations in a confinement setting, interviewing victims of sexual assault, proper use of Maranda and Garrity warnings, sexual abuse evidence collection, and preparing a case for referral for prosecution. Reviewing the training record confirmed that the investigation team had all received the proper training. Local investigators who work at the institution, not assigned to the IG's Office, receive the same training. These local investigators typically investigate inmate on inmate sexual harassment or other non-criminal cases that do not involve staff.

The investigators that were interviewed for this audit were able to explain the investigation process. When they are first assigned to a case, they make sure that the alleged victim is safe and receiving medical attention, including a forensic exam if needed. They report to the crime scene and collect any evidence. They also collect the evidence from the forensic exam. They review staff reports and interview the victim. They then interview the suspect (if known) and any witnesses. The investigators stated that they also review any video tapes, phone calls, documents or other relevant evidence. Once all of the

interviews are completed and evidence has been reviewed, they write a report stating the facts of the case. The investigator then submits the case to the Attorney General's for possible prosecution. The Facility Manager is provided all of the reports. The evidentiary standard to substantiate a case is preponderance of evidence.

Policy requires that all substantiated criminal cases shall be referred to the applicable prosecutorial authority for review of prosecution. This is done by the Attorney General's Office.

During interviews and discussion with investigative staff, each of them stated that the creditability of the individual being interviewed is not based on their status as an employee or offender, it is based on an individual basis. Nevada Department of corrections policy forbids the use of any form of lie detector test when interviewing the victim. Prior to conducting a compelled interview, the investigator will consult with the Attorney General's Office for advice and direction.

According to the Inspector General, all completed investigations are retained in her office for at least five years after the alleged abuser is no longer in the control of Nevada Department of Corrections or separated from state service.

Policy states that the departure of the alleged abuser or victim from the employment of the Department or control of the institution/facility shall not provide a basis for terminating an investigation. All three investigators that were interviewed stated that they would continue with the case, even if the victim or suspect was released to the community or, in the case of an employee, the suspect resigns from the Department.

Jean Conservation Camp had three PREA allegations reported during this audit period.

Corrective Action: No corrective action was required for this standard.

Standard 115.72: Evidentiary standard for administrative investigations

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

115.72 (a)

- 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 No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Warden
 - Investigative staff
- Any Investigative reports for allegations of Sexual Abuse

The Nevada department of Corrections PREA Manual states that the Department shall impose no standard higher than a preponderance of the evidence in determining whether an allegation(s) of sexual abuse is substantiated.

During interviews with Investigative staff, they confirmed that no evidentiary standard higher than a preponderance of evidence is utilized when determining whether allegations are substantiated for administrative investigations. Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution. Further, Preponderance of Evidence is evidence that is of greater weight or more convincing than the evidence that is offered in opposition to it. That is, evidence which, as a whole, shows that the fact sought to be proved is more probable than not.

Jean Conservation Camp had three PREA allegations reported during this audit cycle. Documentation reviews on all three were conducted.

Nevada Department of Corrections policy speaks to the outcomes of an allegation to include:

- Substantiated: An allegation that was investigated and determined to have occurred based on a preponderance of the evidence.
- Unsubstantiated: An allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.
- Unfounded: An allegation that was investigated and determined not to have occurred.

During the interview with the Warden, he stated the outcome of all allegations is based on the evidence presented, in totality, of the reports. After the investigation is completed, they will be one of three conclusions:

- Substantiated: The allegation was determined to have occurred by a preponderance of the evidence. The training that all Appointing Authorities attend, teaches that substantiation is 51% that they are sure that the event occurred.
- Unsubstantiated: Evidence was insufficient to make a final determination that the allegation was true or false.
- Unfounded: The allegation was determined not to have occurred.

Corrective Action: No corrective action was required for this standard.

