PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



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Name of facility:	Carlin Conservation Camp			
Physical Address:	124 Suzie Creek Road, Carlin, NV 89	822		
Date report submitted	: August 29, 2015			
Auditor Information	Cheyenne Evans			
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Date of facility visit:	07/07/2015 & 07/08/2015			
Facility Information				
Facility mailing addres	ss: (if different from above)			
	Same as Physical Address			
Facility Telephone Nu				
	775-887-3285			
CCC is:				
🗆 Military	🗆 County	Federal		
Private for profit	🗆 Municipal	☑State		
Private not for pro	ofit			
Facility Type:	🗆 Jail 🛛 🖬 Prison			
Name of PREA Com	pliance Manager: Tara Carpenter	Title: Associate Warden of		
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Agency Information				
Name of agency:				
Governing authority or	r parent agency: (if applicable) N/A			
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NARRATIVE:

The PREA audit for the Nevada Department of Corrections (NDOC), Carlin Conservation Camp (CCC) was conduct from July 7, 2015 to July 8, 2015, by this writer, Cheyenne Evans, a Certified Department of Justice (DOJ) PREA Auditor with the assistance of one Support Staff Member, Gail Mirkovich, hereafter referred to as the PREA Audit Team. CCC is located in Carlin, Nevada.

CCC coordinates with the Nevada Division of Forestry (NDF) to train inmates to work with firefighting crews during fire season; they do community work, clean up and snow removal during off seasons. The facility design capacity is 152 minimum custody inmates. During the time of audit the population count was 126 inmates. The camp is overseen by Lovelock Correctional Center (LCC) located in Lovelock Nevada where the Warden and Associate Wardens do periodic checks at CCC. The camp is managed on a daily basis by one Camp Manager, Lieutenant Matthew Stevens. There are seven listed security staff members to include a Sergeant and Senior Officer who maintains the twelve hour shifts that run 0500-2100 hours and 2100 hours to 0500 hours.

Day one, the physical audit began with a "meet and greet" with the Associate Warden of Programs / Facility PREA Manager Tara Carpenter and Camp Manager Lieutenant Matthew Stevens and the PREA Audit Team. The following areas that were toured were 1 housing unit with three units which are called wings (A, B, C), the dining room, kitchen, Gym / Multipurpose area and recreation areas around the main housing building, Property and Canteen Room, Laundry area, one Security Control / Station, Administrative and Case Management Offices and rooms and storage space. There is a building in close proximity to the facility that belongs to the NDF, where the inmates report for duty on a daily basis with NDF staff.

A tentative agenda had been generated in advance and slight modification did occur during the audit. After conducting the facility tour, the PREA Audit Team was able to interview both Correctional Staff on duty, first shift, and random selection of inmates.

There were no inmates who identified as Lesbian, Gay, Bisexual, Transgender or Intersex, or categorized as inmates who were disabled or with limited English, nor any inmates who reported sexual abuse at CCC. The Audit Team interviewed approximately 10 percent or more of the inmate population, 18 to 20 inmates out of 126 using the Random Inmate questionnaire.

The second day was spent interviewing specialized staff that included Warden Designee, Facility PREA Compliance Manager, Volunteer/Contractor (NDF), one Case Manager, First Responders, Designated Staff member Charged with monitoring retaliation and Intermediate to Higher Level Facility Staff, the second shift of Correctional Staff to include a staff member on overtime from Lovelock Correctional Center. Due to the small roster of staffing all staff members were interviewed. As the interviews were ongoing it was discovered that some staff members have multiple roles because of the smaller staffing compliment therefore, in conjunction with the Random Staff questionnaire they were asked questions from the Specialized section listed above.

It is noted that no medical staff or Administrative as in human resource staff are located at CCC. All medical staff is located at their main facility which is Lovelock Correctional Center, any inmate that needs medical attention will be transported to Lovelock Correctional Center or the nearest emergency room as directed by medical and administrative managers. Human Resource staff interviews will be conducted in NDOC Headquarters located in Carson City, Nevada.

Inmate record, medical file and NOTIS online reviews to include PREA Screening reviews were also conducted on this second day.

At the end of the second day a preliminary assessment of CCC's compliance with the PREA Standards was conducted by discussing each Standard with the Facility PREA Manager. There were no areas of concern that was identified. The PREA Audit Team held an exit debriefing in the facilities conference room. The attendees included Inspector General Pamela Del Porto via telephone, NDOC PREA Program Manager Deborah Striplin, Associate Warden of Programs and Facility PREA Compliance Manager Tara Carpenter and Camp Manager Lieutenant Matthew Stevens. The exit briefing recapped CCC's compliance with the standards through discussion and documentation.

