

**PREA AUDIT REPORT**     Interim     Final  
**ADULT PRISONS & JAILS**

**Date of report:** 5/19/16

<b>Auditor Information</b>			
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<b>Date of facility visit:</b> 2-25-16 through 2-28-16			
<b>Facility Information</b>			
<b>Facility name:</b> Florence McClure Woman's Correctional Center			
<b>Facility physical address:</b> 4370 Smiley Road Las Vegas, Nevada 89115-1808			
<b>Facility mailing address:</b> <i>(if different from above)</i> Click here to enter text.			
<b>Facility telephone number:</b> (702) 668-7200			
<b>The facility is:</b>	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
<b>Facility type:</b>	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
<b>Name of facility's Chief Executive Officer:</b> Warden Jo Gentry			
<b>Number of staff assigned to the facility in the last 12 months:</b> 19			
<b>Designed facility capacity:</b> 950			
<b>Current population of facility:</b> 926			
<b>Facility security levels/inmate custody levels:</b> Maximum, Medium, and Minimum			
<b>Age range of the population:</b> 20-83			
<b>Name of PREA Compliance Manager:</b> Monique Hubbard-Pickett		<b>Title:</b> Correctional Caseworker Specialist III/PREA Compliance Manager	
<b>Email address:</b> <a href="mailto:mhubbardpickett@doc.nv.gov">mhubbardpickett@doc.nv.gov</a>		<b>Telephone number:</b> (702) 668-7233	
<b>Agency Information</b>			
<b>Name of agency:</b> The State of Nevada Department Of Corrections			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> Click here to enter text.			
<b>Physical address:</b> 5500 Snyder Avenue, Bldg. 17 Carson City, Nevada 89702			
<b>Mailing address:</b> <i>(if different from above)</i> P.O. Box 7011 Carson City, Nevada 89702			
<b>Telephone number:</b> Phone: (775) 887-3285			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> James Dzurenda		<b>Title:</b> Director	
<b>Email address:</b> <a href="mailto:jedzurenda@doc.nv.gov">jedzurenda@doc.nv.gov</a>		<b>Telephone number:</b> (702) 486-9910	
<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Pam Del Porto		<b>Title:</b> Investigator General/PREA Coordinator	
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## AUDIT FINDINGS

### NARRATIVE

The audit for the Nevada Department of Corrections (NDOC), Florence McClure Woman's Correctional Center (FMWCC) was conducted from February 25, 2016 to February 28, 2016, by this writer Theresa L. Cohn a Certified Department of Justice (DOJ) PREA Auditor with the assistance of one support staff member, George G. Gilbert, hereafter referred to as the PREA Audit Team. FMWCC is located in Las Vegas, Nevada.

The audit process started with contact from Pam Del Porto, Agency Wide Inspector General Office of Inspector General PREA Coordinator, State of Nevada, Department of Corrections, Florence McClure Woman's Correctional Center (FMWCC) PREA Compliance Manager Monique Hubbard-Pickett, and Las Vegas, Nevada. FMWCC provided a thumb drive containing essential information. This included PREA Pre-Questionnaire, 42 standards folders (one for each standard), and a tremendous amount of material included to review. The folders for the standards contained substantiated compliance documentation for each of the standard's. The PREA Pre-Audit Questionnaire provided the necessary information to complete a good portion of the PREA audit: Auditor Compliance Tool, Adult Prisons and Jails in advance of the visit. The Questionnaire provided a lot of material that was comprehensive, specific, and very helpful to the auditor.

The PREA Resource Audit Instrument used for the Adult Prisons and Jails was furnished by the National PREA Resource Center, To summarize, there are seven (7) sections, A through G, comprised of the following: A) Pre-Audit Questionnaire, sent by Nevada State Department of Corrections; B) the Auditor Compliance Tool; C) Instructions for the PREA Audit Tour; D) the Interview Protocols; E) the Auditor's Summary report; F) the Process Map; G) the checklist of Documentation.

Following the protocols of making contacts, and checking on the posting notices (Posting was initiated through the facility, Florence McClure Woman's Correctional Center.) The audit team began a review of the Pre-Audit Questionnaire completed by the facility PREA Compliance Manager (PCM), and the PREA /IG Agency Wide Compliance Coordinator in February 2016. Also, in this preliminary review, special interest was taken in the compliance documentation provided for each standard. The information from the standards files was used to complete a vast majority of the information on the PREA Compliance Audit Instrument Checklist of Policies/Procedures and other documents in advance to identify additional information that may be required.

The Physical Audit began with a meeting with the Interim Director E.K. McDaniel and IG/PREA Coordinator Pam Del Porto on February 23, 2016 in Carson City Nevada at their respective offices. On February 25, 2016 in Las Vegas at FMWCC an "In-briefing meet and greet" commenced with key administrators including the Deputy Directors, Warden, Associate Warden of Operations, Associate Warden of Programs, PREA Compliance Manager, FMWCC Criminal Investigator, and Lieutenant. The Audit Team provided the key staff a tentative itinerary which would begin with a tour of the entire facility. The population at the facility upon arrival was 926 inmates. A list of the inmate population was requested as well as the staff. The areas toured during the four (4) day site visit for the PREA Audit consisted of all housing units, the infirmary, the gym, the prison industry area, the chapel, the Law Library, the Kitchen and Dining areas, the Commissary area, the Shift command area, Officers work stations and booths, the Program areas, the Library, the Back Dock area, Administrative staff offices, and a tour the second day to the Administration Office for the Southern Region which offices located at Casa Grande. The PREA Audit team was able to interview Human Resource staff. While at Casa Grande the PREA audit team was also able to conduct personnel file reviews and background checks for FMWCC.

The first day of the Audit was primarily spent touring the 145, 00 square foot facility on 43 acres. The PREA Audit team had just completed the Audit of Northern Nevada Transitional Housing in Reno Nevada and the Office of Inspector General and Director are located in Carson City, Nevada which afforded the PREA Audit team to conduct interviews with the Director, IG/PREA Coordinator, Agency Medical Director, and Human Resource Manager for Northern Nevada while there on February 23, 2016. The official tour was completed on Thursday afternoon, but followed up with revisits on Sunday to Housing unit, Housing unit shower areas and the inmate library. The Audit team established interviews in a conference room in the Administration area for everyone excluding inmates.

On day one the PREA Audit began the process of reviewing of the 42 PREA standards and the Pre-Audit Questionnaire with the PREA Auditor completing the PREA Compliance Audit Instrument checklist of Policies/Procedures and other documents provided by the PREA Compliance Manager. Following these intensive reviews of the standards and the questionnaire, the PREA audit team began the formal interview process by selecting staff from all three shifts and began the interviews with random staff (9) and specialty staff (12) which included a Volunteer, First Responders, Facility staff who conducts Risk Screening for Victimization and Abusiveness, Supervisor of Segregated Housing, Mental Health practitioner, Safe/Sane staff, Intermediate or higher level facility staff, Incident Review Team member, Facility staff who conduct Intake, Staff member who is responsible for Monitoring Retaliation, Medical staff, continuing late into the evening.

FMWCC is a female facility which the population was currently 926 inmates with 171 staff members, Administration (4), Caseworkers (7), Professionals (21), Protective Services (120), Administrative Support (7), Medical (23), and Service Maintenance Workers (7). While at FMWCC on the second day it was spent interviewing random staff (8) and specialized staff (3) from the scripted PREA Resource Center Modules. and conducting further facility reviews, Nevada Offender Tracking Identification System (NOTIS) reviews, and again reviewing

each standard of the PREA Compliance Tool to complete audit interview and tour notes and ensure we had information and data collected to which we could identify standard compliance and noncompliance questions. The PREA Audit team met with the PREA Compliance manager to determine what new documents were needed to review and provided her with the itinerary for day three (3) which would be interviewing inmates. The PREA Audit team focused on inmate interviews as it was a weekend day (Saturday) and would specifically be interviewing them for the entire day. The interviews were set up for the PREA Team to conduct them in a private room in the Shift Command area.

The third day the PREA Audit carried on Saturday, where the limited facility movements allowed the PREA Audit team to focus on Inmate Interviews and inmate file reviews. During the course of the day 17 inmates were interviewed selected at random, 3 specialized inmates were interviewed utilizing the random questionnaire in conjunction with the specialized inmate questionnaire. The PREA Team conducted further file reviews and ensured that the previous interviews covered a sampling of staff for all shifts.

On Day four, the last day, a preliminary assessment of FMWCC's compliance with the PREA Standards was conducted by discussing each specific Standard between the Audit team members which included the IG/PREA Compliance Coordinator and the Facility PREA Compliance Manager. The areas of concern were identified with further discussion about a possible methodology within the agency and for FMWCC to achieve compliance. The IG/PREA Coordinator and facility PREA Compliance Manager were amenable to the recommendations and an action plan was developed.

The PREA Audit team conducted an Exit" De-briefing" in the Wardens conference room. Attendees were IG/PREA Compliance Manger (via telephone), Deputy Director, Warden, Assoc. Warden of Operations, and Associate Warden of Programs, Facility IG, and facility PREA Compliance Manager. The exit briefing highlighted FMWCC positive compliance issues and the areas which compliance was not achieved. PREA Team members highlighted the agency wide issue and the need for a corrective action plan. The tentative correction plan was developed through discussions with both the PREA Compliance Manager and the Inspector General/PREA Coordinator.

## DESCRIPTION OF FACILITY CHARACTERISTICS

The Florence McClure Correction Center is located in Clark County Nevada in Las Vegas. The Nevada Department of Corrections selected the private corrections contractor Corrections of Corporation of America design, build, and operate a correctional facility for woman. FMWCC opened in September 1997. In October 2004, the Nevada Department of Corrections assumed control of the facility. It was originally built to house only 500 inmates. There have been additions to the facility in 2009 which included three housing units and new infirmary.

FMWCC is 145, 000 on 43 acres in Southern Nevada. The facility has a capacity for 950 inmates has 171 staff which houses Minimum, Medium, and Maximum custody woman inmates. The facility has no armed towers but has a roving perimeter officer. FMWCC is the only female inmate intake facility in the state of Nevada. There are six (6) cell housing units and one unit is open bay/dorm housing.

FMWCC housing unit breakdown as follows

Unit 1	General Population Unit
Unit 3	Minimum Unit
Unit 4	Segregation Unit and Special Needs Unit
Unit 5	General Population / Dog program unit
Unit 7	Intake (reception, Assessment & Diagnostic Unit)
Unit 8	General Population Unit
Unit 9	General Population/ Trust / Re-entry Unit
Unit 10	(Closed /will be utilized for youthful offenders)
Unit 11	Medical Unit

Age Range of population: 20-83

Rated Capacity: 950

Actual Capacity: 926

Security: Minimum/Medium/Maximum

Number of staff: Administrative (4), Caseworkers (7), Professionals (21), Protective services (120), Administrative Support (7), Medical (23), Service-Maintenance Workers (7)

FMWCC's mission focuses on providing inmates with skills necessary to successfully re-enter society, enhancing the safe operation of correctional facilities, and reducing government operating costs. FMWCC is administered by a Warden, and 2 Associate Wardens one of which is Operations and one is Programs. There are 120 Protective Service staff.