Standard 115.73: Reporting to inmates

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

115.73 (a)

- Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? Yes No

115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) Yes No NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer posted within the inmate's unit? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer employed at the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (d)

- 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 No
- 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 No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? Yes No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Warden
 - Investigative staff
- Any Investigative reports for allegations of Sexual Abuse

Through review of the PAQ, the auditor learned there were three allegations of sexual abuse or sexual harassment in the past 12 months. Review of the PREA Compliance Manager and Office of the Inspector General's log showed three allegations from the Jean Conservation Camp.

Operational Procedure 421, Prison Rape Elimination Act, section 421.27, the caseworker is responsible to notify the inmate of the outcome of the investigation. The caseworker is provided a form DOC 2095, Notification of Investigation/Inquiry Resolution, by the PREA Compliance Manager. The inmate is required to sign the notification document which is then forwarded to the PREA Compliance Manager. The PREA Compliance Manager ensures that the document is placed in NOTIS.

Nevada Department of Corrections policy Administrative Regulation 421, states that following an investigation into an offender's allegation that he or she suffered sexual abuse or sexual harassment by another offender or staff in a Department facility, the PREA Compliance Manager shall inform the

offender, in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

Following an offender's allegation that he or she has been sexually abused by another offender, the facility shall subsequently inform the alleged victim whenever:

- The facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or,
- The facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

Policy also states that following an offender's allegation that a staff member has committed sexual abuse, the facility shall subsequently inform the offender whenever:

- The staff member is no longer posted within the offender's unit;
- The staff member is no longer employed at the facility;
- The facility learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or,
- The facility learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

All such notifications or attempted notifications shall be documented.

Nevada Department of Correction's facility staff conducts administrative and criminal investigations on all Prison Rape Elimination Act related matters. Staff at the facility will maintain continual contact with the Headquarters staff during this process.

During interviews with Investigative staff, they indicated that they have a local liaison with law enforcement if they are investigating any cases. Also, they maintain the allegation/incident file and review it daily for any needed information, or notifications required.

During the interview with the PREA Compliance Manager, she stated that once the offender is notified of the outcome of any investigation, that process and notification is, at a minimum, written into the Investigation Report. The auditor was provided with two Investigation Reports that indicated the date the offender was informed of the outcome and which staff member spoke to them.

During the interview with the Warden, he stated he regularly receives information from the Investigators, the PREA Statewide Coordinator and the PREA Compliance Manager as to updates on any Prison Rape Elimination Act concerns.

Corrective Action: No corrective action is needed for this standard.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

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

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? Yes No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? Yes No

115.76 (c)

- 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 No

115.76 (d)

- 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 No
- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Warden
 - Camp Manager

AR 339 states that staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies and that termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse. The policy does not differentiate between lesser and more significant levels of staff misconduct and states that staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

The State of Nevada defines sexual abuse of a prisoner as a class D Felony. Administrative Regulation 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.14, states that Nevada Department of Corrections staff shall be subject to disciplinary sanctions up to and including termination for violating Departmental sexual abuse or sexual harassment policies. All terminations for violations of Departmental sexual abuse or sexual harassment policies, or resignations by staff that would have been terminated if not for their resignation, shall be reported to law enforcement agencies and to any relevant licensing bodies, by the Inspector General's office.

Administrative Regulation 339, Code of Conduct, defined sexual abuse as a Class 5 disciplinary offence for employees. The Administrative Regulation requires that all Class 5 disciplinary actions result in termination, even for the first offence.

Jean Conservation Camp's Operational Plan 421, Prison Rape Elimination Act, section 421.22, states that staff shall be subject to disciplinary sanctions up to and including termination for violating Departmental sexual abuse or sexual harassment policies. All terminations for violations of Departmental sexual abuse or sexual harassment policies, or resignations by staff that would have been terminated if not for their resignation, shall be reported to law enforcement agencies and to any relevant licensing bodies, by the Inspector General's office.

During the interview with the Camp Manager, she stated that it is the expectation that staff be terminated if they sexually assault an inmate, even if the inmate appears to give consent. There were three sexual abuse or sexual harassment allegations against Nevada Department of Corrections employees at Jean Conservation Camp during this audit period.

