

PREA Facility Audit Report: Final

Name of Facility: Florence McClure Women's Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 05/24/2025

Auditor Certification

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.



I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.



Auditor Full Name as Signed: Elaine Brideschge

Date of Signature: 05/24/2025

AUDITOR INFORMATION

Auditor name: Brideschge, Elaine

Email: risingsunauditing@gmail.com

Start Date of On-Site Audit: 03/27/2025

End Date of On-Site Audit: 03/28/2025

FACILITY INFORMATION

Facility name: Florence McClure Women's Correctional Center

Facility physical address: 4370 Smiley Road, Las Vegas, Nevada - 89115

Facility mailing address: 4370 Smiley Rd, Las Vegas, Nevada - 89115

Primary Contact

Name:	Helen Peterson
Email Address:	hpeterson@doc.nv.gov
Telephone Number:	725-216-6213

Warden/Jail Administrator/Sheriff/Director

Name:	William Reubart
Email Address:	wreubart@doc.nv.gov
Telephone Number:	725-216-6151

Facility PREA Compliance Manager

Name:	Helen Peterson
Email Address:	hpeterson@doc.nv.gov
Telephone Number:	725-216-6213
Name:	Genesa Garcia
Email Address:	gggarcia@doc.nv.gov
Telephone Number:	725-216-6212

Facility Health Service Administrator On-site

Name:	Timothy Calumpong
Email Address:	tcalumpong@doc.nv.gov
Telephone Number:	725-216-6226

Facility Characteristics

Designed facility capacity:	1131
Current population of facility:	744
Average daily population for the past 12 months:	714

Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Women/girls
In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of "intersex" and "transgender," please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	16-78
Facility security levels/inmate custody levels:	Minimum, Medium, Close
Does the facility hold youthful inmates?	Yes
Number of staff currently employed at the facility who may have contact with inmates:	223
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	46
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	277

AGENCY INFORMATION	
Name of agency:	Nevada Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	5500 Snyder Avenue, Building 17, Carson City, Nevada - 89701
Mailing Address:	P.O. Box 7011, Carson City, Nevada - 89702

Telephone number:	725-216-6012
--------------------------	--------------

Agency Chief Executive Officer Information:	
Name:	James Dzurenda
Email Address:	jdzurenda@doc.nv.gov
Telephone Number:	725-216-6010

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

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

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-03-27
2. End date of the onsite portion of the audit:	2025-03-28

Outreach

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

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1131
15. Average daily population for the past 12 months:	714
16. Number of inmate/resident/detainee housing units:	10
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	709
19. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	2
20. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	3
21. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	8
22. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
23. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	1
24. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	5

25. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	66
26. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	5
27. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	17
28. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	325
29. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
30. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	N/A
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
31. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	223

32. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	277
33. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	46
34. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	N/A
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
35. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	15
36. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None

37. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Facility provided a detailed offender roster
38. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="checked" type="radio"/> Yes <input type="radio"/> No
39. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	N/A
Targeted Inmate/Resident/Detainee Interviews	
40. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	16
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
41. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:	1
42. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1

43. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
44. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
44. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
44. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	At the time of the audit, there were no offenders in this targeted category. This was verified through conversation with offenders, Staff and observations made during the site review.
45. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	1
46. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1

47. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
48. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	4
49. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	3
50. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	2
51. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
51. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

51. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	At the time of the audit, there were no offenders in this targeted category. This was verified through conversation with offenders, Staff and observations made during the site review that the facility does not have segregated housing.
52. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	N/A
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
53. Enter the total number of RANDOM STAFF who were interviewed:	12
54. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<div> <input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None </div>
If "Other," describe:	Gender
55. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<div> <input checked="" type="radio"/> Yes <input type="radio"/> No </div>
56. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	N/A

Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

57. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):

17

58. Were you able to interview the Agency Head?

☒ Yes

☐ No

59. Were you able to interview the Warden/Facility Director/Superintendent or their designee?

☒ Yes

☐ No

60. Were you able to interview the PREA Coordinator?

☒ Yes

☐ No

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

☒ Yes

☐ No

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

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

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

	<input type="checkbox"/> Other
63. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
63. Enter the total number of VOLUNTEERS who were interviewed:	3
63. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input type="checkbox"/> Religious <input type="checkbox"/> Other
64. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
64. Enter the total number of CONTRACTORS who were interviewed:	2
64. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
65. Provide any additional comments regarding selecting or interviewing specialized staff.	N/A