DESCRIPTION OF FACILITY CHARACTERISTICS

Carlin Conservation Camp (CCC) was constructed in 1987 and is located in Elko County Nevada. CCC has a design capacity of 150 minimum security custody beds for general population inmates. The physical plant includes a main central operations and supervision area in 1 housing unit with 3 wings, A, B & C, this main building is to include administrative offices, a conference room and canteen / store using a total of 14, 114 square feet. Other multipurpose buildings; pump house and storage shed use a total of 7,584 square feet. The facility uses 21,698 square feet on 144.51 acres.

Current inmate population at the time of audit was 126. The facility does not house any segregated or medical needs inmates though they do have a single cell for emergency purposes. All segregation or medical needs inmates are transported out to appropriate areas.

CCC coordinates with the Nevada Division of Forestry (NDF) to train inmates to work with firefighting crews during fire season; they do community work, clean up and snow removal during off seasons. On a daily basis crews "muster" in the Gym for count and when the count clears they are released to their NDF supervisor. At times they are required to camp in the areas of duty if it calls for it. During camp a correctional officer stays with them.

CCC installed two new video systems to assist in monitoring inmates and activities. These systems were installed in the Gym that has four cameras and can view all angles of the gym. The second system is placed around the perimeter and recreation yard areas with a count of eight cameras. These cameras are placed right outside of the perimeter fence line to protect them from inmate tampering.

CCC's mission, vision philosophy and goals are to protect and serve the public providing a safe and clean environment and accountability of the inmates. Give the inmates skills necessary to successfully re-enter society, and enhancing the safe operation of correctional facilities. They provide man power and support to NDF who is responsible for assisting during disaster relief incidents and community needs. The program will improve relations that may assist in providing a fiscally responsible method for the housing of inmates while generating funds through inmate labor for NDOC. With this mission and vision to provide man power and support to NDF is administered by a Warden Robert LeGrand and Associate Warden of Programs Tara Carpenter located at Lovelock Correctional Center (LCC) who oversees CCC. The Security or Command Staff on a daily basis located at CCC consists of 1 Lieutenant Camp Manager, 1 Sergeant and 1 Senior Officer. There are 8 custody positions and only 4 custody staff and 2 support program staff, case management / Store Keeper assigned, other positions are filled by staff coming from LCC.

The educational programs are geared toward GED certification, Adult Basic Education (High School Diploma), and Vocational certificates. The vocational certificates are earned in firefighting through NDF.

The Audit Team was impressed with how cooperative staff and inmates were during the audit and the transparency of their duties and responsibilities, which the information and comprehension of PREA were adequate. CCC staff at

all levels was very professional, efficient, respectful, and willing to aid the Audit Team without questions or commentary. The physical appearance of CCC inclusive of the inmate housing unit was clean, sanitary granted being in a harsh environment.

SUMMARY OF AUDIT FINDINGS

During the course of the two day on-site audit, the Audit Team interviewed approximately 18 random inmates and no specialized inmates, as none were identified by documentation or observations. The Audit Team interviewed all staff assigned to both 12 hour shifts to include an officer from LCC working at CCC for a total of 7 custody staff, 1 case manager, 1 store keeper and the Facility PREA Compliance Manager in conjunction with Warden or Designee, all utilizing Random and Specialized staff PREA questionnaires. Additional Supervisory and Specialized staff interviews were done during the Central Office interviews. The Audit Team reviewed about 10+ institutional files and about 10+ medical files. The Auditor worked with the Camp Manager to familiarize with NOTIS to understand the tracking systems. The NOTIS system allows for paperless record keeping of information relevant to NDOC and CCC. CCC was determined to have met 41 of the 43 PREA Standards, as 2 Standard related to Contracting with Other Entities and Youthful Inmates is not applicable to NDOC and CCC. Please see the remaining pages of this report for an assessment of each PREA Standard.

Number of standards exceeded: 0

Number of standards met: 41

Number of standards not met: 0

Number of standards not applicable: 2

- 1. Contracting with other entities for the confinement of inmates.
- 2. Youthful Inmates.