Through the interview with the Warden, he stated that the Jean Conservation Camp had no staff members either terminated or resigned, during the past 12 months, for violating the agency sexual abuse or sexual harassment policy.

Corrective Action: No corrective action was required for this standard.

Standard 115.77: Corrective action for contractors and volunteers

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

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?
 Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? Yes No

115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Warden
 - PREA Compliance Manager
 - Nevada Department of Forestry staff

Per the PAQ, there have been no contractors or volunteers reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates, during the past 12 months.

Administrative Regulation 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.15, states that any contractor or volunteer who engages in an activity that could be interpreted as 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 to relevant licensing bodies. The institution/facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of Departmental sexual abuse or sexual harassment policies by a contractor or volunteer.

Jean Conservation Camp Operational Plan 421, Prison Rape elimination Act, section 421.23, requires that any contractor or volunteer at Jean Conservation Camp who engages in sexual abuse shall be prohibited contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

Additionally, volunteers, interns, and contractual staff shall be advised that any form of sexual abuse and sexual harassment with an offender, whether consensual or not, is strictly prohibited and that any

volunteer, intern, or contractual staff found to have engaged in such conduct shall be removed from the facility, not allowed to return and may be subject to criminal prosecution. Information about substantiated cases of sexual abuse shall be forwarded to the appropriate licensing body for review where applicable.

The Camp Manager stated that she would restrict a volunteer or contractor from grounds (gate stop) if they sexually assaulted or harassed an inmate. Additionally, the volunteer or contractor would be removed from the clearance list and no longer allowed in any Nevada Department of Corrections facility.

During an interview with the PREA Compliance Manager, she stated that in the past 12 months, there has been no contractors or volunteers reported to a law enforcement agency and/or relevant licensing bodies for engaging in sexual abuse of offenders. Additionally, during this audit period, the Jean Conservation Camp has not had any contractor or volunteer terminated or resigned for violating the agency sexual abuse or sexual harassment policy.

During the interview with the Warden, he confirmed that any/all allegations against contractors and volunteers would be immediately investigated and the contractor or volunteer would be suspended from facility grounds pending completion of the investigation and its finding. (Gate Closure). Additionally, the Warden stated that any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Finally, the Warden stated there has been two volunteers or contractors suspected of sexual harassment at the Jean Conservation Camp during the past 12 months. It was investigated and found to be Unsubstantiated.

Corrective Action: No corrective action was required for this standard.

Standard 115.78: Disciplinary sanctions for inmates

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

115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? Yes No

115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? Yes No

115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? Yes No

115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the

offending inmate to participate in such interventions as a condition of access to programming and other benefits? Yes No

115.78 (e)

- 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 No

115.78 (f)

- 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 No

115.78 (g)

- 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 No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Warden
 - Medical staff
 - Mental Health staff

Administrative Regulation 707, Inmate Disciplinary Procedure, states offenders will be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse or following a criminal finding of guilt for

offender-on-offender sexual abuse. It mandates that sanctions against offenders are to be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories.

Should the facility offer 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 offender to participate in such interventions as a condition of access to programming or other benefits. Participation in this type of counseling is not made a condition of access to programming or other benefits.

Policy states that the agency may discipline an offender for sexual contact with staff only upon a finding that the staff member did not consent to such contact and that 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. It states all sexual activity between offenders is prohibited and offenders may be disciplined for such activity.

Operational Plan 421 in the section entitled Disciplinary Sanctions for Inmates, it states: Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process outlined within Administrative Regulation 707 following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Additionally, inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process outlined within Administrative Regulation 707 for acts of sexual harassment and consensual sexual acts. Sanctions shall be commensurate with the nature and circumstances of the abuse committed, in inmate's disciplinary history and the sanctions imposed for comparable offenses by other inmates with similar histories. Upon findings of guilt during the disciplinary hearing, the hearing officer will submit a referral for the inmate to be seen by the mental health department. The mental health staff will offer 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 may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. The Jean Conservation Camp prohibits all sexual activity between inmates and may discipline inmates for such activity. The Hearing Officer may not, however, deem such activity to constitute sexual abuse if he/she determines that the activity is not coerced.