FMWCC promotes rehabilitation by offering programs such as mental health services, Addiction Prevention Education, Commitment to Change, Domestic Violence, Victim Awareness and Woman's Health and Hygiene, Educational programming, and Vocational programs. FMWCC also provides recreations, Re-Entry /trust programming, and religious services. Mental Health staff facilitate educational groups to address criminal thinking patterns and on individual counseling with the goal to encourage rehabilitation. FMWCC for long term programs offers Pups-on-Parole in where the inmates are trained to be certified dog handlers. The dogs are trained for appropriate placement in Southern Nevada. FMWCC also provides a dedicated 120 bed intensive in-house substance abuse program called STARS. Included in the Re-Entry program is a solar institute that offers inmates a trade that can be used for employment upon release. Clark County School District currently offers education to obtain GED, High School Diploma, Associate of Arts in General studies and Computer Skills Training The inmates are also offered College -level courses thought College of Southern Nevada.

The Prison Industry employs seventy five (75) inmates and refurbishes a variety of items for resale by the business. It is housed in bay of a building however the products are stored outside until the inmates can refurbish products to working condition for resale to a retailer which the owner of the industry contracts. The items can vary from large stainless steel BBQ to furniture and many other items.

The PREA Audit Team was impressed with how well behaved inmates were during the audit process, especially with the long waits to be interviewed and interruptions in their daily routine and recreation times. FMWCC staff at all levels were very professional, accommodating, efficient, respectful, and willing to aid the Audit team without any questions or concerns. The physical appearance of FMWCC inclusive to inmate housing areas were clean and sanitary. One Unit was regarded above the norm for a prison unit as it was spotless and was noted as having inmates who are infraction and disciplinary free who maintain their own unit cleanliness.

## **SUMMARY OF AUDIT FINDINGS**

Auditing was completed during the course of the four day On-Site audit, the Audit Team interviewed approximately 17 random inmates and 3 specialty inmates by also utilizing the random inmate questionnaire in conjunction with the specialized inmate questionnaire. The Audit team interviewed 17 random staff and 19 specialized staff, some inclusive of the Carson City Central Office interviews. The Audit Team reviewed about 10 institutional files which included staff, inmates and medical files. The PREA Team worked one-on-one with the IG/PREA Coordinator to understand the NOTIS system.

The NOTIS system is the on-line data base and means by which Nevada Department of Corrections tracks inmates and issues involving inmates; inmates and staff; and any other type of unusual occurrence. The data base has been in use since 2006 and involves what NDOC identifies as modules of specific information related to the inmate or staff. Each user role will then allow or not, that staff member access to specifically identified modules of information and sometimes even specific sub categories of information contained within each of the modules. Some staff may only their area of responsibility (Institutional or facility) rather than administrative. We were able to determine how a report could be created to track PREA Reports, Notifications, investigations, and information related to offender PREA Complaints, and staff training.

On February 28, 2016 the site visit of FMWCC, in Las Vegas Nevada. The results indicate The State of Nevada has a Statue of Privilege which upon discovery during this audit will be comprehensive in some standards not meeting compliance. The PREA audit continues with Further document reviews completing them on March 7, 2016.

### **Overall Compliance As Reflected in Interim Compliance Report**

Number of standards exceeded: 1

Number of standards met: 37

Number of standards not met: 4

Number of standards not applicable: 1 contracting with other entities for the confinement of inmates

### **April 2016 Update Since the Audit: Corrective Actions Taken by FMWCC and NDOC to Achieve Full Compliance**

The Interim Compliance Report reflected there were four standards that were in Non-Compliance at FMWCC. Therefore, a required corrective action period not to exceed 180 days began on March 15, 2016. The Auditor recommended a corrective action plan for the facility and the administration agreed and began corrective actions requested the Auditor to bring the agency and the facility into full compliance with the PREA standards. Initial documentation of the corrective actions were received by the Auditor on May 9, 2015. The Auditor reviewed the submitted documentation to determine if full compliance with the standards was achieved. The Auditor asked of series of clarifying questions of the NDOC Agency Investigator General/PREA Coordinator regarding the verifications documents and received additional documentation the same day. After reviewing all additional information, the auditor determined that the NDOC agency and FMWCC administration had demonstrated compliance with and full institutionalization of the PREA standards. Therefore, the Auditor determined that FMWCC has achieved full compliance with the PREA standards as of the date of this final report.

Number of standards exceeded: 1

Number of standards met: 41

Number of standards not met: 0

Number of standards not applicable: 1 contracting with other entities for the confinement of inmates.

### **Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator**

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

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

NDOC PREA Manual, AR421 and FMWCC OP 421 all outline the agency's Zero tolerance policy toward sexual abuse and sexual harassment in all forms, and set forth procedures for the agency's approach to detecting, preventing, and responding to both sexual abuse and sexual harassment. NDOC includes the definitions of sexual abuse in the PREA Manual and AR 421.

NDOC FMWCC has designated the Correctional Caseworker Specialist III as the facility PREA Compliance Manager. The position has sufficient time and authority to develop, implement, and oversee the agency's efforts to comply with PREA in all of its facilities and works closely with the Agency wide PREA Coordinator.

NDOC agency wide PREA Coordinator also functions in the position as the NDOC Inspector General, located within the Inspector General Office. The position has sufficient time and authority to develop, implement and oversee the agency's efforts to comply with PREA in all of its facilities. It is also noted the PREA Coordinator has direct communication and works closely with FMWCC PREA Compliance Manager to ensure any updates are always immediate and accurate.

#### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

State of Nevada Department of Corrections (NDOC), FMWCC Organizational  
State of Nevada Department of Corrections Administrative Regulation 421  
FMWCC Operational Procedure 421  
Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case worker specialist III/PREA Compliance Manager  
Completed Pre-Audit Questionnaire Submitted by FMWCC

### **Standard 115.12 Contracting with other entities for the confinement of inmates**

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

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

Information was received during interviews and supporting documentation indicates that NDOC and FMWCC does not contract with other entities or another agency for the confinement of inmates and has not on or after August 20, 2012.

## FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire submitted by FMWCC

Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case worker Specialist III/PREA Compliance Manager

### Standard 115.13 Supervision and monitoring

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

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NDOC's PREA Coordinator meets annually with the Facility Warden to discuss whether adjustments are necessary to the staffing plan, video monitoring technologies and the allocation or reallocation of Facility and/or Agency resources.

FMWCC has made its best efforts to comply regularly with the staffing plan that provides for adequate staffing levels, video monitoring is only by staff specific to watch as there are no recording capabilities, and considers the factors identified in section a (1-11).

NDOC procedure and policy AR 326 requires any deviations from the minimum staffing requirements are reported to the Warden via the Associate Warden. FMWCC will close a non-essential post only in the event of an emergency example of a medical trip to cover the transport instead of below minimum staffing. The facility has not yet experienced going below minimum staffing.

During interviews, supervisors reported that if they observed a staff member notification to other staff, they would conduct a private conversation about the agency and facility expectations regarding unannounced rounds. NOTIS documents were printed and reviewed which demonstrated the documentation of unannounced rounds by FMWCC intermediate and or higher level supervisors.

NDOC AR 421, PREA Manual and OP 326 require intermediate or higher level supervisors to conduct unannounced rounds and staff are prohibited from altering other staff members to these unannounced supervisory rounds.

## FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by FMWCC

FMWCC staffing plan review 2015-2016

FMWCC Shift rosters

Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case worker specialist III/PREA Compliance Manager

Interview with Warden (Intermediate or higher level staff)

Interview with Associate Warden (Intermediate or higher level staff)

Interview with Lieutenant (Intermediate or higher level staff)

Interview with Investigator General for FMWCC

State of Nevada Department of Corrections Administrative Regulation 301

State of Nevada Department of Corrections Administrative Regulation 326

FMWCC Operational Procedure 326

Onsite review of daily FMWCC Shift and Post logs on NOTIS

Review of shift logs for Supervisory Unannounced tour 1-1-15 to 1-14-16

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### Standard 115.14 Youthful inmates

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

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Standard 115.14 has three elements that the facility must meet for a finding of "Meets Standard." FMWCC has provisions and procedures to house youthful inmates at the facility which provides them out of site or sound of adult inmates in Unit 10, with direct staff supervision. FMWCC does not currently have any youthful inmates in the population count nor have they in the last twelve (12) months.

NDOC procedure and policy AR421, PREA Manual and FMWCC Operation Procedure state that the facility prohibits placing youthful inmates in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmates. During the facility tour Unit 10 was inspected by the PREA Audit team and would be in compliance with the maintaining the adult inmates out of site, physical contact or sound of the youthful inmates if housed at the facility. Inmates interviewed did not identify any youthful inmates housed at the facility.

### FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by FMWCC

State of Nevada Department of Corrections Administrative Regulation 421

FMWCC Operational Procedure 502

Tour of unit #10, which is not open if Youthful offenders are housed at location they will be placed in Unit #10.

FMWCC Daily population data

### Standard 115.15 Limits to cross-gender viewing and searches

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

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FMWCC is a female facility with 926 inmates. The inmates are not restricted and move within the facility to access programs and areas throughout the facility. During the PREA Audit Team tour and interviews it was observed and verified there was always a female staff available within the facility which allows female inmates to always have access to programs and areas.

NDOC and FMWCC require staff shall document all cross-gender unclothed, clothed, or visual body cavity searches within the Nevada Offender Tracking Information System (NOTIS) however they have not had any documented in the last 12 months or at all to review.

FMWCC has set times the inmates to shower on all units. This provides several times in a day if the facility had a transgender or intersex inmate to afford those available times for opportunity to shower in private. The current showers allow for female inmates to shower in private even if a male is standing within view of the shower a staff cannot make out any body parts such as buttocks, breast or genitalia. The addition to the top of the shower wall prohibits any viewing from the Officer Station booth (Bubble). FMWCC has a submitted for bid through the State of Nevada Public Works Agency who is responsible for Projects involving construction. Submitted for bid in February of 12, 2013 for a preliminary project description which consists of renovation of 56 existing showers (in 12 pods within the inmate units, with 4 showers being ADA). It is noted cost permitting they would add 20 additional showers in unit four(4), Alternate number two (2) consists of providing additional height to the existing storefront system enclosing the different shower pods, all of which the purpose to comply with PREA laws and standards requiring privacy in showers.

During the PREA Audit Tour staff verified if there was no female in an area which one was needed they would call for one to conduct a search verses doing a cross gender pat frisk or strip search and under no circumstances would it be for determining an inmate's genital status.

FMWCC Operational Procedure 422 requires male staff announce their presence when entering a unit. During the facility tour it was observed by the PREA Audit Team, male staff were announcing when entering areas female inmates may be showering, undressing, using the facilities, and entering living unit. The PREA Audit team observed male staff would even wait a few moments at the entry as to provide the female inmates more time to be dressed if needed in the living areas.

NDOC procedure and policy AR 421, the PREA Manual, FMWCC Operational Procedure OP 422 prohibits searches of transgender intersex inmates for the sole purpose of determining gender status. FMWCC reported that all security staff have received training on conducting professional searches on all inmates including transgender, cross gender and intersex inmates.

FMWCC also during the tour/visit provided training records of staff and provided the verification and signatures of staff training on how to conduct cross gender pat-down searches and searches of transgender and intersex inmates.

#### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC  
State of Nevada Department of Corrections PREA Manual  
State of Nevada Department of Corrections Administrative Regulation 422  
FMWCC Operational Procedure 422  
Nevada Department of Corrections Staff PREA Training 3-27-14  
On-Site observation of Nevada Offender Tracking Information System (NOTIS)  
Interviews with Radom facility staff and random inmates.  
Training Certificates of all facility staff  
Pat Search Acknowledgement forms  
On-Site and sample review of random staff training logs for FMWCC and NDOC employees

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

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

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

NDOC policy and procedures AR421 state 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. FMWCC has a Point To your Language paper so inmates when an interpreter is needed the inmate can point to the one that is needed. There are more than 240  
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languages available to choose from.

NDOC policy and procedure AR421 and the PREA manual outline the agency's established procedures to provide the disabled inmates equal opportunity from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse.

FMWCC inmate education video has been formatted in English, Spanish, and close captioning for both. FMWCC has access to provide the education in Braille, if an inmate has disabilities impacting both hearing and vision.

NDOC PREA Manual and AR421 prohibit the use of inmate interpreters, inmate readers, or other types of inmate assistance. The agency provided a contract that documented 06-09-2015 through 06-30-2019 dates with Corporate Translation Services, INC dba CTS Language Link which is a 24 hour service. Staff training includes a section on working with inmates who have disabilities. During the Random staff interviews it was reported FMWCC has many staff who are bi-lingual in Spanish but they are to use the interpreter service for PREA. Staff were able to verify how they use Interactive Voice Response (IVR) for the service and knew if necessary how to contact the services. FMWCC has a primary second language which is Spanish for inmates.

The NDOC PREA Pamphlet for inmates, posters, are in English and Spanish.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC  
State of Nevada Department of Corrections PREA Manual  
State of Nevada Department of Corrections Administrative Regulation 421  
FMWCC Operational Procedure 504  
FMWCC On-Site Close caption PREA video for offenders  
FMWCC On-Site Spanish PREA Video  
FMWCC On-Site Video translated in Braille for blind and hearing, impaired  
PREA Q & A Handout for inmates -Spanish  
Samples of PREA Poster and Rape Crisis Center Poster in Spanish  
Contract CTS-Language Bank  
Telephonic IVR How to request Services  
Point to your language poster  
CTS tips and advice document  
Contract Transcend  
Client Portal Instructions  
Inmate Handbook /Pamphlet  
Telephonic IVR How to request Services  
Interview with State of Nevada Department of Corrections Interim Director  
Interviews with Radom facility staff  
Interviews with Random and Disabled and Limited English proficient Inmates

### **Standard 115.17 Hiring and promotion decisions**

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

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NDOC and FMWCC policy and procedure AR 300, AR 421, and the PREA Manual address the provisions of 115-17(a)1 by prohibiting the hiring and promoting of anyone, or utilizing the services of any contractor or volunteer who;

1. Has engaged in sexual abuse in prison, jail, lockup, community confinement facility, juvenile facility, or other institution;
2. 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; or
3. Has been civilly or administratively adjudicated to have engaged in the activity described above.

The PREA Manual AR 300 and AR 421 references the requirement before hiring any new employee or utilizing the services of a contractor or volunteer, a criminal background records check shall be performed and HR will 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.

AR 212.03 under Contract Approval Requirements and Signatures and states, "Mandatory background checks on contractors/vendors will be completed no less than every three years in compliance with PREA federal mandates; the Contracts unit is required to maintain tracking documentation for audit purposes."

AR 300, AR 421 and the PREA Manual require NDOC to consider any incidents of sexual harassment when making a decision for hire, promotion or utilizing a contractor or volunteer.

The PREA manual notates Annual evaluations process of all current staff will include a question about previous sexual abuse and misconduct.

The PREA manual and AR 421 state the IG and HR shall perform criminal background record checks of all current employees every three years, beginning at the first year of each PREA audit cycle. Under AR 421 material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

AR 308 page 3 section 14, authorizes only the Department of Personnel Division staff to provide employment verifications, references, or other requests pertaining to employment information. The confidentiality of files covered by AR308 is governed by NAC 284.718:

Confidential Records NAC 284.726: Access to Confidential Records.

Based on Reviewing of files and interview with Human Resource (HR) staff they are conducting back ground checks on all promotional employees, prospective new hire employees, contractors and volunteers by conducting NCIC, screening with prior employers and verification contact with job references. It was found during the TOUR and file reviews that several implemented practices and tracking to double check and track verification was above standard requirements.

## **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC

Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case worker specialist III/PREA Compliance Manager

Interview with State of Nevada Department of Corrections Human Resource (south) Casa Grande

State of Nevada Department of Corrections PREA Manual

Interview with Human Resource

State of Nevada Department of Corrections Administrative Regulation 212

State of Nevada Department of Corrections Administrative Regulation 300

State of Nevada Department of Corrections Administrative Regulation 421

On-Site random review of staff personnel Files in Human Resource office Casa Grande

Sample of Data Base tracking of contractor's background records Report

Sample of the State of Nevada Security Regulations acknowledgement form

Sample PREA Background checks on Contractors

Sample Letter from HR to prior employers

State of Nevada Department of Corrections Pre-Hire Questionnaire

## Standard 115.18 Upgrades to facilities and technologies

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

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

NDOC/FMRCC has made modifications to existing facilities with since August 20, 2012 an installation of a new video monitor was added, live action-Non recording GSI color quad system GS-C4CQR located Administration Door and gate. However the NDOC/FMWCC has not acquired any new facilities.

FMWCC also added , "Project (Boilerplate worksheets) dated 7-28-15, projects for Shower, Bathroom Renovations and Reseal of Building Expansion Joints, Repair Cracks and Paint Walls at Florence McClure Women's Correctional Center. The complete Shower and Bathroom renovation up for bid documents was also reviewed and provided to the PREA team during our tour. FMWCC has submitted the contract for bid through Public Works and budgetary request upgrade all the facilities shower areas.

### FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by FMWCC

Interview with State of Nevada Department of Corrections Interim Director

Interview with State of Nevada Department of Corrections Warden

FMWCC facility Schematic

On-Site observation of FMWCC facility, and its surveillance and security systems

Pending Shower Construction bid and documentation

Security Acknowledgment The Tiberti Company DBA The Tiberti Fence Company/ Desert Boilers/Alliance laundry

Sample background checks Alliance laundry/Tiberti

## Standard 115.21 Evidence protocol and forensic medical examinations

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

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

The IG per AR 339 is responsible for and oversees all investigations. The IG will maintain the investigative case file, including copies of related attachments associated with the complaint. The IG Administrative Investigations Guide states, "All investigations will be conducted by investigators from the OIG, (OIG) and/or by Division. AR 421 documented the NDOC's Inspector General (IG) is responsible for conducting both the administrative and the criminal investigations for sexual abuse. It also states in Investigations, the IG investigators follow a uniform evidence protocol when conducting sexual abuse investigations and it is based on the most recent edition of DOJ'S Office on Violence against Woman publication.

The IG Administrative guide states." It also refers to Evidence in its broadest sense, refers to anything that is used to determine or  
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demonstrate the truth of an assertion. All staff should follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. AR 421 and the IG Administrative Guide are developmentally appropriate for youthful inmates.

FMWCC OP 421 policy and procedure offers all inmates who experience sexual abuse to forensic medical examinations at the University Medical Center (outside Hospital/external agency). These exams are offered without financial cost to the victim. NDOC utilizes University Medical Center (UMC) for forensic exams. These exams are conducted by SAFEs or SANEs. NDOC /FMWCC has a MOU with Las Vegas Rape Crisis Center (RCC) a victim advocate from RCC.

FMWCC staff trained as a victim advocate will be made available to the victim which is documented as part of the investigation, in NOTIS, and in the unusual occurrence section of the medical file.

During this audit it was identified the MOU with Victims' advocates was not within the state guidelines based on Auditors identified the state of Nevada has a Statue of Privilege. The MOU on 3-1-16 was revised for their role now with the agency to support the State laws for a neutral third party that is dedicated to provide emergency response and victim assistance for emotional support through a 24 hour hot line, the Department is able to increase its resources dealing with prison rape and or sexual assault with the prison system.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC

State of Nevada Department of Corrections Administrative Regulation 421

State of Nevada Department of Corrections PREA Manual

FMWCC Operational Procedure 421

Nevada Department of Corrections Office of The Inspector General Administrative Investigations Guide/Manual.

Interviews with FMWCC Case Worker Specialist III/PREA Compliance Manager

Interview with FMWCC Random staff

MOU with Rape Crisis Center (RCC)

Revised memo to RCC

Draft revision of MOU to RCC

National Protocol for Sexual Assault Medical Forensic Examinations

Interview by telephone with Safe/Sane Nurse staff

State of Nevada Statue of Privilege

Email correspondence regarding Language change

### **Standard 115.22 Policies to ensure referrals of allegations for investigations**

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

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

NDOC procedure and policy AR 421 under Investigations of Allegations, 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." NDOC procedure and policy AR 457, AR 421 and IG investigation Guide in full describe the responsibilities and actions required for investigations stating, "The Department will conduct thorough and impartial administrative and when necessary, criminal investigations into all allegations of employee misconduct as prescribed by AR 350." AR 421 also stated under 421.12,"

NDOC and FMWCC in the last 12 months, there are still outstanding two (2) administrative and/or criminal investigations.

NDOC Office of the Inspector General will investigate all allegations of staff on inmate sexual abuse, sexual harassment and inmate on inmate sexual abuse."

The PREA Manual and AR 421 provide the definitions of inmate on inmate sexual harassment as 'repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of derogatory or offensive sexual nature by one inmate directed toward another.'

NDOC PREA link to AR 421 describes the referral of allegations of sexual abuse and or sexual harassment for criminal investigations as well as the link to AR the AR link for NDOC was the easiest way to access their procedures and policies.

NDOC documents all referrals of allegations of sexual abuse or sexual harassment for criminal and administrative investigations by the IG Office. There are procedures in place which govern the conduct of these investigations.

During file reviews and the interview process the Auditor was updated and there was no new information. The PREA Coordinator reported the cases were still in the investigation stages and the outcome has not yet been determined.

NDOC website is user friendly and easy to navigate to find relevant policies in the section of Administrative Regulations. There are several policies listed numerical in the section, which the agency demonstrated while PREA Auditors were there how efficient and quick they are to update and post policies and procedures.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC

State of Nevada Department of Corrections PREA Manual

State of Nevada Department of Corrections Administrative Regulation 421

Nevada Department of Corrections Office of The Inspector General Administrative Investigations Guide/Manual.

State of Nevada Department of Corrections Administrative Regulation 740

Interview with State of Nevada Department of Corrections Interim Director

Interviews with Agency Investigator General/PREA Coordinator and FMWCC case worker specialist III/ PREA Compliance Manager

FMWCC Investigator General

Sample internal investigations from facilities within NDOC

On-site review of NOTIS tracking investigations

### **Standard 115.31 Employee training**

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

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

FMWCC houses female inmates and the training is tailored to both male and female inmates therefore if an employee is reassigned to or from facilities housing males, additional training is not required. FMWCC reported and it was confirmed through interviews and review of training logs that all staff receive the required PREA training and during off years the staff/employees are provided with information about current policies regarding PREA sexual abuse and sexual harassment. Per NDOC AR421 employees will receive refresher training on PREA every two years and this was verified.