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115.11	ZERO TOLERANCE OF SEXUAL ABUSE AND SEXUAL HARASSMENT; PREA COORDINATOR		
Exceeds Standard (sul	bstantially exceeds requirement of standard)		
Meets Standard (substaperiod)	antial compliance; complies in all material ways with the standard for the relevant review		
1 /	ard (requires corrective action)		
Auditor comments, inclu	COORDINATOR (substantially exceeds requirement of standard) bstantial compliance; complies in all material ways with the standard for the relevant review ndard (requires corrective action) ncluding corrective actions needed if does not meet standard dures AR 421 and OP 421 outlines the agency's written policy mandating a zero tolerance s of sexual abuse, sexual harassment, and sets forth procedures for the agency's approach ng, and responding to sexual abuse and sexual harassment. NDOC policy AR 421.18 f prohibited behaviors regarding sexual abuse and sexual harassment. an upper-level, agency-wide PREA Coordinator, whose position functions as the NDOC cated within the Inspector General Office. The position has sufficient time and authority to and oversee the agency's efforts to comply with PREA in all of its facilities. d the Associate Warden of Programs as the Facility PREA Compliance Manager. The t time and authority to develop, implement, and oversee the agency's efforts to comply with lities. CONTRACTING WITH OTHER ENTITIES FOR THE CONFINEMENT OF INMATES (substantially exceeds requirement of standard)		
policy toward all forms of to preventing, detecting,	f sexual abuse, sexual harassment, and sets forth procedures for the agency's approach and responding to sexual abuse and sexual harassment. NDOC policy AR 421.18		
Inspector General, locate	ed within the Inspector General Office. The position has sufficient time and authority to		
	ne and authority to develop, implement, and oversee the agency's efforts to comply with		
115.12	CONTRACTING WITH OTHER ENTITIES FOR THE CONFINEMENT OF INMATES		
Exceeds Standard (sul	bstantially exceeds requirement of standard)		
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review			
period)			

Does Not Meet Standard (requires corrective action)

☑ NOT APPLICABLE

Auditor comments, including corrective actions needed if does not meet standard

The information received through interviews and supporting documentations indicates that NDOC has not entered into or renewed a contract for the confinement of inmates on or after August 20, 2012, or since the last PREA audit. This standard is not applicable to NDOC and CCC.

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)

Auditor comments, including corrective actions needed if does not meet standard

CCC has developed, documented, and made its "best efforts" to comply on a regular basis with a staffing plan that provides for adequate staffing levels, video monitoring has been added, and considers the factors identified in

section a.1-11. According to NDOC policy/procedure AR 326, any deviations from the minimum staffing requirements are reported to the Warden via the Associate Warden.

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 Agency or Facility resources.

NDOC policy/procedure AR 421and the PREA Manual require intermediate or higher level supervisors to conduct unannounced rounds and that staff are prohibited from alerting other staff members to these unannounced supervisory rounds. During interviews and observations all supervisors are out in the open and all staff are usually stationed in the main central area the supervisors a working supervisors and is always walking around. If for some reason the supervisor was announced the staff would be counseled. The NOTIS system was accessed where it shows that unannounced rounds were being done by intermediate or higher level supervisors.

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)

☑ NOT APPLICABLE

Auditor comments, including corrective actions needed if does not meet standard

CCC does not house youthful inmates. This programing is for adult offenders.

NDOC policy/procedure AR 421 and the PREA Manual 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 inmate.

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)

Auditor comments, including corrective actions needed if does not meet standard

NDOC policy/procedure AR 421 and the PREA Manual prohibit non-medical staff from conducting cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances. The policy requires that all exigent cross-gender visual body cavity searches be reported to the Warden and that they are documented in writing in NOTIS. CCC does not house female inmates, therefore PREA standards 115.15(b)-1, 115.15(b)-2, and 115.15(c)-2 are not applicable.

CCC Operational procedure 421 requires that female staff announce their presence when entering the housing unit. However, some inmates indicated that the announcement is dependent on the staff member working the housing unit which is seldom. During the tour, the staff members were consistent in making this announcement and the announcement was documented in NOTIS. A review of the Daily shift log in NOTIS did substantiate

CCC's compliance with this standard.

CCC showers were individual using full length curtains which provided sufficient privacy from possible female staff view. During interviews CCC states that should shower times be needed to allow transgender or intersex inmate's to shower separately they would accommodate their request. During the time of the audit there were no transgender or intersex inmates identified or observed.

NDOC policy/procedure AR 421 and CCC OP 422.03 prohibit searches of transgender or intersex inmates for the sole purpose of determining gender status. CCC reported that all security staff has received training on conducting pat down searches of transgender and intersex inmates. The standard requires that it is conducted in a professional, respectful, and least intrusive manner, while balancing the security needs of the facility. Review of Training documentation and training plans/PowerPoint substantiates claim.

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 comments, including corrective actions needed if does not meet standard

NDOC policy/procedure AR 421 states that all inmates will be afforded PREA education, including inmates who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. NDOC policy/procedure AR 421 and the PREA Manual outline the agency's established procedures to provide disabled inmates equal opportunity to benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. CCC's comprehensive inmate education video has been formatted in English, Spanish, and close captioning for both.