Victims have the right to refuse medical and/or mental Health Services, after receiving counseling about the potential value of the services they would receive and information about confidentiality. Should the offender refuse or decline medical treatment the offender shall sign a State Form 9262, "Refusal and Release of Responsibility for Medical, Surgical, Psychiatric and Other Treatment," which shall be documented in the offender's Health Services record.

During interviews with Mental Health staff, they indicated that their actions, if needed, would comply with state policy. They shall conduct a mental health evaluation of the known offender abuser within 60 days of learning of such abuse history and offer treatment when deemed appropriate.

When interviewed, the Warden said that offender discipline is based on the level of the violation and penalties are imposed comparable to other offender's penalties.

Penalties might include placement in restricted housing, program reassignment, individualized behavior plans and prosecution. He also added that if the offender has a mental health history, mental health staff will be involved throughout the process. Additionally, the Warden stated that Mental Health concerns are always considered when the investigation and adjudication occur.

The Warden also stated that the Jean Conservation Camp has never disciplined an offender for reporting a potential Prison Rape Elimination Act related case in good faith, even if the findings in the case were unsubstantiated or unfounded. However, if warranted, an offender would be disciplined or received sanction as a result of a Prison Rape Elimination Act case that was investigated and an offender was determined to have potentially committed a crime.

Corrective Action: No corrective action was required for this standard.

MEDICAL AND MENTAL CARE

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

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

115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes No NA

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes No NA

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? Yes No

115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work,

education, and program assignments, or as otherwise required by Federal, State, or local law?
 Yes No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Medical staff
 - Mental Health staff
 - Staff who screen for Victimization
- Offender Custody file

All incoming offenders should be evaluated by a mental health professional at intake units as part of the initial classification process. All newly arrived inmates should be evaluated by Mental Health staff for, but not limited to, the following: suicide potential, symptoms of mental illness; level of intellectual functioning; level of aggression; potential for escape; deviant sexual behavior; and history of sexual abuse (aggressor and/or victim). Inmates may be referred to a mental health professional for further evaluation and treatment when indicated.

Inmates referred for non-emergency evaluations must be seen by the appropriate provider within 14 days of referral. Inmates with a history of sexual abuse must be referred in a timely manner for mental health counseling and custody must be notified within 72 hours.

Medical INP 200, Health Care Services, section II, address how Nevada Department of Corrections will provide medical and mental health treatment to an inmate who discloses prior victimization or predatory sexual abuse.

The policy reads "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. The Inmate will be asked if he 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. 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.

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 decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State or local law.

Operational Plan 609 states: If the PREA Risk Assessment screening done by the classification committee at intake indicates that an inmate has experienced prior sexual victimization and/or has previously perpetrated sexual abuse, whether it occurred in an institutional or jail setting or in the community, staff shall ensure that inmate is offered follow-up medical and/or mental health meeting within 14 days of the intake screening. All medical and mental health practitioners shall obtain informed consent utilizing Nevada Department of Corrections 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.

Based upon this assessment, the offender shall be placed in the appropriate housing; however, no facility shall place lesbian, gay, bisexual, transgender or intersex offenders in dedicated units solely on the basis of such identification or status. If staff determines that an offender is a potential aggressor or potential victim, the offender's record shall be appropriately flagged in the offender information system and/or juvenile data system.

During interviews with the Medical and Mental Health staff, they stated that they obtain consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the offender is under the age of 18. They ask each offender for their consent to inform other, non-medical or mental health staff due to the nature of the information. This consent is obtained on a Disclosure of Victimization form. All medical and mental health staff interviewed stated there were limitations with information as they are mandatory reporters. According to the mental health clinicians, they do offer mental health treatment to inmates who have been a victim of sexual abuse or perpetrated a sexual abuse if the inmate wants it. These treatments are not mandatory and the inmates are not charged for them.

The PREA Compliance Manager indicated that any of the above listed information is kept confidential and only certain classifications can view the information.