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

66. Did you have access to all areas of the facility?

☒ Yes

☐ No

Was the site review an active, inquiring process that included the following:

67. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

☒ Yes

☐ No

68. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

☒ Yes

☐ No

69. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

☒ Yes

☐ No

70. Informal conversations with staff during the site review (encouraged, not required)?

☒ Yes

☐ No

71. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	N/A
---	-----

Documentation Sampling

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

72. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
---	--

73. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	N/A
--	-----

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	5	2	3	0
Staff-on-inmate sexual abuse	13	2	11	0
Total	18	4	14	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	8	2	6	0
Staff-on-inmate sexual harassment	7	1	7	0
Total	15	3	15	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	2	0	0	0	0
Staff-on-inmate sexual abuse	9	0	0	0	0
Total	11	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	2	1	2	0
Staff-on-inmate sexual abuse	9	2	2	0
Total	11	3	4	0

Sexual Harassment Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	8	0	0	0	0
Staff-on-inmate sexual harassment	7	0	0	0	0
Total	15	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	8	1	2	0
Staff-on-inmate sexual harassment	6	0	1	0
Total	14	1	3	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

80. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

18

81. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
82. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	5
83. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
84. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
85. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	13
86. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

87. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
88. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	15
89. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
90. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	8
91. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
92. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

93. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

7

94. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

95. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

96. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

N/A

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

97. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

98. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

99. Who paid you to conduct this audit?

☒ The audited facility or its parent agency

☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

☐ A third-party auditing entity (e.g., accreditation body, consulting firm)

☐ Other

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.11 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The department PREA Policy 2. Organizational charts 3. Memo from the Director 4. PREA posters in English and Spanish 5. Interviews with the PREA Coordinator (PC) and the PREA Compliance Manager (PCM) <p>Findings:</p> <p>115.11 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator.</p> <p>A) The facilities policy on Zero tolerance of sexual abuse and sexual harassment the policy mandates a zero tolerance towards all forms of sexual abuse and sexual harassment and outlines the facility's approach to preventing, detecting, and responding to such conduct. The policy defines what constitutes sexual abuse and</p>

	<p>harassment.</p> <p>B) As evidenced by the facility organizational chart the facility has a PREA compliance manager that reports to the Warden with sufficient time and authority to develop, implement, and oversee the facility's efforts to comply with the PREA standards.</p> <p>C) As evidenced by the organizational chart and a memo from the Director the Nevada Department of Correction (NDOC) has an upper level PREA Coordinator. This position is assigned to the Office of the Inspector General, PREA Management Division, and supervised by the Inspector. The PREA Coordinator has direct access to the Director and the Department's executive leadership team. The PREA Coordinator has the authority necessary to create and implement Department-wide policies, procedures, and practices. This position oversees all of the facilities coordination efforts and has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.</p> <p>An excerpt from the PREA posters states:</p> <p>If you experience, witness, or suspect sexual abuse or sexual harassment. You may report using ANY of the following methods. Anonymous reports are welcome, but often difficult to respond to. Please provide as much detail as safely possible. Tell ANY staff person, write to any staff person, Dial the PREA message hotline *3152 (a pin is not needed): The PREA hotline is a free call and messages are recorded. Calls go directly to the Office of the Inspector General, PREA Management Division. The PREA hotline is a message line and not monitored 24hrs a day. If an emergency, report immediately to staff, file a grievance. Tell a third party, family member, friend, or support person.</p> <p>They may report on your behalf. Offenders may also report to an outside entity that is not part of NDOC.</p> <p>According to interviews, the PCM and PC have enough time to manage all PREA related responsibilities. The agency has one PCM at each facility for a total of 14.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence analyzed:

	<p>1. Pre-audit questionnaire (PAQ)</p> <p>2. Interview with the contract administrator</p> <p>Findings:</p> <p>115.12 Contracting with other entities for the confinement of inmates.</p> <p>According to the information submitted through the PAQ the agency does not contract with other agencies for the confinement of offenders.</p> <p>(a) A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards.</p> <p>(b) Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.13 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. Sample logs documenting supervisor rounds starting 11/2023-11/2024 2. Staffing plan 3. Staffing plan reviews for 2022 and 2023 4. Staffing plan deviations 5. Site review observation <p>Interviews with staff that conduct unannounced rounds, PREA Compliance Manager (PCM), PREA Coordinator (PC), and the Warden.</p> <p>Findings:</p> <p>115.13 Supervision and monitoring.</p> <p>A) All facility Wardens or designees develop, document, and make their best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, video monitoring, to protect offenders against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring,</p>

facilities shall take into consideration: Generally accepted detention and correctional practices. Any judicial or Federal investigative agency findings of inadequacy. Any findings of inadequacy from internal or external oversight bodies. All components of the facility and applicable facility's physical plants, including identifying blind spots or areas where staff and/or offenders may be isolated. The composition of the offender population. The number and placement of supervisory staff on each shift. Facility programs and work assignments occurring on each shift. Any applicable State or local laws, regulations, or standards. The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and any other relevant factors.

B) According to the requirements in the policy in circumstances where the staffing plan is not complied with, the facility documents and justify all deviations from the plan. The auditor reviewed the staffing policy; the staffing plan reviews for 2023 and 2024. The facility states that the top three reasons for deviating from the staffing plan were sick leave, FMLA and hospital runs. I reviewed the 7 reports that the staffing plan was deviated.

C) The department ensures that each facility develops and documents a staffing and plan yearly that provides for adequate levels of staffing to protect residents against sexual abuse. Any deviations from the plan must be documented in staffing logs. The PREA coordinator and PREA compliance managers review staffing annually.

D) The general security guidelines state: A high priority will be placed in all Department institutions/facilities to ensure the visibility of top staff in the facility, where they are available to offenders, line staff, and mid-level managers for communication. Such actions will include but are not limited to: The Warden or Associate Wardens will visit all housing areas every 48 hours during the standard work week. The Warden or Associate Wardens will visit all activity areas every 72 hours during the standard work week. The Warden or Associate Wardens shall conduct a formal inspection of Prison Industries during each working day. Supervisory staff will tour the entire facility at least once each shift every day, including weekends and holidays. Staffing numbers and placement matched the staffing plan. Cell checks are conducted every 30 minutes. Staff have a good line of sight with no blind spots observed. Offender movement is monitored by staff.

Informal conversations with staff confirmed the staffing plan is followed. Informal conversations with offenders confirmed accessibility to staff. Cameras/ mirrors were observed with adequate placement and in operational order. Cameras were observed from a control area. Areas that are restricted from offenders are under video surveillance. Offender movement throughout the facility is monitored via cameras and offenders are escorted by staff.

When offenders are in their cells, they are monitored through staff supervision (no cameras in cells). No cross-gender viewing was observed. Staff complete cell checks regularly. Offenders are provided with multi-occupancy cells.

Informal conversations with staff regarding staffing norms, understaffing, shortages,

	<p>overcrowding and staffing ratios were unremarkable. Staff stated that unannounced rounds occur on each shift daily and that to meet staffing ratios, mandated overtime is enforced.</p> <p>Informal conversations with offenders regarding safety, accessibility or limits to programming, education, work, and overcrowding in housing units were unremarkable. Offenders spoke to felt safe and seemed to have a good rapport with staff.</p> <p>According to interviews, unannounced rounds are conducted randomly and at staggered times on every shift daily by shift supervisors. Completed rounds are documented in a logbook. The PCM was able to explain what the staffing plan considers. The PC is consulted regarding any adjustments or assessments made to the staffing plan. The facility develops a staffing plan, and the Warden was able to explain what the staffing plan considers. Rounds are conducted to check for compliance. Deviations are documented.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.14 Youthful inmates	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence analyzed:</p> <ol style="list-style-type: none"> 1. Pre-audit questionnaire (PAQ) 2. Site review observations 3. Interviews with line staff who supervise youthful offenders, education and program staff who work with youthful offenders, and with one youthful offender <p>115.14 Youthful inmates.</p> <p>A) The department policy for youth states: A person under the physical age of 18, shall not be placed in a housing unit where a YO will have sight, sound or physical contact with any offender over the age of 18, including use of a shared dayroom or other common space, shower area, or sleeping quarters.</p> <p>B) The policy and practice will include any areas outside of housing units that: Staff will maintain sight and sound separation between YO and adult offenders; or provide direct staff supervision when YO and adult offenders have sight, sound, or physical contact.</p> <p>During any type of transportation of the YO, the YO will be under the direct supervision of staff while around any offender over the age of 18.</p>