NDOC policy/procedure AR 421 and the PREA Manual prohibit the use of inmate interpreters, inmate readers, or other types of inmate assistance.

The NDOC PREA handout, posters, and education video are formatted in both English and Spanish.

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)

Auditor comments, including corrective actions needed if does not meet standard

NDOC policy/procedure AR 300, AR 421, and the PREA Manual address the provision of 115.17(a)-1 by prohibiting the hiring and promoting of anyone, or utilizing the services of any contractor or volunteer, who:

• Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution;

 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

• Has been civilly or administratively adjudicated to have engaged in the activity described above.

AR 300, AR 421, and the PREA Manual require that NDOC considers any incidents of sexual harassment when making a decision for hire, promotion or utilization as a contractor or volunteer. A provision was added to the performance evaluation to ensure that current employees acknowledge and certify annually based on another facility's corrective action plan.

AR 300, AR 421, and the PREA Manual state that before hiring any new staff member 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 Contracts, states that "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 421 and the PREA Manual state that HR and IG shall perform criminal background records check of all current employees every three years, beginning the first year of each PREA audit cycle. This was the result of a prior corrective action in another facility's PREA audit. AR 421 also states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

AR 308 authorizes only the Department Personnel Division staff to provide employment verifications, references, or other requests pertaining to employment information. The confidentiality of the files covered by AR 308 is governed by NAC 284.718: Confidential Records and NAC 284-726: Access to Confidential Records. AR 339 categorizes any false or misleading statements, including omissions, either verbally or in a written report or other documents as a Class 5 offense with the sanctioned result being discharge.

Based on interviews with HR staff, they are conducting background checks of prospective employees, promotional employees, contractors, and volunteers by utilizing NCIC, screening with prior employers and institutional employers, and contacting job references. A review of random HR files did not reveal any significant discrepancies with practice, except when fingerprints were not done but local criminal background checks were cleared prior to receiving the fingerprint clearance, files were unorganized and clearances for new employees, promotions were out of order, unable to find. The PREA Audit team was given a current list to pick files from and several of the files were of employees that no longer worked for the department. Majority of the HR staff that we dealt with were new and had little knowledge to the PREA Standard and seemed to be unorganized. PREA Coordinator conducted immediate corrective action with HR staff to ensure the timely follow up with discrepancies such as consistent filing system and clearance forms, submissions, and a systematic way of conducting the clearances and files.

115.18

UPGRADES TO FACILITIES AND TECHNOLOGY

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 comments, including corrective actions needed if does not meet standard

NDOC/CCC has upgraded and installed a video monitoring system in specific areas of CCC, since August 20, 2012 or since the last PREA audit. HSDP has submitted an additional budgetary request to upgrade the whole facility's video technology system and or add more.

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 comments, including corrective actions needed if does not meet standard

NDOC's Inspector General (IG) is responsible for conducting both the administrative and the criminal investigations for sexual abuse and sexual harassment. According to policy/procedure AR 421 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 Women publication. AR 421 is developmentally appropriate for youth; however the facility has not housed any youth after July 2014.

In AR 421 PREA Manual, Sexual Assault Forensic Evidence Collection Procedures state in number 2 for Northern Institutions that Officers DO NOT accept the Sexual Assault Forensic Exam Kits which are performed by SANE-A nurses at the Sexual Assault Support Services Center that the Kits will be placed in an evidence locker at the sex assault services center and the PREA Investigator or other designated IG Investigator will collect the assault kit. Due to the rural area of the facility direction for a qualified medical facility for collection will come at the direction of designated authority at LCC.

NDOC has an MOU with Crisis Call Center, Inc. for sexual assault support and direct services. Effective July 13, 2015.

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 comments, including corrective actions needed if does not meet standard

NDOC policy/procedure AR 421 Investigation of Allegations, states that the "NDOC Office of the Inspector General will investigate all allegations of staff on inmate sexual abuse, sexual harassment, and inmate on inmate sexual abuse." Also, NDOC policy/procedure AR 421 and the PREA Manual state that "NDOC Office of the Inspector General will investigate all allegations of staff on inmate abuse, sexual harassment and inmate on inmate sexual abuse." AR 421 and the PREA Manual define inmate abuse, sexual harassment and inmate on inmate sexual abuse." AR 421 and the PREA Manual define inmate on inmate sexual harassment as "repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate directed toward another."