The power point and the lesson plan dated 1-6-16 were reviewed and the training materials cover the required subject matter for this standard. The training logs in 2015 included an affirmation that the employee understood NDOC zero tolerance policy and curriculum covered the standards elements in full.

## FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by FMWCC

PREA Lesson Plan Script

State of Nevada Department of Corrections Administrative Regulation 421

FMWCC Operational Procedure 421

State of Nevada Department of Corrections training power point 3-27-14/Updated Power point 3/1/16

On-Site and sample review of random staff training logs for FMWCC and NDOC employees

Sample of Staff training certificates

Sample form DOC 1102PREA Acknowledge form all staff to sign when they attend the PREA training

Review of Random employee files in HR and training records

Interviews with Random staff, regarding their PREA training and Knowledge;

Interviews with First Responders

State of Nevada Department of Corrections PREA Manual

### Standard 115.32 Volunteer and contractor training

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

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

During the On-Site audit of FMWCC, the Audit team reviewed training records and documents of contract staff and volunteers to ensure verification whether all volunteers and contractors have been trained on PREA requirements.

The documentation of the NDOC Training/Orientation acknowledgment forms were provided for Contract Staff or Volunteers to ensure they had been trained on PREA requirements and or how they had received the training and were all in compliance at the facility and volunteers had taken the training Course for Volunteers on the NICIC website (<http://nicic.gov/training.prea>). NDOC provided a documented copy of the notice to volunteers of the mandatory PREA training.

## FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Volunteer Training Course located on the NICIC website (<http://nicic.gov/training.prea>)

State of Nevada Department of Corrections Administrative Regulation 802

State of Nevada Department of Corrections training power point 3-25-14/Updated Power point 3/1/16

Outside PREA- Zero tolerance form

Interview with FMWCC Volunteer

Visitor Volunteer Contractor Acknowledgement form

Volunteer Training Acknowledgement form

PREA Lesson Script

Training Certificates of Volunteers

Sample training log

Nevada Department of Corrections Prison Rape Elimination Act signed. (Outside zero Tolerance form)

On-Site review of training records, documents of contract staff and volunteers

### Standard 115.33 Inmate education

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

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

The inmates sign the PREA orientation acknowledgment form, acknowledging receipt of this information and this entered into NOTIS.

AR 421 procedure and policy requires all inmates during the initial intake orientation receive information explaining the departments zero tolerance policy regarding sexual abuse and/or sexual harassment. FMWCC upon admission the inmate receives PREA handouts and the comprehensive education video is shown to them. However if an inmate was received on a holiday or weekend it was found by the PREA Audit team the inmate could be placed into population without any PREA information provided to them until the next business day. FMWCC reviewed this procedure/practice and revised the OP 421.11 and sent out notification to FMWCC AWO staff on 2-27-16 "Inmates received during non-business hours-PREA education" Warden corrected this issue while the PREA Audit team was at the facility. The FMWCC OP 421 has been revised under section 421.11 that when inmates are received at FMWCC during non-business hours will receive information explaining the NDOC zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Inmates will receive the PREA frequently asked question memorandum and sign the acknowledgment for that they received it. That document will be placed in the inmate I File. Intake orientation education PREA orientation upon the next business day. The shift supervisor shall ensure that the inmate is provided the PREA fact sheet, provide inmate an opportunity to ask any questions and have the inmate sign the acknowledgment form and forward to records for the inmate I File.

The PREA manual requires facilities to provide education with the PREA and key information for offenders are limited English proficient, deaf, visually impaired, otherwise disabled well as to inmates who have limited reading skills. The facility does have the PREA information available in Braille for those who are visually impaired. If there is an inmate who is limited to another language outside of English or Spanish they provide LanguageLink services for interpreters to ensure PREA education is conducted and available.

FMWCC conducted a mass application of the inmate education (written and in video) in 2014 to ensure compliance with the PREA standard and has maintained the requirement with each new admission of an inmate. The facility also provided documentation of inmates signed acknowledgment of PREA orientation and acknowledging receipt of the information which is documented in NOTIS and placed in the IFILE. However it was noted the auditors identified The State of Nevada has a right to Privilege statute which effects the MOU with the Rape Crisis Center and its roles. The agency was afforded the opportunity to correct this error. They have revised the MOU with RCC for emotional support with inmates, entered into an intergovernmental agreement with The State of New Mexico for third party reporting effective 3-31-16. The posters and inmate handbook will be revised and provided to the auditors. It is also noted the posters will be placed closer to the inmate telephones in facilities. NDOC will be provided up to 180 days to correct and provide the auditor evidence it is now in compliance with this standard.

FMWCC is the only Female intake facility in the state. FMWCC provides the inmate with comprehensive education through video and education with their rights to be free from sexual abuse and sexual harassment. Inmates are education their right to be free from retaliation for reporting such incidents and regarding NDOC and FMWCC policies and procedures for responding to such incidents. FMWCC conducts inmate reviews every 6 month which the offender receives PREA education at the classification review each time.

### FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by FMWCC  
FMWCC Operational Procedure 421  
State of Nevada Department of Corrections PREA Manual  
Interview of Random Inmates  
Interview of FMWCC intake staff  
Interview of Random staff (Provides inmate education)

Inmate File Reviews (IFILE)  
NOTIS intake records review  
FMWCC inmate Handbook, FMWCC inmate handbook revised 4/2016  
PREA Posters posted and displayed/ RCC Posters posted and displayed  
Sample PREA Posters in English and Spanish  
Crisis Call Center/RCC posters, RCC posters revised 3/2016  
NOTIS Inmate PREA Tracking Report  
On-Site NDOC Form signed by an inmate 2096-1  
State of Nevada Statue of Privilege (NEV. REV. STAT. ANN. § 49.2546)

### **Corrective Action Required**

1. NDOC/FMWCC should update all education for inmates is updated and the key information is continuously and readily available through updated posters, inmate handbooks and other written formats
2. NDOC will finalize the Intergovernmental agreement with the State of New Mexico Department of Corrections and the agreement signed, for an outside agency reporting entity for inmates.
3. NDOC PREA Manual revision to update PREA Reporting entities and emotional Support revisions
4. Revision of MOU with Victim Advocates and services contracts with NDOC based on State of Nevada Statue of Privilege.

### **Verification of Corrective Action since the Audit**

The Auditor was provided supplemental documentation prior to and on 3-14-16, 4-4-16, 4-19-16, 5-05-16 to evidence and demonstrate corrective actions taken by NDOC and FMWCC regarding this standard. The documentation is discussed below.

### **Additional Documentation Reviewed:**

- NDOC and The State of New Mexico Department of Corrections (NMCD) entered into an Intergovernmental agreement for PREA Reporting Commencing on March 31, 2016 and will be completed on January 2019 unless terminated sooner or extended.
- Inmate education that is readily available to inmates through Posters, inmate handbooks, or other written formats was updated to reflect NMCD as the outside agency third party reporting and the new role of PREA Victim Advocacy and Emotional Support Services by The Rape Crisis Center (RCC).
- FMWCC Inmate handbook revised, April 19, 2016.
- PREA Posters Spanish and English Revised, March 14, 2016
- NDOC PREA Manual was revised and signed on April 4, 2016
- MOU PREA Victim Advocacy and Emotional Support Services by The Rape Crisis Center (RCC) revised and signed on May 5, 2016.
- Correspondences with FMWCC from NDOC verification all posters are posted at facility April 5, 2016

### **Standard 115.34 Specialized training: Investigations**

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

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

trained in conducting sexual abuse investigations in confinement settings.

FMWCC provided training certificates from investigators showing that they all completed "PREA Medical Health Care for Sexual Assault Victims in a Confinement Setting," investigators who had completed NIC learning training," Sexual Abuse in a Confinement Setting."

NDOC continually demonstrated the updated and tracking of staff who are due for training and in compliance as investigators though the NDOC Training is documented it is also kept in the NDOC Agency IG/PREA Compliance Coordinator office as extra for the supervisor to maintain the agency compliance for all administrative and PREA investigators.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC

Nevada Department of Corrections Office of The Inspector General Administrative Investigations Guide/Manual.

Interviews with Agency Investigator General/PREA Coordinator

Interview with FMWCC Investigator General

State of Nevada Department of Corrections Administrative Regulation 421

State of Nevada Department of Corrections PREA Manual

Training logs and certificates for staff completing specialized training

On-Site file receives at Human Resources in Casa Grande

On-Site review of NDOC Tracking of training

### **Standard 115.35 Specialized training: Medical and mental health care**

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

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

NDOC has procedure/policy AR 421 that that states all full and part time medical and mental health service providers who work regularly in its facilities have received specialized training.

FMWCC maintains documentation showing that medical and mental health practitioners have completed the required training and received the certificates of completion titled, "PREA Medical Health Care for Sexual Assault Victims in a Confinement Setting." and "Behavioral Health Care for Sexual Assault Victims in a confinement setting." FMWCC provided the certificates of proof of training and documentation. Training logs and signed acknowledgment forms of staff training were also reviewed and provided.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC

Interviews with Agency Investigator General/PREA Coordinator

State of Nevada Department of Corrections Administrative Regulation 421

State of Nevada Department of Corrections PREA Manual

Certificates and training records verification of PREA Medical Health Care for Sexual Assault Victims in a Confinement Setting. (NIC)

Interviewed Medical/Mental health staff

Interview with NDOC Medical director

### **Standard 115.41 Screening for risk of victimization and abusiveness**

- Exceeds Standard (substantially exceeds requirement of standard)

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

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

NDOC has a procedure and policy AR 421 that all inmates shall be assessed for their risk of being sexually abused by or abusive toward other inmates during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually toward other inmates. NDOC PREA Manual and AR 573 requires, Screening and Classification, screening for risk of sexual victimization or sexual abusiveness shall be completed within 72 hours of arrival at an institutions, or facility, excluding holidays.

NDOC AR 573 requires the facility to reassess each inmates risk to victimization or abusiveness within 30 days of arrival at the facility, or when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmates risk of being sexually victimized or being sexually abusive. The PREA risk assessment tool is primarily based on an inmates self-reporting. The Correctional Case worker however conducts a file review to supplement information obtained from the interview for the form to be completed.

#### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC

State of Nevada Department of Corrections Administrative Regulation 573

State of Nevada Department of Corrections Administrative Regulation 421

State of Nevada Department of Corrections Administrative Regulation 504

Interview with Caseworker who does intake screening procedure

Interview with Caseworkers and Caseworker trainee

Interview with Random Inmates

FMWCC Operational Procedure 573

NDOC PREA Risk Assessment instrument (DOC 2097)/Sample of PREA Risk Assessment Final

On-site reviewed files and documented of inmates who had signed they had received PREA Orientations education in Jan/Feb and IFile which the intake screening was maintained, /Sample forms

On-Site NOTIS review

Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case worker specialist III/ PREA Compliance Manager

On-Site Casa Grande, HR files reviewed NOTIS affidavit which approval for NOTIS permissions was maintained.