Policy further states all services provided for the above related treatments shall be free of charge.

Corrective Action: No corrective action is required for this standard

Standard 115.82: Access to emergency medical and mental health services

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

115.82 (a)

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? Yes No

115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? Yes No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

115.82 (c)

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? Yes No

115.82 (d)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - First Responders
 - Medical staff
 - Mental Health staff

Operational Procedure 609 states: 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 of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency sexually transmitted infections, prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. 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.

When an incident is of an Emergent Nature, medical staff will:

- 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 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.

When an incident is of an Emergent Nature, Mental Health staff will:

- During normal working hours, mental health staff will provide an immediate consultation with the victim if requested.
- 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.

Inmates at the Jean Conservation Camp that need emergency medical care that cannot be provided at the facility are transferred to a local hospital. Nevada Department of Corrections does not have a contract with any particular hospital in the area. Per a memorandum, authored by the PREA Coordinator, Inmates can be sent to any hospital in the Hometown Health PPO Network that Nevada Department of Corrections is a member of. All of the hospitals in this network have emergency rooms.

During interviews with Medical and Mental Health staff, they shared that staff respond immediately when noticed of any incident, to include an incident of sexual abuse. The medical care is their priority and all treatment are based on their professional judgement. Offender victims of sexual abuse, while incarcerated, are offered, without financial cost, 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.

All Medical and Mental Health staff interviewed at the Jean Conservation Camp stated they have received the 'Specialized Training for Medical and Mental Health training. Certificates were provided electronically to the auditors.

During interviews with Custody staff, who acted as first responders stated that when an incident call is received, the staff isolate the victim and immediately secure the area. Staff stated their first concern is the safety, medical and mental health of the victim. If needed, medical staff is summoned to the scene to treat the victim or the victim is transported to the medical service area. Either way, treatment will occur in a private area.

During interviews with the SANE staff at the Renown Regional Medical Center, the Nurse Examiner, stated that they provide 24/7 service to victims. She stated there is always someone on call, but in a rare occasion that a SANE nurse was not available, the Emergency Room Doctor will perform the forensic exam.

Corrective Action: No corrective action was required for this standard.

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

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

115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?
 Yes No

115.83 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? Yes No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? Yes No

115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. *Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*) Yes No NA

115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. *Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*) Yes No NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? Yes No

115.83 (g)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? Yes
 No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) Yes No
 NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Medical staff
 - Mental Health staff

Operational Plan 609 indicates that abuse victims will be offered tests for sexually transmitted infections as deemed medically appropriate and that mental health staff shall attempt to conduct mental health evaluations of all known inmate on inmate abusers within 60 days of learning of the known abuse. It further indicates that the Jean Conservation Camp will 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.

Policy states that victims of sexual abuse shall receive timely, unimpeded access to quality medical and mental health services free of charge following an incident of sexual abuse, whether or not they name an abuser or cooperate with the investigation.

The evaluation and treatment of victims shall include, as appropriate, follow-up services, treatment plans, and, when clinically indicated, referrals for continued care following their transfer to, or placement in,

other facilities, or their release from custody. The facility shall provide victims with medical and mental health services consistent with the community level of care.

If no qualified medical or mental health staff persons are on duty at the time a report of recent sexual abuse is made, first responders shall take preliminary steps to protect the victim and shall immediately notify the shift supervisor. On-call medical or mental health staff shall be contacted at a local hospital and apprised of the report.

Victims of sexual abuse shall be provided counseling by Mental Health Services staff in a sensitive, culturally competent, and easily understood manner regarding transmission, testing and treatment methods (including prophylactic treatment), and the risks associated with sexually transmitted infection treatment. Medical personnel shall offer and encourage testing for HIV and viral hepatitis six to eight weeks following the sexual abuse.

Following an investigation substantiating an incident of offender-on-offender sexual abuse and/or if during risk screening it is determined an offender committed offender-on-offender sexual abuse, even if at another facility; mental health staff shall conduct a mental health evaluation of the known offender abuser within 60 days of learning of such abuse history and offer treatment when deemed appropriate.