The NDOC's PREA website includes a link to NDOC policy/procedure AR421 that describes the referral of allegations of sexual abuse or sexual harassment for criminal investigation. PREA standard 115.22(c) is not

applicable as the Department is responsible for conducting criminal investigations. NDOC documents all referrals of allegations of sexual abuse or sexual harassment for criminal and administrative investigation by the IG's Office, and there are procedures in place governing the conduct of these investigations.

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 comments, including corrective actions needed if does not meet standard

The lesson plan and the power point dated March 25, 2014 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's zero tolerance policy and the parameters covered in the PREA training.

CCC houses only male inmates and the training is tailored to both male and female inmates, therefore if employees are reassigned to/from facilities housing females, additional training is not required. CCC indicated that all staff received the required PREA training and on "off years," the agency does provide employees with information about current policies regarding PREA sexual abuse and sexual harassment. In addition, staff has access to the PREA policies, posters, and memorandums year round. During the audit tour, each housing unit had a PREA poster as a "how to guide" for managing a PREA incident with the relevant forms. According to policy/procedure AR 421, employees will receive refresher trainings on PREA every two years and this was verified by staff interviews and training records.

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 comments, including corrective actions needed if does not meet standard

NDF volunteer/contractors are sent to the same training as the custody staff and receive the same updates. Interviews with NDF staff had verified their training by the knowledge they possessed of PREA.

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 comments, including corrective actions needed if does not meet standard

According to policy/procedure AR 421, all inmates during the initial intake orientation receive information explaining the department's zero tolerance policy regarding sexual abuse and sexual harassment and how to

report incidents or suspicions of sexual abuse or sexual harassment. CCC is not an initial intake center and is more as a transfer facility for programs. CCC gives an initial orientation upon arrival to include PREA informational pamphlets in English and Spanish, a comprehensive education on PREA through a 3 and 15 minute video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding Departmental policies and procedures for responding to such incidents. A PREA questionnaire and initial assessment/screening. By the time inmates get to CCC they have seen and given PREA information several times.

The facility also provided records documenting the six month review for all inmates which are located in their institutional files. The inmates sign the PREA orientation acknowledgment form, acknowledging receipt of this information and this is entered into NOTIS.

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 comments, including corrective actions needed if does not meet standard

Policy/procedure AR 421 states that the IG shall ensure that investigators are trained in conducting sexual abuse investigations in confinement settings. No investigators located at CCC all investigations referred to IG's Offices under the direction of the Warden at LCC who oversees CCC.

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 comments, including corrective actions needed if does not meet standard

115.41

SCREENING FOR RISK OF VICTIMIZATION AND ABUSIVENESS

 $\hfill\square$ 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 comments, including corrective actions needed if does not meet standard

NDOC has a policy/procedure, 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 institution/facility. According to policy/procedure AR 573 PREA Screening and Classification, screening for risk of sexual victimization or sexual abusiveness shall be completed within 72 hours of arrival at an institution or facility, excluding holidays.

There are some concerns regarding the application of the Risk Assessment Tool. The additional questionnaire given upon admission appears to be primarily based on an inmate's self-report, but in practice the Correctional Caseworker conducts a file review to supplement the information obtained from the interview.

NDOC has a policy/procedure, AR 573, that requires the facility to reassess each inmate's risk of 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 inmate's risk of being sexually victimized or being sexually abusive. AR 573 prohibits the facility from disciplining inmates for refusing to answer, or for not disclosing complete information in response to questions asked during the assessments.

The case worker explained his system to assure he gets his 30 day review done which shows to be sufficient when checking inmate files.

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 comments, including corrective actions needed if does not meet standard

NDOC has a policy/procedure, AR 573, which states that staff shall use the information from the risk assessment to make informed housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. CCC utilizes NOTIS alerts and all inmates are reviewed every six months at their classification reviews. AR 573 states that "a possible victim and a possible aggressor should not be housed together unless necessary." AR 573 does contain a generalized statement that staff shall make individualized determinations about how to ensure the safety of each inmate.

NDOC/CCC does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status.

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 comments, including corrective actions needed if does not meet standard

NDOC has a policy/procedure, AR 573, that prohibits 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 of separation from likely abusers.

According to NDOC policy/procedure AR 573, inmates placed in segregated housing for protective custody shall have access to programs, privileges, education, and work opportunities to the extent possible; however CCC does

not have segregated housing, should the inmate request voluntary segregation they would be transported to LCC who can accommodate the request.