#### **Standard 115.42 Use of screening information**

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

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

NDOC AR 573 states staff shall use the information from the risk assessment to make informed housing, bed, work, and program assignments with the goal of keeping separate inmates at high risk of being sexually victimized from those at high risk of being sexually  
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abusive. NDOC PREA Manual states all institutional and facility policies related to placement and programming assignments shall include a reassessment for all inmates at least twice per year or as needed, including the transgender and intersex inmate population. The reassessment will also include a review of any threats to safety that may have been experienced by an inmate. The view of the transgender or intersex inmate towards their safety will be given serious consideration, Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. FRMCC utilizes the NOTIS system for alerts and all inmates are reviewed every six months at their classification reviews. AR 573 makes no mention of the PREA standard however NDOC and FMWCC does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification status. FMWCC OP 573 does mention standard 115.42(c)-1 all housing and program assignments for transgender or intersex inmates will be made on a case-by-case basis and will require a classification committee consisting of at least two (2) Wardens, CCSIII, Unit CCS, Mental Health staff, and any other staff with relevant and or pertinent information to the decision making process. FMWCC has set shower schedules for all units for all inmates which affords Transgender and intersex inmates the opportunity to shower separately from other inmates.

## **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

State of Nevada Department of Corrections Administrative Regulation 573

FMWCC Operational Procedure 573

Completed Pre-Audit Questionnaire Submitted by FMWCC

State of Nevada Department of Corrections PREA Manual

FMWCC Inmate Roster

Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case Worker Specialist III/ PREA Compliance Manager

Interview with Caseworker and who does intake screening

Interviews with Caseworkers and caseworker Trainee

Sample of Case notes reviewed and provided from NOTIS

Interviews with Transgender/intersex/gay/bi-sexual Inmates

## **Standard 115.43 Protective custody**

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

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

NDOC policy and procedure AR 573, AR 509 and PREA Manual prohibit the placement of inmates at high risk for sexual victimization 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 to separate the inmate from likely abusers.

During the PREA Audit tour there were no inmates in segregated housing currently or in the last 12 months for risk of sexual victimization or who alleged to have suffered sexual abuse. One (1) Lieutenant is the designated PREA retaliation monitor for FMWCC. The Lieutenant reported he is responsible for the preliminary investigation and reported how the inmate has to agree to sign a protective segregation waiver to request to be placed in segregation at their own request and the form is DOC 2084.

NDOC procedure and policy AR 573 states that inmates placed in segregated housing for protective custody shall have access to programs, privileges, education, and work opportunities to the extent possible; however FMWCC has a practice to ensure safe housing in general population for a victim if at all possible. If involuntary segregated housing assignment is made, then every 30 days, FMWC will review the inmate to determine whether there is a continuing need for separation from the general population and it will be documented on NOTIS

## FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by FMWCC

State of Nevada Department of Corrections Administrative Regulation 573

State of Nevada Department of Corrections Administrative Regulation 509

Interview with Warden

Interviews with staff who supervise inmates in segregated housing (Case workers)

On-Site view of Segregation programs

### Standard 115.51 Inmate reporting

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

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

AR 421 and the PREA Manual lacks a provision that establishes a procedure for staff to "Privately" report sexual abuse and sexual harassment of inmates. FMWCC does have staff document in the NOTIS System and have it documented in the OP 421 provisions for inmates, visitors, inmate family members, or associates, and other community members to privately report sexual abuse or sexual harassment, retaliation by other inmates or staff reporting sexual abuse or sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents but does not have any staff provisions for privately reporting sexual abuse or sexual harassment of inmates.

NDOC has established multiple internal ways for inmates to report privately to agency officials about PREA allegations. NDOC procedure and policy AR 421 states that reporting can be verbal complaints to any department employee, written complaints by inmate grievances or inmate kites calling or emailing the NDOC Family Services Office, or writing the Nevada Attorney General's Office. NDOC does not house inmates solely for civil immigration purposes and the U.S. Marshals would house and manage these inmates at the jurisdiction at a federal facility

NDOC AR 421 states " All facility allegations of sexual abuse and sexual harassment, including third-party and anonymous reports of allegations must be reported to the CM or designated employee."

NDOC AR 421 and the PREA Manual state that all staff shall accept reports made verbally, in writing, anonymously, and from third parties.

A tour of the facility showed poster displayed in areas accessible to inmates, visitors, contract/volunteers staff and facility staff on how to report any form of sexual misconduct; which include staff/contractor/or volunteer on inmate or inmate on inmate sexual harassment, sexual assault, sexual abusive contact and consensual sex.

Per 115.51b: A review of documents shows NDOC/FMWCC entered into a Memorandum of Understanding (MOU) with The Rape Crisis Center (RCC) which is a public entity that is not part of NDOC/FMWCC. The purpose of this MOU is for RCC to provide assist to inmates needing to report a sexual assault incident or seek assistance following the assault.

Should RCC receive calls from inmates within NDOC/FMWCC regarding a sexual assault within 72 hours of occurring; RCC will immediately (within 15 minutes) contact the appropriate staff member at the facility to provide that inmate the best opportunity for undergoing a sexual assault exam.

All other reports made by inmates through RCC will be forward to the Officer of the Inspector General (IG) via email no later than 72 hours after receiving the notification.

An interview conducted with a volunteer for a program at the facility who also was employed with RCC revealed inmates within NDOC are forwarding letters and calling RCC to report sexual misconduct; which include staff/contractor/or volunteer on inmate or inmate on inmate sexual harassment, sexual assault, sexual abusive contact and consensual sex.

However, information obtained from the interview with the volunteer revealed RCC, is not forwarding NDOC IG information from inmates who reported sexual misconduct, until the identified victim signs a releases form to allow RCC to share the information with NDOC IG. Further information obtained identifies RCC within the State of Nevada with having privileged communication. (See Nevada Law below)

NEV. REV. STAT. ANN. § 49.2546

1. A communication shall be deemed to be confidential if the communication is between a victim and a victim's advocate and is not intended to be disclosed to third persons other than:

- (a) A person who is present to further the interest of the victim;
- (b) A person reasonably necessary for the transmission of the communication; or
- (c) A person who is participating in the advice, counseling or assistance of the victim, including, without limitation, a member of the victim's family.

2. As used in this section, "communication" includes, without limitation, all records concerning the victim and the services provided to the victim which are within the possession of:

- (a) The victim's advocate; or
- (b) The nonprofit program for whom the victim's advocate works.

NEV. REV. STAT. ANN. § 49.2547 (West 2012)

Except as otherwise provided in NRS 49.2549, a victim who seeks advice, counseling or assistance from a victim's advocate has a privilege to refuse to disclose, and to prevent any other person from disclosing, confidential communications set forth in NRS 49.2546.

NEV. REV. STAT. ANN. § 49.2549 (West 2012)

There is no privilege pursuant to NRS 49.2547 if:

- 1. The purpose of the victim in seeking services from a victim's advocate is to enable or aid any person to commit or plan to commit what the victim knows or reasonably should have known is a crime or fraud;
- 2. The communication concerns a report of abuse or neglect of a child, older person or vulnerable person in violation of NRS 200.508, 200.5093 or 200.50935, but only as to that portion of the communication;
- 3. The communication is relevant to an issue of breach of duty by the victim's advocate to the victim or by the victim to the victim's advocate; or
- 4. Disclosure of the communication is otherwise required by law.

NDOC/FMWCC does not meet standard 115.51 Inmate Reporting due to subsection 115.51b. NVDOC/FMWCC does not have a way for inmates 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 inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request.

NDOC/FMWCC entered into a MOU with RCC to receive reported sexual misconduct; which include staff/contractor/or volunteer on inmate or inmate on inmate sexual harassment, sexual assault, sexual abusive contact and consensual sex immediately. Information revealed from the audit shows RCC has failed to report sexual misconduct complaints they received to NDOC IG in an immediately manner.

NDOC was provided an opportunity to correct this error and current provisions. NDOC has provided an action plan to review revisions or existing PREA Posters to include language that clearly articulates that written communication to public, private entity or an office that is not a part of NDOC must still be reported by the outside agency to NDOC it can be reported anonymous, means, if requested by the reporting party. NDOC PREA IG Management Team will recommend to all institutions and facilities that at least one set of posters be hung by the inmate phones within the housing units in order to facilitate the ability of inmates to have contact information readily available while on the phones so that is not so obvious to other inmates that the PREA reporting information is being viewed by a third party inmate. Due to the Statue of Privilege in the State of Nevada NDOC had opted to change one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency.

NDOC with The State of New Mexico Department of Corrections (NMCD) in an Intergovernmental agreement for PREA Reporting Commencing on March 31, 2016 and will be completed on January 2019 unless terminated sooner or extended. NDOC has entered into an agreement to establish the process and protocols whereby an inmate under the jurisdiction of NDOC may contact NMCD to report sexual abuse or sexual harassment, which NMCD will forward to NDOC as soon as reasonably possible. NDOC will be provided up to 180 days to correct and provide the auditor evidence it is now in compliance with this standard.

NDOC was afforded the opportunity to also update staff knowledge and education on the ability to report privately. NDOC updated the employee training and lesson plan which specifically identifies staff can privately report and the procedure for them to do so.

## **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC

State of Nevada Department of Corrections PREA Manual

State of Nevada Statue of Privilege (NEV. REV. STAT. ANN. § 49.2546)

MOU with RCC

State of Nevada Department of Corrections Administrative Regulation 421

FMWCC Operational Procedure 421

Example provided IR 2015 SNWCC 001441(NOTIS), PREA IR 2015 SNWCC 001441, Preliminary Report IR 2015 SNWCC 001467

PREA Audit Report

Interviews with random staff  
Interviews with random inmates  
Correspondence regarding RCC revision  
State of Nevada Department of Corrections training power point 3-25-14/Updated Power point 3/1/16  
On-Site tour where abuse hotline number and posters are readily visible and staff through posters  
Inmate Educational Materials (Handbook and posters)  
Inmate Complaint forms  
MOU Revision request with RCC

### **Corrective Action Required**

1. NDOC/FMWCC should update all education for inmates is updated and the key information is continuously and readily available through updated posters, inmate handbooks and other written formats to privately report PREA.
2. NDOC PREA Manual revision to update Reporting and emotional Support revisions.
3. Revision of MOU with Victim Advocates and services contracts with NDOC based on State of Nevada Statue of Privilege.
4. NDOC will finalize the Intergovernmental agreement with the State of New Mexico Department of Corrections and the agreement signed, for an outside agency reporting entity for inmates.

### **Verification of Corrective Action since the Audit**

The Auditor was provided supplemental documentation prior to and on 3-14-16, 4-4-16, 4-19-16, 5-05-16 to evidence and demonstrate corrective actions taken by NDOC and FMWCC regarding this standard. The documentation is discussed below.