During interviews with Custody staff, who acted as first responders, stated that when an incident call is received, the staff isolate the victim and immediately secure the area. Staff stated their first concern is the safety, medical and mental health of the victim. If needed, medical staff is summoned to the scene to treat the victim, or the victim is escorted to the medical services area.

During interviews with Medical and Mental Health staff at the Jean Conservation Camp, they shared that staff respond immediately when noticed of an incident of sexual abuse. The medical care is their priority and all treatment are based on their professional judgement. Offender victims of sexual abuse, while incarcerated, are offered, without financial cost, 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.

Corrective Action: No corrective action was required for this standard.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

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

115.86 (a)

- 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 No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? Yes No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? Yes No

115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? Yes No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? Yes No
- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? Yes No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? Yes No

115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not

meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Warden
 - PREA Compliance Manager
 - Incident Review Team Members
- Meeting notes, with sign-in sheets

Administrative Regulation 421 states that each facility shall 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. The PREA Compliance Manager will track and notify the review team upon learning of the completion of any sexual abuse/harassment investigation. It further states that the review team shall document their findings on the Committee Review for Sexual Abuse form and shall consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; shall consider whether the incident or investigation was motivated by race, ethnicity, gender identity, or perceived sexual preference; to examine the area the incident allegedly occurred; adequacy of staffing levels; and the use of monitoring technology. Afterwards, a report will be documented stating if any changes were to be implemented.

The PREA Compliance Manager will track and notify the review team upon learning of the completion of any sexual abuse investigation. Such review shall ordinarily occur within 30 days of the conclusion of the investigation and will be documented using the Committee Review for Sexual Abuse Investigation form located in NOTIS. The review team shall be selected by the Warden and should include preferably the Associate Warden, Correctional Caseworker, Lieutenant and medical and/or mental health care practitioners as needed. The investigative staff member from the Inspector General's office will also participate in the incident review team. The review team shall document their findings on the Committee Review for Sexual Abuse Investigation form.

The review team shall:

- Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse.
- 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.
- Examine the area in the facility where the alleged incident occurred to assess whether physical barriers in the area may enable abuse.
- Assess the adequacy of staffing levels in that area during different shifts.
- Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.
- Prepare a report of its findings, including but not limited to determinations made pursuant to the above paragraphs of this section, and any recommendations for improvement and submit such report to the facility head and PCM.
- The Review Team shall implement the recommendations for improvement or shall document the reasons for not doing so.

As reported in the PAQ, in the past 12 months, there were two administrative and one criminal investigations of alleged sexual abuse or sexual harassment completed at the Jean Conservation Camp.

The facility shall employ multiple protection measures, such as housing changes or transfers for offender victims or abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offenders or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Interviews with the PREA Compliance Manager and one of the facility's Prison Rape Elimination Act Meeting committee members indicates that the committee will review each investigation and address each of the criteria required per the standard.

The minutes will be submitted to the Warden by the PREA Compliance Manager to ensure any modifications recommended by the committee are completed. Following these facility-based actions, a final examination of the Incident Review documentation is conducted by PREA Statewide Coordinator to ensure full standard compliance and process integrity.

Corrective Action: No corrective action was required for this standard.

Standard 115.87: Data collection

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

115.87 (a)

- 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 No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually? Yes No

115.87 (c)

- 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 No

115.87 (d)

- 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 No

115.87 (e)

- 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.) Yes No NA

115.87 (f)

- 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 No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - PREA Coordinator
 - PREA Compliance Manager
- 2018 & 2019 Annual Report posted on the Nevada Department of Corrections website

Nevada Department of Corrections utilizes the SSV-II to collect and report data to the federal Department of Justice. The process utilized to collect the data is outlined in the PREA Manual – Data Collection section. A copy was provided to the auditor with the PAQ.