	<p>While housed at any institution or facility other than the designated and identified facility that currently maintains the male YO population, the YO will be housed in a manner that facilitates the requirements of this standard.</p> <p>The YO(s) will be moved to the dedicated facility and housing unit for the male YO population as soon as possible, depending upon the needs of the current housing facility and the Department. Any YO currently housed in the dedicated housing unit that turns 18, will be immediately removed from the dedicated unit and provided a classification review that will determine the best placement for that offender. Any movement of a YO from their current location will result in official notifications that will include the Department PREA Coordinator, facility staff, and OMD. Any notification of a pending female YO will be immediately reported to the OMD Chief, Deputy Director of Operations and Programs, FMWCC Warden, facility executive team, and Department PREA Coordinator for housing arrangements.</p> <p>C) Facilities will avoid placing YO in isolation where the YO would be denied daily large-muscle exercise and/or any legally required special education services to comply with this standard. Only exigent circumstances that are approved by the Warden and documented by the facility PCM shall be allowed; and Facilities will also, to the extent possible, provide other programs and work opportunities for YO(s).</p> <p>The auditor reviewed the policy on youth offenders, the facility stated in the PAQ that they had 2 YOs in 2024 and those residents are housed in their own unit that has its own showers, dayroom and outside yard.</p> <p>The auditor observed where the youth are housed in the facility. The facility maintains sight and sound separation from any confined adults in the housing units. The daily population report was reviewed that indicated the facility only had one youthful offender being held in a separate unit away from others. The youthful offender is under direct staff supervision.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.15 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. Search policy 2. PREA Coordinator Memorandum 3. Training videos 4. One-page instruction on Standard clothed body search. 5. Video on cross gender searches. 6. Site review observations 7. Interviews with 12 random staff, four transgender offenders and two offenders who

identified

as gay, lesbian or bisexual.

8. Officer training curriculum

Findings:

115.15 Limits to cross-gender viewing and searches.

A) As evidenced by AR 421 staff do not conduct cross-gender strip, Patt or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. All exigent cross-gender strip or cross-gender visual body cavity searches will be immediately reported to the Warden/designee and PCM in every instance. All exigent cross-gender strip or cross-gender visual body cavity searches will be documented in NOTIS for every instance. According to the information submitted thru the PAQ there have been no cross-gender searches.

B) does not apply the facility does not hold female inmates,

C) According to the information in the PAQ the facility did not conduct any cross-gender searches.

D) The facility implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit. Auditor reviewed unannounced security checks.

E) Policy 422.04 Search of inmate's state that the facility does not search or physically examine a transgender or intersex inmate for the is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

F) The facility trained security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. The auditor reviewed signed acknowledgments from staff who attended the training on cross gender pat down searches and a list of all custody staff that received the training on cross gender searches.

Offenders are required to undress in their sleeping rooms or showers. Shower rooms contain shower curtains for privacy. Same gender staff conduct the searches.

Medical exam rooms were observed. Exam rooms do not have cameras or mirrors and have privacy curtains to use when needed. Security staff are posted outside of the exam rooms.

The auditor observed verbal announcements being made by staff when entering

	<p>housing units and shower areas. The announcement was loud and clear where offenders on all levels could hear, and the announcement provided ample time for offenders to cover up. Offenders that are deaf, hard of hearing, have a cognitive or physical disability, or limited English proficient would be properly alerted to staff of the opposite gender entering the housing unit. Administrative staff would seek assistance through the contracted interpreter's office.</p> <p>Informal conversations with staff regarding procedures to prevent cross-gender viewing via electronic monitoring, staff assigned to monitor, live or recorded video, and frequency of monitoring was unremarkable. Staff verified that cross-gender announcements are made when entering the units and that unannounced rounds are conducted by higher level staff. Staff stated that they are prohibited from cross-gender viewing and searches. Informal conversations with offenders were held. Offenders stated that they are able to change clothes, use the toilet, and shower without staff of the opposite gender being able to view them. Offenders confirmed that staff announce themselves when entering the unit. Offenders also confirmed that cross-gender viewing and searching are not allowed. According to interviews, the facility does not conduct cross gender pat-down, strip or visual body cavity searches. Searching a transgender or intersex offender for the sole purpose of determining that offender's genital status is prohibited by policy. Staff understand that they are to announce themselves when entering units that house the opposite gender from themselves. Staff understand that offenders are able to dress, shower, and use the toilet without being viewed by staff of the opposite gender. The facility does not have a unit designated solely to house LGBTI offenders.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.16 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The Policy and Correction Administrative Regulation 658 " Reasonable accommodation for offenders with Disabilities" 2. Contract for American Sign Language 3. Contract for interpretation service with CTS language Link (provides services for 240 languages)