### **Additional Documentation Reviewed:**

- NDOC and The State of New Mexico Department of Corrections (NMCD) entered into an Intergovernmental agreement for PREA Reporting Commencing on March 31, 2016 and will be completed on January 2019 unless terminated sooner or extended.
- Inmate education that is readily available to inmates through Posters, inmate handbooks, or other written formats was updated to reflect NMCD as the outside agency third party reporting and the new role of PREA Victim Advocacy and Emotional Support Services by The Rape Crisis Center (RCC).
- FMWCC Inmate handbook revised, April 19, 2016.
- PREA Posters Spanish and English Revised, March 14, 2016
- NDOC PREA Manual was revised and signed on April 4, 2016
- MOU PREA Victim Advocacy and Emotional Support Services by The Rape Crisis Center (RCC) revised and signed on May 5, 2016.
- Correspondences with FMWCC from NDOC verification all posters are posted at facility April 5, 2016

### **Standard 115.52 Exhaustion of administrative remedies**

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

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

NDOC AR 740 outlines the procedure for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. It states that all time frames are waived for allegations of sexual abuse, regardless of when the incident is alleged to have

occurred, allegations of sexual abuse, inmates are referred to a staff member, who is the subject of the accusation of sexual abuse, inmates are not required to use an informal grievance process, or otherwise attempt to resolve with staff an alleged incident of sexual abuse, and that a final decision on the merits shall be made within 90 days of the initial filing of the grievance.

AR 740 outlines administrative procedure for dealing with inmate grievances regarding sexual abuse. It states that grievances alleging staff on inmate sexual misconduct or inmate on inmate sexual abuse will be forwarded immediate to the Appointing Authority and followed by a confidential report completed on NOTIS. Then, copy of the grievance will be forwarded to the PREA Management team in the IG's Office for review and investigations.

AR 740 does require the agency to demonstrate the inmate has filed the grievance in bad faith in order to discipline the inmate. During review of documents the PREA Audit team after review of the IG/PREA Status reports it was found there had been four(4) grievances filed in 2015 which of the four and one was unfounded of the 4. The original PREA Pre-Questionnaire had reported only one which was identified as over 12 months old. The agency and FMWCC was afforded the opportunity to provide documentation for 115.52(d) to ensure compliance and PREA auditor was afforded opportunity to review one.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC  
State of Nevada Department of Corrections Administrative Regulation 740  
State of Nevada Department of Corrections Administrative Regulation 421  
State of Nevada Department of Corrections PREA Manual  
Inmate Educational Materials (Handbook and posters)  
Interview with FMWCC Case Worker Specialist III/PREA Compliance Manager  
Data from NOTIS on Investigations/grievances

### **Standard 115.53 Inmate access to outside confidential support services**

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

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

NDOC/FMWCC does not house inmates solely for civil immigration purposes, therefore 115.53(a0-1 is not applicable. FMWCC informs inmates, prior to access to outside support services, the extent which communication will be monitored though offender Orientation Handbook, AR 421, Rape Crisis Center, and Crisis Call Center and the PREA Posters located throughout the facility. However the State of Nevada has a Statue of Privilege NEV. REV. STAT. ANN. § 49.2546

1. A communication shall be deemed to be confidential if the communication is between a victim and a victim's advocate and is not intended to be disclosed to third persons other than:

- (a) A person who is present to further the interest of the victim;
- (b) A person reasonably necessary for the transmission of the communication; or
- (c) A person who is participating in the advice, counseling or assistance of the victim, including, without limitation, a member of the victim's family.

2. As used in this section, "communication" includes, without limitation, all records concerning the victim and the services provided to the victim which are within the possession of:

- (a) The victim's advocate; or
- (b) The nonprofit program for whom the victim's advocate works.

NEV. REV. STAT. ANN. § 49.2547 (West 2012)

Except as otherwise provided in NRS 49.2549, a victim who seeks advice, counseling or assistance from a victim's advocate has a privilege to refuse to disclose, and to prevent any other person from disclosing, confidential communications set forth in NRS 49.2546.

NEV. REV. STAT. ANN. § 49.2549 (West 2012)

There is no privilege pursuant to NRS 49.2547 if:

PREA Audit Report

NDOC will be utilizing Rape Crisis Center for confidential emotional support services related to sexual abuse as a community base provider and will be reviewing the current MOU and revise it for signature by first week in March 2016. NDOC will also be reviewing the Grant obtained for report for violence against woman from January 1 through December 31, 2015 which was obtained 2-29-16 in partnership with RCC, in order to compare the statistical information on the grant report figures for reporting to the number of reports made to NDOC by RCC. Though it was found RCC was not in compliance with the signed MOU and the PREA Auditors discovery of Statue of privilege for the State of Nevada 115.53(b) will not be in-compliance until the revision of RCC MOU is complete and the NDOC updates procedures for staff and inmates. The action plan for this standard will be addressed with NDOC to come into compliance within the required time lines.

FMWCC inmate education PREA poster provides inmates with contact information for outside emotional support services including a toll free 24 hour hot-line. However it is on the same poster as the PREA poster for NDOC. PREA Auditors recommended to have two separate posters for inmates to better identify the role of each agency the poster is referring to.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC

State of Nevada Department of Corrections PREA Manual

FMWCC Operational Procedure 421

State of Nevada Department of Corrections Administrative Regulation 421

MOU Rape Crisis Center/Revised memorandum draft/email

Inmate Educational Materials (Handbook and posters)

Interviews with random inmates

Interviews with inmates who reported Sexual abuse

Interview with FMWCC Case worker specialist III /PREA Compliance Manager

Interview with Lieutenant (intermediate or higher staff)

State of Nevada Statue of Privilege (NEV. REV. STAT. ANN. § 49.2546)

### **Corrective Action Required**

5. NDOC/FMWCC should update all education for inmates is updated and the key information is continuously and readily available through updated posters, inmate handbooks and other written formats to privately report PREA.
6. NDOC PREA Manual revision to update Reporting and emotional Support revisions.
7. Revision of MOU with Victim Advocates and services contracts with NDOC based on State of Nevada Statue of Privilege.
8. NDOC will finalize the Intergovernmental agreement with the State of New Mexico Department of Corrections and the agreement signed, for an outside agency reporting entity for inmates.

### **Verification of Corrective Action since the Audit**

The Auditor was provided supplemental documentation prior to and on 3-14-16, 4-4-16, 4-19-16, 5-05-16 to evidence and demonstrate corrective actions taken by NDOC and FMWCC regarding this standard. The documentation is discussed below.

### **Additional Documentation Reviewed:**

- NDOC and The State of New Mexico Department of Corrections (NMCD) entered into an Intergovernmental agreement for PREA Reporting Commencing on March 31, 2016 and will be completed on January 2019 unless terminated sooner or extended.
- Inmate education that is readily available to inmates through Posters, inmate handbooks, or other written formats was updated to reflect NMCD as the outside agency third party reporting and the new role of PREA Victim Advocacy and Emotional Support Services by The Rape Crisis Center (RCC).
- FMWCC Inmate handbook revised, April 19, 2016.
- PREA Posters Spanish and English Revised, March 14, 2016
- NDOC PREA Manual was revised and signed on April 4, 2016
- MOU PREA Victim Advocacy and Emotional Support Services by The Rape Crisis Center (RCC) revised and signed on May 5, 2016.
- Correspondences with FMWCC from NDOC verification all posters are posted at facility April 5, 2016

### Standard 115.54 Third-party reporting

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

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

NDOC PREA website outlines ways that visitors, inmate family members or associates, and other community members can privately report sexual abuse or sexual harassment and also provides access to NDOC procedure and policy AR421.

### FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by FMWCC

NDOC PREA Website

[\(http://doc.nv.gov/About/NDOC Office of the Inspector General/PREA Management Division/\)](http://doc.nv.gov/About/NDOC_Office_of_the_Inspector_General/PREA_Management_Division/)

State of Nevada Department of Corrections Administrative Regulation 421

Anonymous PREA Incident Report Form on NDOC PREA Website

### Standard 115.61 Staff and agency reporting duties

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

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

NDOC AR 421, and PREA Manual require that all staff immediately report any staff neglect or violation of responsibilities that may have contributed to any incident of inmate on inmate or staff/contractor/volunteer on inmate sexual harassment or retaliation for reporting of an allegation by other staff or inmates.

NDOC AR421 and the PREA Manual also state that all department staff have the affirmative duty to immediately report any retaliation against inmates or staff, who reported any knowledge, suspicion, or inmate sexual abuse or inmate on inmate or staff/contractor/volunteer on inmate sexual harassment.

The PREA Manual and AR 421 state all case records associated with claims of sexual assault, sexual activity, sexual misconduct or any attempt thereof, including written reports, investigation reports, evidence, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are confidential.

The PREA Manual does give procedures for youthful inmates though FMWCC currently does not house youthful offenders and the unit which would house them is not open or staffed.

## FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by NNTH  
State of Nevada Department of Corrections Administrative Regulation 421  
FMWCC Operational Procedure 421  
State of Nevada Department of Corrections PREA Manual  
Interviews with random Staff  
Interview with State of Nevada Department of Corrections Medical Director  
Interviews with Medical staff  
Interview with Warden  
Interviews with Agency Investigator General/PREA Coordinator  
On-Site review of NOTIS Reports

### Standard 115.62 Agency protection duties

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

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

The PREA Manual states Institutions and facility staff have the affirmative and immediate duty to respond and take immediate action when they learn an inmate is subject to substantial or imminent sexual abuse. NDOC AR 740 requires that immediate action shall be taken once the facility learns that an inmate is subject to a substantial risk of imminent sexual abuse.

NDOC AR 421 and OP 421 both document 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 employ, contractor, or volunteer is required to immediately report the knowledge, suspicion, or information.

The administration and staff during interviews made it evident to PREA auditors they understood the seriousness of an inmate who is subject to a substantial risk of imminent sexual abuse and will take immediate action to protect the inmate. It was verbalized by all staff and administration this is something they all felt was utmost important to all of the agency.

## FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by FMWCC  
State of Nevada Department of Corrections PREA Manual  
State of Nevada Department of Corrections Administrative Regulation 421  
State of Nevada Department of Corrections Administrative Regulation 740  
FMWCC Operational Procedure 421  
Interview with State of Nevada Department of Corrections Interim Director  
Interview with random staff  
Interview with Warden  
Sample NDOC Forms 2091, 2093, 2094  
Interview with Caseworker who conduct intake screening

### Standard 115.63 Reporting to other confinement facilities

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

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

NDOC Office of Inspector General manages all PREA allegations received from NDOC facility and external agencies. The IG is responsible for notifying the applicable NDOC facility and external correctional agency when the allegation is received at a NDOC facility. The agency was given an opportunity to correct this error to meet standard 115.63(a). The PREA manual and the policy has been drafted for update as well as a memo to all staff advising them of the change on 3-1-16. Will be updating in the action plan set forth for NDOC FMWCC compliance of PREA.

NDOC procedure and policy AR 421 reports all agency allegations of sexual abuse and sexual harassment not generated from a facility must be reported to the IG office. The PREA Coordinator confirmed that the IG office would manage the report of a PREA allegation at facility or entity that not currently housing the inmate.

During the past 12 months FMWCC received three (3) allegations that an inmate was abused while confined at another facility and these were referred to the IG office. The reports were managed timely within the 72 hours.

#### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC  
 Email to all facilities from NDOC Inspector General/PREA Coordinator 421.11 update agency head to make contact of report, until AR can be reviewed for update by State Board in Sept.  
 FMWCC Operational Procedure 421  
 Correspondence to RCC from NDOC Inspector General/PREA Coordinator  
 Examples of outside agency reporting  
 State of Nevada Department of Corrections PREA Manual  
 State of Nevada Department of Corrections Administrative Regulation 421  
 On-Site review of NOTIS  
 On-Site tour and Interviews with Agency Investigator General/PREA Coordinator  
 Interview with State of Nevada Department of Corrections Interim Director  
 Interview with Associate Warden  
 State of Nevada Statue of Privilege (NEV. REV. STAT. ANN. § 49.2546)

#### **Corrective Action Required**

1. NDOC PREA Manual revision to update Reporting by the Agency Head of the facility.
2. NDOC AR 421 revision to reflect notification procedure change

#### **Verification of Corrective Action since the Audit**

The Auditor was provided supplemental documentation prior to and on 4-4-16, 4-19-16, 5-05-16 to evidence and demonstrate corrective actions taken by NDOC and FMWCC regarding this standard. The documentation is discussed below.

#### **Additional Documentation Reviewed:**

- State of Nevada Department of Corrections PREA Manual updated and signed, April 4, 2016
- The state of Nevada has to recommend to the State Board of directors any Policy revisions which has one prepared for the next Bi-Annual referral in September. Agency Investigator General/PREA Coordinator prepared a notification of

procedure change and sent to all facilities for 115.63(a) to ensure proper notifications by Agency Heads until policy is officially approved to be changed so the PREA Manual has it updated.

### Standard 115.64 Staff first responder duties

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

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

The PREA Manual, AR 421, and the OP 421.1 outline the procedures for the Custody staff to an allegation of Sexual abuse. NDOC AR421 and The PREA manual state when made aware of a sexual assault or any attempt thereof has occurred or is reported as occurred within 72 hours of occurrence, Custody staff member will ensure the victim is safe and kept separated from the aggressor, notify supervisor, begin crime scene identification and protection measures until released by investigating body, escort the victim to the medical unit, collect clothing and provide an orange jumpsuit to the inmate. Ensure each item of clothing is bagged separately in brown paper bags and booked into evidence, temporarily place the suspect in a cell and immediately collect suspects clothing prior to being left alone to prevent evidence destruction, after clothing is collected issue an orange jumpsuit to the suspect, ensure clothing is also bagged separately in a brown paper bags and booked into evidence. Escort suspect to infirmary after victim has been assessed, the victim and suspect should not be placed/housed, even temporarily, in the same area and have no contact at any time. , Collect any other evidence and book it with the appropriate chain of evidence form, and include all written reports related to the sexual assault. . Secure the incident area and treat it as a crime scene until release by the Warden, Inspector General or designee.

If the alleged incident occurred within a 72 hour time frame, a shift supervisor is required to complete FORM A and B. The PREA Coordinator notified the PREA Auditors they had notified all NDOC facilities previously to use the newer FORM B which reads 72 hours the DOC 2093 (03/13) is current which was provided it was suggested to correct the wording on form B so staff were advised it was not inclusive to the victim which was completed immediately

### FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by FMWCC  
State of Nevada Department of Corrections Administrative Regulation 421  
FMWCC Operational Procedure 421  
NDOC Agency Grant dated 1-28-16  
Interviews with First responders  
Interviews with Random staff  
Interviews with inmates who reported sexual abuse  
State of Nevada Department of Corrections PREA Manual  
Sample NDOC Forms 2091, 2093, 2094  
PREA Reallocation Grant

### Standard 115.65 Coordinated response

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

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

FMWCC utilizes OP 421.1 PREA Sexual Assault and Coordinated Response. Duties, taking actions needed to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership, as required by this standard 115.65 (a)-1.

It was found during this PREA audit in review of the forms though staff verbalized actions correctly FORM B which is one of the written institutional plans supervisors utilize and states on (B) if assault was within the last 12 hours they are to be placed in an area where he/she cannot clean themselves this not for the victim which the bottom of the form states.

#### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC  
FMWCC Operational Procedure 421.2  
Sample NDOC Forms 2091, 2093, 2094  
Interview with Warden

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

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

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

NDOC and FMWCC has Statutory requirements related to disciplinary action based on the Peace Officers Bill of rights, however it does not deal with Unions or Collective Bargaining Agreements . This standard does not appear to be implicated by the mandates of State or local laws.

#### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

State of Nevada Department of Corrections Administrative Regulation 421  
Completed Pre-Audit Questionnaire Submitted by FMWCC  
FMWCC Operational Procedure 421.2  
Interview with State of Nevada Department of Corrections Interim Director  
Reviewed the online NR 289 Peace Officers Bill of Rights

## Standard 115.67 Agency protection against retaliation

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

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

FMWCC has a procedure/policy OP 421 Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act. , which requires that monitoring for retaliation be conducted and documented.

NDOC AR 421 states that no staff member or inmate who reports sexual abuse or sexual harassment or cooperates with sexual abuse or sexual harassment investigations will be subjected to any form of retaliation from other staff members or inmates of the Department.

NDOC has identified the PCM responsibility of FMWCC to ensure compliance with Operational Procedures, and will ensure all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigation are protected from retaliation from other inmates or staff in accordance with this standard.

OP 421 also requires retaliation against inmates or staff who report such incident is strictly prohibited and all reports of retaliation shall be documented in NOTIS and will be referred for review for investigation by the IG's Office.

The FMWCC assigned Lieutenant will monitor for possible retaliation. The Lieutenant documents his assessments on NOTIS and maintains a data base for the facility for the PCM to review. (PREA Retaliation Tracking Log)

The incident Review panel will assign appropriate staff to monitor the conduct and treatment of inmates and or staff who reported the sexual abuse and inmates that suffered the abuse to identify any changes that would suggest that these individuals have become the subject of retaliation for reporting or cooperating with the an investigation of sexual abuse. The panel will also assign staff to monitor any other individual who expressed fear of retaliation due to their involvement. This will be reviewed by the Warden and all recommendations will be considered.

## FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by FMWCC

State of Nevada Department of Corrections Administrative Regulation 421

FMWCC Operational Procedure 421

Interview with Agency Investigator General/PREA Coordinator Interview with FMWCC Investigator General

Interview with Lieutenant (intermediate or higher) (monitors retaliation)

Interview with State of Nevada Department of Corrections Interim Director

Interview with Warden

Interview and on-Site View of NOTIS PREA monitoring/tracking log and with FMWCC Case worker specialist III/PREA Compliance Manager

## Standard 115.68 Post-allegation protective custody

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion**

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

NDOC AR 573 Screening and Classification and FMWCC OP 573 both prohibit the placement of inmates who are at high risk for victimization unless an assessment of all available alternatives means of separation from likely abusers. As such an assignment shall not ordinarily exceed a period of 30 days and requires a review to determine whether there is a continuing need for separation. .

If an involuntary segregated housing assignment is made the facility shall clearly document; the basis for the facilities concern for inmates 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 continuing need for separation from the general population.

In the past 12 months at FMWCC there has been no inmates who alleged to have suffered sexual abuse and were held in involuntary the segregation unit.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC  
State of Nevada Department of Corrections Administrative Regulation 573  
FMWCC Operational Procedure 573  
Interview with Warden  
Interviews with Random Staff  
On-Site review of Inmate IFILE's and rosters  
Interviews with Caseworkers

### **Standard 115.71 Criminal and administrative agency investigations**

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

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

IG has overall responsibility for Administrative and criminal investigations. NDOC 457 does state the IG may request assistance of outside agencies in the completion of investigations and the PREA Manual states all associated or identified staff members will cooperate should any outside agency ever conduct an investigation into an allegation of staff member, contractor, or volunteer engaging in sexual abuse of an inmate.

NDOC also has to comply with NR 289 Peace Officers Bill of Rights which is very stringent regarding time requirements and the rights of staff related to criminal and administrative investigations. The IG office will retain all the written reports pertaining to administrative criminal investigations of alleged sexual harassment or sexual assault for as long as the alleged abuser is incarcerated or employed by the agency.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

State of Nevada Department of Corrections Administrative Regulation 457  
State of Nevada Department of Corrections Administrative Regulation 421

State of Nevada Department of Corrections Administrative Regulation 708  
Completed Pre-Audit Questionnaire Submitted by FMWCC  
FMWCC Operational Procedure 421  
Nevada Department of Corrections Office of The Inspector General Administrative Investigations Guide/Manual.  
State of Nevada Department of Corrections PREA Manual  
Interview with FMWCC Investigator general  
Interview with Warden  
Inmate Educational Materials (Handbook)  
Training Certificate's for Investigator General Staff who have completed PREA: Investigating Sexual Abuse in a Confinement Setting (NIC)  
Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case worker Specialist III/ PREA Compliance Manager  
Example of completed investigations from NDOC  
Reviewed the online NR 289 Peace Officers Bill of Rights

### **Standard 115.72 Evidentiary standard for administrative investigations**

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

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

The PREA Manual and the according to the IG investigator (PREA Coordinator), NDOC imposes a standard of a preponderance of the evidence for determining whether allegations of sexual abuse or sexual harassment are substantiated in Administrative investigations.

The IG at the facility level referred to the OIG is where all written reports pertaining to criminal and administrative investigations of alleged sexual assault or sexual harassment for a period of an additional five (5) years to when the alleged abuser is employed or incarcerated with NDOC.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC  
State of Nevada Department of Corrections PREA Manual  
Interview with FMWCC Investigator General  
Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case worker specialist III/ PREA Compliance Manager

### **Standard 115.73 Reporting to inmates**

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

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance**

**determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

The office of the IG informs the alleged victim whenever the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility, or the agency learns that the alleged abuser has been convicted on a charge related sexual abuse with the facility. .

NDOC AR 457 Investigations, requires that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing as to whether the allegation has been determined to be substantiated. Substantiated, or unfounded, following an investigation by the agency.

NDOC subsequently requires to inform the inmate unless the agency has determined that the allegation is unfounded, whenever the staff member is no longer posted with the inmates unit, the staff member is no longer employed at the facility, the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility, or the agency learns that the staff member has been convicted on a charge related to sexual abuse with the facility.

FMWCC initially reported it had 27 Completed criminal and or administrative investigations of alleged inmate sexual abuse that were completed by the agency, 15 of the alleged sexual abuse investigations that were completed which notified inmates verbally or in writing of the results. FMWCC did not provide any documentation demonstrating notification documentation. The PREA Pre -Questionnaire was marked zero (0). NDOC and FMWCC was afforded the opportunity to correct this error to ensure compliance with the standard. The documentation of notification was provided on 3-8-16. NDOC Provided a corrected documentation of the total amount of reports was actually for this year of 2015 however needed is completion in the last 12 months to verify accurate account for completion 12 month period and was also provided by the IG.

PREA standard 115.73(b)-1 (b)-3 are not applicable as NDOC is responsible for conducting administrative and criminal investigations.

#### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC

Interview with FMWCC Investigator General

Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case worker specialist III/PREA Compliance Manager

State of Nevada Department of Corrections Administrative Regulation 421

State of Nevada Department of Corrections Administrative Regulation 457

On-Site Review of Agency NOTIS PREA tracking/Reporting and notification Log

Notification/monitoring notification examples

FMWCC 2015 to present Data base copy

Interview with Random Inmates

Interview with Warden

#### **Standard 115.76 Disciplinary sanctions for staff**

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

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

The PREA Manual and NDOC AR 421 state that terminations for violations of Departmental sexual abuse or sexual Harassment policies, or resignations by staff who would have been terminated if not their resignation, shall be reported to law enforcement agencies and to any relevant licensing bodies.