The Nevada Department of Corrections PREA handbook requires that the Inspector General, PREA Management Team, is responsible to collect accurate, uniform data for every allegation of sexual abuse at every institution and facility using a standardized instrument and set of definitions. The incident-based sexual abuse data shall be aggregated, at a minimum, annually. The data shall include all of the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization conducted by the Department of Justice. The Inspector General, PREA Management Team shall maintain, review, and collect data as needed from all incident-based documents including reports, investigation files and sexual abuse reviews. The PREA Compliance Manager maintains a record of all reports of sexual abuse at the facility. The PREA Coordinator's team leader was present during this audit and she explained her agencies role in collecting, reviewing and maintaining the data.

A review of the documents provided demonstrated compliance with this standard. The Inspector General's PREA Unit receives all of the PREA incident reports within the Nevada Department of Corrections via the Nevada Offender Tracking Information System. This allows for the Nevada Department of Corrections to ensure that all reports are consistent. The information provided to the PREA Coordinator is sufficient to complete the Department of Justice' Survey of Sexual Violence form.

Each Prison within the Nevada Department of Corrections uses the same set of definitions when documenting sexual assault and sexual harassment within the corrections system.

The audit team was provided with the agency's Survey of Sexual Victimization State Prison Survey form. They also reviewed the agency's website and observed previous Surveys of Sexual Victimization posted there. This auditor reviewed the aggregated data for years 2018 & 2019.

The Nevada Department of Corrections publishes all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, on its public website.

During the interview with the PREA Compliance Manager, she stated that each individual Sexual Incident Report will be submitted to her and discussed at the next facility Prison Rape Elimination Act Committee meeting. The Prison Rape Elimination Act Compliance Manager also stated and provided documentation, that she will maintain a record of all reports of sexual abuse at the facility. The PREA Compliance Manager also discussed and provided the Monthly Prison Rape Elimination Act Incident Tracking Logs that are reviewed by the Warden and Prison Rape Elimination Act Coordinator, monthly.

During the interview with the Statewide PREA Coordinator, she stated that the facilities have access to the agency's Sexual Incident Reporting system. This is the system utilized to collect Prison Rape Elimination Act data. The information is then compiled and reported to the Department of Justice, annually.

The audit team was provided with the agency's current Annual Assessments and also reviewed the agency's website and observed previous Surveys of Sexual Victimization posted there.

Corrective Action: No corrective action was required for this standard

Standard 115.88: Data review for corrective action

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

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? Yes No

115.88 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse Yes No

115.88 (c)

- Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? Yes No

115.88 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions.

This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - Warden
 - PREA Coordinator
 - PREA Compliance Manager

The Nevada Department of Corrections PREA Manual requires that the Director, or designee, Deputy Director of Operations, and the PREA Coordinator review the data in order to assess and improve, if necessary, the effectiveness of its sexual abuse prevention, detection and response policies practices and training. This review includes identifying problem areas, taking corrective action on an ongoing basis and preparing an annual report of its findings and corrective actions for each facility and the department where inmates may be present.

The report shall include a comparison of the current year's data and corrective action with those from prior years and shall provide an assessment of the department's progress in addressing sexual abuse. The Department's report must be approved by the Director and made readily available to the public through the Department's public website. Prior to placing any reports on the Department's website, all personal information of the victims and subjects are redacted.

The 2017 through 2019 reports were reviewed by this auditor. The report contained the PREA data on each of the Nevada Department of Corrections facilities, including the Jean Conservation Camp, identifying problem areas, any corrective action taken and the effectiveness of the sexual abuse prevention program. The report did not contain any confidential information such as victim's information. The 2015 through 2019 reports are posted on the Nevada Department of Corrections, Inspector General's website. The web site is doc.nv.gov. Click on "PREA Management Division" and then select "PREA Incidents and Annual Reports."

The PREA Coordinator indicates the agency reviews data collected pursuant to 115.87 and assesses the effectiveness of the sexual abuse prevention, detection, and response policies, practices, and training. The agency prepares an annual report and posts the information on the website. She further indicated that the only information redacted from the agency report is personal identifying information. All other information is included in the annual report.