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 comments, including corrective actions needed if does not meet standard

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

Regarding a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties, AR 421 states that all facility allegations of sexual abuse and sexual harassment, including third-party and anonymous reports of allegations must be reported to the proper staff or designated employee. More generally, NDC policy/procedure AR 421 and the PREA Manual states that all staff shall accept reports made verbally, in writing, anonymously, and from third parties.

AR 421 and the PREA Manual require "any staff member who receives a verbal or written report of a sexual assault to immediately report the information through their chain of command." The Auditor verified through staff interviews, that in practice, oral reports are sufficient and it is the staff member's responsibility and duty to document the oral report in a written report and in NOTIS.

NDOC policy/procedure AR 421 and the PREA Manual lack a provision that establishes a procedure for staff to "privately" report sexual abuse and sexual harassment of inmates. Although the policies do provide multiple ways for inmates to report privately, and it could be inferred that staff can also access these methods, perhaps the language should be changed to make that clear to staff. During interviews with staff, they were able to articulate a process by which a staff member could report privately, which incorporated calling the IG's Office, emailing or mailing a letter without their information on it.

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 comments, including corrective actions needed if does not meet standard

NDOC has a policy/procedure, AR 740 Inmate Grievance Procedure, which outlines the 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 immediately to the Appointing Authority

and followed by a confidential report completed in NOTIS. Then, a copy of the grievance will be forwarded to the PREA Management team in the IG's Office for review and investigation.

AR 740 also 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 will not be 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 to 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 421 and the PREA Manual state that third parties shall be permitted to assist and/or file on behalf of an inmate's request for administrative remedies. NDOC policy/procedure AR 740 outlines the agency's procedure for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. The grievance shall be immediately forwarded to the highest ranking staff member on duty so that corrective action may be taken immediately, the inmate shall receive an initial response within 48 hours, and the final decision shall be issued within five calendar days. AR 740 limits the agency's ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith.

115.53	INMATE ACCESS TO OUTSIDE CONFIDENTIAL SUPPORT SERVICES	INMATE REF
	(substantially exceeds requirement of standard)	
Z Meets Standard (su	bstantial compliance; complies in all material ways with the standard for the relevant review	
period)		
Does Not Meet Sta	ndard (requires corrective action)	
Auditor comments, ir	cluding corrective actions needed if does not meet standard	
support services but i	ion PREA poster does provide inmates with the contact information for outside emotional t didn't list a 24 hour toll free hotline; the PREA Coordinator submitted a new MOU between I Center, Inc. Sexual Assault Support and Direct Services Program effective July 13, 2015.	
CCC informs the inm communications will I	t house inmates solely for civil immigration purposes, therefore 115.53(a)-1 is not applicable. ates, prior to giving them access to outside support services, the extent to which be monitored. AR 421 and the PREA Manual outline the confidentiality of the communication the outside advocacy or rape crisis center.	
Recommended that a posted.	Il posters and information given to the inmates be revised with the new information and	

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 comments, including corrective actions needed if does not meet standard

NDOC provides a method to receive third-party reports of inmate sexual abuse or sexual harassment. Policy/procedure AR 421, which is available on NDOC's PREA website, outlines ways that visitors, inmate family members or associates, and other community members can privately report sexual abuse or sexual harassment.

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 comments, including corrective actions needed if does not meet standard

NDOC AR 421 and the PREA Manual state that all Department staff have the affirmative duty to immediately report any retaliation against inmates or staff, who reported any knowledge, suspicion, or information regarding an incident of inmate on inmate or staff/contractor/volunteer on inmate sexual abuse or inmate or staff/contractor/volunteer on staff/contractor/volunteer on inmate sexual abuse or inmate or staff/contractor/volunteer on inmate sexual abuse or inmate sexual abu

NDOC AR 421 and the 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 abuse or inmate on inmate or staff/contractor/volunteer on inmate sexual abuse or inmate on inmate or staff/contractor/volunteer on inmate sexual harassment or retaliation for reporting of an allegation by other staff or inmates. It further states that 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.

NDOC AR 339 Code of Ethics relays that employees shall report without reservation any corrupt or unethical behavior that could affect either inmates, employees, or the integrity of the Department of Corrections.

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 comments, including corrective actions needed if does not meet standard

NDOC policy/procedure 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. During staff interviews, it was evident that CCC staff understood the seriousness of a potential substantial risk situation and the need to immediately (now) respond.

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 comments, including corrective actions needed if does not meet standard

In application, the IG's Office manages PREA allegations received from other NDOC facilities and external correctional agencies and is responsible for notifying the applicable NDOC facility and external correctional agency when a complaint is received at a NDOC facility.