NDOC AR 339 states that staff members will be subject to internal discipline to include termination as defined in Code of Ethics policy AR339. Employee Conduct Prohibitions penalties Class 5. AR339 indicates that staff penalties for prohibited activities should be assessed based upon criteria established in the Chart of Corrective/Disciplinary sanctions, which describes under Sexual abuse and misconduct is a class 5 which would warrant dismissal on first offense. FMWCC has had one staff from the facility who has violated the agency sexual abuse or sexual harassment policy however on the PREA Pre-Questionnaire it is not documented under standard 115.76 (c)-2 or (d)-2 what the discipline or termination if any due to it was recent and still is under investigation.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC

Interview with FMWCC Investigator general

Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case worker specialist III/ PREA Compliance Manager

State of Nevada Department of Corrections Administrative Regulation 421

State of Nevada Department of Corrections Administrative Regulation 339

State of Nevada Department of Corrections PREA Manual

### **Standard 115.77 Corrective action for contractors and volunteers**

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

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

NDOC AR 421 requires that any contractor or volunteer who engages in an activity that could be interpreted a 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.

AR 421 and the PREA Manual state that any contractor or volunteer who engage in sexual abuse or harassment shall be prohibited contact with the inmates and reported to any relevant licensing body by the IG Office with applicable NOTIS entries documented.

FMWCC in the past 12 months has had zero contractors or volunteers whom have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC

State of Nevada Department of Corrections Administrative Regulation 421

State of Nevada Department of Corrections PREA Manual

Interview with Warden

Interview FMWCC Case worker specialist III/PREA Compliance Manager

On-Site NOTIS review and Interviews with Agency Investigator General/PREA Coordinator

### Standard 115.78 Disciplinary sanctions for inmates

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

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

NDOC AR 421 requires that any contractor or volunteer who engages in an activity that could be interpreted a 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.

AR 421 and the PREA Manual state that any contractor or volunteer who engage in sexual abuse or harassment shall be prohibited contact with the inmates and reported to any relevant licensing body by the IG Office with applicable NOTIS entries documented.

FMWCC in the past 12 months has had zero contractors or volunteers whom have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.

### FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

State of Nevada Department of Corrections Administrative Regulation 421

State of Nevada Department of Corrections Administrative Regulation 707

Interview with Warden

Completed Pre-Audit Questionnaire Submitted by FMWCC

FMWCC Operational Procedure 421

Interview with Agency Medical Director

Interview with Medical/Mental Health

Interviews of Random staff

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

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

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

NDOC PREA Manual and FMWCC OP 573 states that all inmates who have disclosed any sexual victimization during the screening process will be offered a follow-up meeting with medical or mental health practitioner within fourteen (14) days of the intake screening.

NDOC PREA Manual and OP 573 require and state all inmates who have perpetrated sexual abuse during the screening be offered a follow-up meeting with mental health within 14 days. Although information related to sexual victimization or abusiveness that occurred in an institutional setting is not strictly limited to medical and mental health practitioners, the information shared with other staff is strictly limited

to informing security management decisions, including treatment plans, housing, bed, work, education, and program assignment, or otherwise required by federal, state, or local law. FMWCC staff who conduct screenings reported however policy requires 14 days they immediately report or refer for both sexual perpetration history and sexual victimization history.

FMWCC utilizes OC #2548 which if medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that occurred in an institutional setting.

FMWCC maintains tracing of all inmates who have been referred, dates of follow up to ensure timeliness are met and outcome of the meetings.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

State of Nevada Department of Corrections PREA Manual  
Completed Pre-Audit Questionnaire Submitted by FMWCC  
FMWCC Operational Procedure 573  
Interviews with Caseworkers/caseworker trainee  
Interview with random inmates  
Sample of NDOC form 2548 (consent form) provided  
Interview with Agency Medical Director  
Interview with Medical/Mental Health  
On-Site tour of holding cells  
Example of Mental Health/Medical referral form  
Example of Mental Health referrals provided  
Interview with FMWCC Case worker specialist III/ PREA Compliance Manager  
Reviewed NDOC Form 2548, 2523, and 2502

### **Standard 115.82 Access to emergency medical and mental health services**

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

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

The PREA Manual and FMWCC OP 600 Health Services requires that inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency medical treatment and crisis intervention services, the nature and scope which are determined by medical and mental health practitioners according to their professional judgment. Inmate victims of sexual abuse while incarcerated shall be 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.

NDCO PREA and FMWCC OP 600 Manual also states treatment services are provided without financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

FMWCC medical and mental health staff maintain secondary material documenting timeliness of emergency medical treatment and crisis intervention services to inmates at the facility

Inmates who were interviewed did have knowledge they had access to these services without cost and that the services were free. The inmates reported the PREA education video is where they reported they received the direct knowledge.

## FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by FMWCC  
Interview with Medical Director  
Interviews with Medical/Mental health  
Interviews with First responders  
Interviews with Random staff  
Interview with FMWCC Case worker specialist III/ PREA Compliance Manager  
FMWCC Operational Procedure 600  
State of Nevada Department of Corrections PREA Manual  
Interview with Sane/Safe Nurse  
Reviewed NDOC Form 2548 consent of release medical information  
Inmate Educational Materials (Handbook)

### Standard 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

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

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

NDOC PREA manual does require facilities to offer medical and mental health evaluations and, as, appropriate, treatment to all inmates who have been victimized by sexual abuse in prison, jail, lockup, or juvenile facility. The manual outlines the procedures by stating all inmates will be assessed during the intake process, inmates will be offered a follow-up with 14 days of intake

FMWCC has OP 600 which provides such victims with medical and mental health services consistent with the community level of care. Though Medical and Mental Health report the care is better than community level due to immediate treatment and access and no cost for emergency services.

FMWCC conducts a mental health evaluation of all known inmate on inmate abusers within 60 days of learning of abuse history and offers treatment when deemed appropriate by mental health practitioners. Mental Health will meet once a week to discuss treatment options.

## FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

FMWCC Operational Procedure 600  
Completed Pre-Audit Questionnaire Submitted by FMWCC  
State of Nevada Department of Corrections PREA Manual  
Interview with FMWCC Case worker specialist III/ PREA Compliance Manager  
Interview with Medical Director  
Interview with Medical/Mental health  
Interviews with Random Inmates

## Standard 115.86 Sexual abuse incident reviews

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

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

NDOC AR 421 Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, NNTH OP 421 Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, and the PREA Manual outline the facilities and agencies Sexual Incident Review (SAIR) processes. The SAIR, conducted by the Multi-Disciplinary Team shall be held at the completion of every sexual abuse investigation including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.

FMWCC the PREA Compliance Manager will ensure the specially identified staff participate in the Review as required by policy.

Upon learning of the completion of any sexual abuse investigation the review shall ordinarily occur with thirty (30) days of the conclusion of the investigation and it will be document using the Committee Review of Sexual Abuse Investigation form located in NOTIS( under the IR incident number)

NDOC policy and the PREA Manual state that the review team shall document their findings and the facility shall implement the recommendations for improvement or document its reason for non-implemented improvements.

### FMWCC Policy, Materials, Interviews and Other Evidence Reviewed

Completed Pre-Audit Questionnaire Submitted by FMWCC

State of Nevada Department of Corrections Administrative Regulation 421

State of Nevada Department of Corrections PREA Manual

FMWCC Operational Procedure 421

Interviews with Warden

Interviews with Incident review team members

Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case worker specialist III/PREA Compliance Manager

Incident review example

## Standard 115.87 Data collection

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

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

NDOC AR421 and the PREA manual state the IG is responsible to collect accurate, uniform data for every allegation of sexual abuse from every institution and facility using a standardized instrument and set of definitions. NDOC IG obtained grants to better assist in this process

to help collect the data.

The PREA manual states that the data shall include at a minimum the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization. Of Sexual Violence. (2014 deleted Violence) conducted by the Department of Justice.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

State of Nevada Department of Corrections Administrative Regulation 421

State of Nevada Department of Corrections PREA Manual

Completed Pre-Audit Questionnaire Submitted by FMWCC

FMWCC NOTIS tracking form which shows 2015 to present PREA aggregated data is maintained in the IG/PREA Coordinators office

Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case worker specialist III/ PREA Compliance Manager

### **Standard 115.88 Data review for corrective action**

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

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

NDOC AR421 and the PREA manual data collected and aggregated shall be reviewed by the Director, or Designee, Deputy Director of Operations, and the IG PREA Coordinator in order to assess and improve, if necessary the effectiveness of its sexual abuse prevention, detection, and response policies, practices and training.

The review will include identifying problem areas, taking corrective action on an ongoing basis and preparing an annual report of its findings and corrective actions for each facility and Department where inmates may be present.

The policy states that the annual report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the Departments progress in addressing sexual abuse. The Departments report is readily available to the public on the Departments website after it is approved by the director. The Report was located on the NDOC website for 2015 and included 2014 comparison and documentation in the body. If specific material is redacted from the reports then there must be an indication of the nature of the material redacted.

### **FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

Completed Pre-Audit Questionnaire Submitted by FMWCC

Interviews with Agency Investigator General/PREA Coordinator and FMWCC Case worker specialist III/ PREA Compliance Manager

Interview with State of Nevada Department of Corrections Interim Director

Review of NDOC Annual PREA report

State of Nevada Department of Corrections Administrative Regulation 421

State of Nevada Department of Corrections PREA Manual

Review of NDOC Website [http://doc.nv.gov/About/NDOC\\_Office\\_of\\_the\\_Inspector\\_General/2013\\_PREA\\_Incidents/](http://doc.nv.gov/About/NDOC_Office_of_the_Inspector_General/2013_PREA_Incidents/)

2013 Annual Report of Findings and Corrective Action

**Standard 115.89 Data storage, publication, and destruction**

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

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

NDOC AR421 and the PREA manual data collected and aggregated shall be reviewed by the Director, or Designee, Deputy Director of Operations, and the IG PREA Coordinator in order to assess and improve , if necessary the effectiveness of its sexual abuse prevention, detection, and response policies, practices and training.

The review will include identifying problem areas, taking corrective action on an ongoing basis and preparing an annual report of its findings and corrective actions for each facility and Department where inmates may be present.

The policy states that the annual report shall include a comparison of the current year’s data and corrective actions with those from prior years and shall provide an assessment of the Departments progress in addressing sexual abuse. The Departments report is readily available to the public on the Departments website after it is approved by the director. The Report was located on the NDOC website for 2015and included 2014 comparison and documentation in the body. If specific material is redacted from the reports then there must be an indication of the nature of the material redacted.

**FMWCC Policy, Materials, Interviews and Other Evidence Reviewed**

- Completed Pre-Audit Questionnaire Submitted by FMWCC
- State of Nevada Department of Corrections Administrative Regulation 421
- State of Nevada Department of Corrections PREA Manual
- Interviews with Agency Investigator General/PREA Coordinator
- Interview with Case worker specialist III/REA Compliance Manager
- Interview with State of Nevada Department of Corrections Interim Director

**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.

Theresa L. Cohn

5/19/16

Auditor Signature

Date