Corrective Action: No corrective action was required for this standard.

Standard 115.89: Data storage, publication, and destruction

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

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
 Yes No

115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? Yes No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? Yes No

115.89 (d)

- 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 No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

- Jean Conservation Camp's completed Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Interviews with the following:
 - PREA Coordinator
- Nevada Department of Corrections website

Administrative Regulation 421 requires the agency to ensure that data collected pursuant to standard 115.87 are securely retained and to make all aggregated sexual abuse data from facilities under its direct control readily available to the public at least annually through its public website. It requires the department to remove all personal identifiers from aggregated sexual abuse data before making said data publicly available.

All of the PREA data is maintained in the State of Nevada's Inspector General's Office. According to policy, the data is to be maintained 10 years. The aggregated data is maintained on the Nevada Department of Corrections website. There are no personal identifiers included in the information posted.

According to the PREA Coordinator, they maintain the documents in their headquarters for over ten years. A review of the data, that is available to the public, indicated that there was no personal identifier included in the information.

A review of the website demonstrates aggregated sexual abuse data from facilities under its control to the public is posted, as required. Information displayed on the agency website, contains no personal identifiers. All offender copies of sexual incident reports are maintained in the confidential section of the offender's file. No federal, state or local law was provided by the agency to indicate there was a law in place to require a data maintenance procedure which would supersede standard provision 115.89(d).

The Nevada Department of Corrections publishes all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, on its public website at the following: http://doc.nv.gov/About/NDOC_Office_of_the_Inspector_General/PREA_Incidents_and_Annual_Reports/

Corrective Action: No corrective action was required for this standard.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

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

115.401 (a)

- 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 No

115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a "no" response does not impact overall compliance with this standard.*) Yes 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.) Yes No 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 No NA

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility? Yes No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Yes No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? Yes No

115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? Yes No

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

The Nevada Department of Corrections website contains the results of all of the PREA audits conducted since 2013. A review of these audits appears to show that all of the facilities operated by Nevada Department of Corrections were audited in a three-year period starting in August 2013. The number of audits conducted was approximately one third of their facilities each of the three years. This is the second year of this audit cycle.

During this audit, the auditor had access to, and toured, the entire facility. This auditor had access to every inmate, staff member, volunteer and contractor that this auditor requested to interview. The interviews were all conducted in the privacy of a staff office either in person or telephonically. Each document that was requested was received, including sensitive documents, such as investigation reports, personnel information, medical/mental health documents and inmate files.

Inmates were allowed to send confidential correspondence to this auditor, if they wished. No letters were received from inmates prior to the audit.

Offenders, staff and/or Third parties were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. It should be noted, I did not receive any written correspondence from offenders/family or staff at the Jean Conservation Camp, at this time.

The Jean Conservation Camp's previously audits were finalized on August 21, 2014 and again on August 31, 2018.

This on-site audit of the Jean Conservation Camp was conducted on May 20, 2021.

This commitment to Prison Rape Elimination Act related issues, by the Nevada Department of Corrections, was reiterated and confirmed during interviews with the Director, Warden and Agency Prison Rape Elimination Act Coordinator.

Corrective Action: No corrective action was required for this standard.

Standard 115.403: Audit contents and findings

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

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years preceding this audit. Yes No NA
- The pendency of any agency appeals pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

Evidence Reviewed (documents interviews, site review)

The agency has published, on its agency website, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years preceding this agency audit.

The completed Nevada Department of Corrections Prison Rape Elimination Act Audit reports are located and available to be reviewed on the department's website.

The Nevada Department of Corrections website currently contains a copy of the two previous audits conducted at the Jean Conservation Camp. It can be found by going to the Nevada Department of Corrections PREA home page at the following link:

http://doc.nv.gov/About/NDOC_Office_of_the_Inspector_General/PREA_Audits/

Corrective Action: No corrective action was required for this standard.

AUDITOR CERTIFICATION

I certify that:

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

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Roger Lynn Benton

Auditor Signature

July 9, 2021

Date