According to NDOC policy/procedure AR 421, all agency allegations of sexual abuse and sexual harassment not generated from a facility must be reported to the Inspector General's Office. The PREA Coordinator confirmed that the IG's Office would manage the report of a PREA incident at facility or entity that was not currently housing the inmates. During the past 12 months.

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 comments, including corrective actions needed if does not meet standard

CCC OP 421.1 Sexual Assault Response articulates the steps and procedures for first responders' duties within 72 hours and after 72 hours, to include duties of first responders that are not a security staff member. Separation of victim and perpetrators, evidence collection, notification system and forms. Because conservation camps are unique in the correctional system they do not have medical staff and extra security staff on hand and must then rely on the assistance of LCC to determine appropriate and further course of action to include transports to local or community hospitals.

If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff, Shift Commander/Supervisor.

Carlin Conservation Camp (CCC) staff will provide transport if minimum staffing is met; otherwise LCC will be contacted for assistance, Secure the incident area and treat it as a crime scene until released by the Warden, Inspector General or designee. Evidence (if any) shall be collected with an appropriate chain of evidence form attached.

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 comments, including corrective actions needed if does not meet standard

CCC utilizes OP 421.1: Sexual Assault Response and Documentation when responding to Incident and Emergencies as the written institutional plan to coordinate actions taken in response to an incident of sexual

abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership, as required by PREA standard 115.65(a)-1.

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 comments, including corrective actions needed if does not meet standard

NDOC and CCC does not deal with Unions or Collective Bargaining Agreements, however there are statutory requirements related to disciplinary action based on the Peace Officer's Bill of Rights. It is perceived that this Standard is not implicated by the mandates of State or Local laws.

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 comments, including corrective actions needed if does not meet standard

NDOC policy/procedure 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. The Facility PREA Compliance Manager and or Camp Lieutenant monitors the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff. Policy/procedure OP 421 Sexual Assault of Inmates requires that monitoring for retaliation be conducted and documented by the assigned staff member for ninety (90) days after an incident or longer if deemed necessary by the Warden.

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 comments, including corrective actions needed if does not meet standard

NDOC policy/procedure AR 573 PREA Screening and Classification prohibits the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing, unless an assessment of all available alternative means of separation from likely abusers has occurred. In the past 12 months, no inmates who alleged to have suffered sexual abuse were held in involuntary segregated housing. According to AR 573, if an

involuntary segregated housing assignment is made, the facility affords each inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.

115.71

CRIMINAL AND 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 comments, including corrective actions needed if does not meet standard

NDOC is obligated to comply with the Peace Officer's Bill of Rights, which has stringent time requirements for criminal and administrative investigations related to staff. The IG Investigators have been trained as required by this Standard. NDOC AR 421 and the PREA Manual state that the IG Criminal Investigators will refer all substantiated criminal violations to the Attorney General's Office for criminal prosecution.

The IG's office retains all written reports pertaining to administrative or criminal investigations of alleged sexual assault or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus an additional five years.

115.72

EVIDENTIARY STANDARDS 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 comments, including corrective actions needed if does not meet standard

According to the IG Investigator and the PREA Coordinator, who is the head of the IG's Office, NDOC imposes a standard of a preponderance of the evidence for determining whether allegations of sexual abuse or sexual harassment are substantiated in an administrative investigation.

115.73

 REPORTING TO INMATES

 $\hfill\square$ 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 comments, including corrective actions needed if does not meet standard

NDOC has a policy, AR 457 Investigations, requiring 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, unsubstantiated, or unfounded following an investigation by the agency. PREA standard 115.73(b)-1 is not applicable as NDOC is responsible for conducting administrative and criminal investigations.

NDOC subsequently informs the inmate, unless the agency has determined that the allegation is unfounded, whenever: the staff member is no longer posted within the inmate's 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 abuse within the facility

The IG subsequently 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 to sexual abuse within the facility.

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 comments, including corrective actions needed if does not meet standard

NDOC policy AR 421 and the PREA Manual state that all terminations for violations of the Department's sexual abuse policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies and/or relevant licensing bodies by the Inspector General's Office with documentation in the NOTIS entry related to the incident.

AR 339 states that staff members will be subject to internal discipline to include termination as defined in NDOC policy AR 339 Code of Ethics Employee Conduct Prohibitions and Penalties. AR 339 indicates that staff penalties for prohibited activities should be assessed based upon criteria established in the Chart of Corrective/Disciplinary Sanctions, which describes an available range of disciplinary action for each class of prohibited activity. According to the policy, sexual misconduct is in Class 5 which would warrant dismissal on the first offense.

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 comments, including corrective actions needed if does not meet standard

NDOC policy/procedure, AR 421, does require that any contractor or volunteer who engages in sexual abuse 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 engages in sexual abuse shall be prohibited from contact with inmates and reported to any relevant licensing body by the Inspector General's Office with applicable NOTIS entries documented. In the past 12 months, no contractors/volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.

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 comments, including corrective actions needed if does not meet standard

AR 421.16 states "facility offer therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse and shall consider whether to require the offending inmate to participate in such interventions."

421 PREA Manual articulates the standard for disciplinary sanction for inmates in the Offenses in Custody (OIC) section numbers 1 to 7.

NDOC prohibits all sexual activity between inmates and consensual sexual activity between inmates is a criminal offense in Nevada. The inmates will be subject to administrative discipline and criminal prosecution.

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 comments, including corrective actions needed if does not meet standard

CCC OP 609.03 Routine Screening of Sexual Abuse and 600.08 PREA states that if the intake screening indicates that an inmate has experienced prior sexual victimization and or has previously perpetrated sexual abuse, whether it occurred in an institutional or jail setting or in the community, staff shall ensure the inmate is offered a follow up with medical and or mental health within 14 days of the intake.

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 and management decisions, including treatment plans, housing, bed, work, education, and program assignment, or as otherwise required by federal, state, or local law.

According to policy/procedure INP 200, medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18, by completing the Consent-Release Medical Information DOC #2548.

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 comments, including corrective actions needed if does not meet standard

According to CCC OP 600.08 numbers 1-4 states inmate victims of sexual abuse while incarcerated shall be offered timely information about, timely and unimpeded access to emergency medical treatment to include timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

Treatment services are provided without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

115.83

3 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 comments, including corrective actions needed if does not meet standard

According to NDOC policy/procedure INP 200, CCC offers medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility at Lovelock Correctional Center. The policy outlines the procedure by stating that all inmates will be assessed during the intake process, inmates will be offered a follow-up within 14 days of intake screening, and treatment will be provided by practitioners when applicable, and referrals to community services if needed.

PREA standard 115.83(d)-1 and PREA standard 115.83(e)-1 (pregnancy related) is not applicable to CCC, because the facility does not house female inmates.

According to NDOC policy/procedure INP 200, CCC offers tests for STIs, as medically appropriate, for inmate victims of sexual abuse while incarcerated. According to NDOC policy/procedure INP 200, CCC attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatments when deemed appropriate by mental health practitioners.

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 comments, including corrective actions needed if does not meet standard

NDOC policy/procedure OP 421 Sexual Assault of Inmates outlines the facility's Sexual Abuse Incident Review process. The SAIR, conducted by a Multi-Disciplinary Team, shall be held at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. According to OP 421, the PREA Compliance Manager will notify the review team

(Associate Warden, Lieutenant, Investigator and Medical/Mental Health staff) upon learning of the completion of any sexual abuse investigation, the review shall ordinarily occur within thirty (30) days of the conclusion of the investigation, and it will be documented using the Committee Review for Sexual Abuse Investigation form located in NOTIS (under the Incident IR Number). The policy states that the review team shall document their findings and the facility shall implement the recommendations for improvement or document its reasons for not doing so.

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 comments, including corrective actions needed if does not meet standard

According to NDOC policy AR 421 and the PREA Manual, 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. 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 conducted by Department of Justice. The incident based sexual abuse data shall be aggregated, at a minimum, annually. According to the policy, the IG and the Department shall maintain, review and collect data as needed from all incident based documents, including reports, investigation files, and sexual abuse reviews, and the data from the previous calendar year shall be available for production upon a request from the Department of Justice.

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 comments, including corrective actions needed if does not meet standard

According to NDOC policy AR 421 and the PREA Manual, the data collected and aggregated shall be reviewed by the Director, or designee, Deputy Director of Operations, and the IG PREA Coordinator in order to assess and improve, if necessary, the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training.

The review will include: identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each institution, facility and the 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 Department's progress in addressing sexual abuse. The Department's report is readily available to the public on the Department's website after it is approved by the Director. The report was located on NDOC's website. If specific material is redacted from the reports, then there must be an indication of the nature of the material redacted.

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 comments, including corrective actions needed if does not meet standard

According to NDOC policy AR 421 and the PREA Manual, all data collected related to incidents that are alleged to be sexual abuse will be securely retained and made readily available to the public through the website, an nually. Before being made publicly available, all personal identifiers will be removed. The sexual abuse data collected will be maintained for a minimum of 10 years after the date of the initial collection.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of this report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of agency under review.

Waw

Cheyenne Evans Certified DOJ PREA Auditor

8/21/15

Date

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