4. Contract with CAS (Communication Access Services) that provides services for the deaf and the hard of hearing.
5. A large font PREA orientation handout
6. PREA education video
7. Site review observations
8. Interviews with the Director; random staff; one limited English proficient offender; one offender with a physical disability, one offender with a hearing impairment, and one offender with a cognitive learning disability

Findings:

115.16 Inmates with disabilities and inmates who are limited English proficient.

A) The facility has developed a procedure that utilizes the necessary resources that are available to assist offenders who have disabilities to ensure those offenders have equal access to participate in or benefit from every aspect of the prevention, detection, and response to sexual abuse or sexual harassment.

B) The department maintains contracts with Language Link for interpretation services for languages other than English and with an American Sign Language interpreter. The PREA Video is available in English, Spanish, and Closed-Captioned the facility does not rely solely on printed materials to communicate with residents; intake, education, acceptance of complaints and reports of abuse or harassment, and investigations all involve face-to-face staff/resident contact so that an assessment can be made of the resident's understanding of the communication.

C) The staff will not use and/or rely upon offender interpreters, offender readers, or other types of offender assistants. The facility stated they have not used offender interpreters.

The facility has a Contract for American Sign Language, contract for interpretation service with CTS language Link (provides services for 240 languages), contract with CAS (Communication Access Services) that provides services for the deaf and hard of hearing They submitted a large font PREA orientation handout. All the PREA education is in English and Spanish. The PREA education is presented in a video that is in English and Spanish that has close captioning and sign language.

According to interviews, the agency does not allow offenders to interpret PREA-related

information to other offenders. Policies and contracts are in place to assist with interpretation. The facility contracts with an interpreter agency. The facility provides information regarding sexual abuse and sexual harassment that offenders are able to understand. The facility staff are able to help offenders read, write, speak or explain things. Language line information was readily available to staff and offenders. The auditor made a test call to the language line. A live person answered and then transfers you to the appropriate language. The call is free and does not require a PIN number to be entered. Services are available on demand. Informal conversations with staff and offenders confirm their understanding of the services available and how to

	<p>access them if needed.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.17 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The hiring and promotion policy 2. Completed background investigations for new hires, promotions and staff who have been at the facility over 5 years 3. New hire questionnaire that asks all applicants and employees who may have contact with offenders directly about previous sexual misconduct. 4. Consent to release criminal history that all new hires, contractor and volunteer have to sign. 5. Interview with HR staff 6. A set of background forms used 7. Acknowledgement Form and cooperation agreement for contractors or vendors that require PREA training and background checks 8. A list of new staff and staff who have been employed for 5 years who needed background checks <p>115.17 Hiring and promotion decisions.</p> <p>Findings:</p> <p>A) The Department does not hire or promote anyone who may have contact with offenders and does not enlist the services of any contractor or volunteer who may have contact with an offender who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other facilities. 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.</p> <p>The policy outlines the process of hiring and promoting staff. Before hiring new employees, who may have contact with offenders Human Resources (HR) shall: Perform a National Criminal Information Center (NCIC) and FBI fingerprint criminal background records check; and Consistent with Federal, State, and local law, make its best effort to contact all prior facility employers for information on substantiated allegations of sexual base or any resignation during a pending investigation of an allegation of sexual abuse a criminal background records check shall be performed.</p> <p>B) The Department shall consider any incidents of sexual harassment in determining</p>

	<p>whether to hire or promote anyone or enlist the services of any contractor, who may have contact with offenders. The Department shall also perform a criminal background record check before enlisting the services of any contractor employee who may have contact with offenders. The Department will conduct criminal background records checks at least every five years of current employees and contractors who may have contact with offenders.</p> <p>C) All persons selected to volunteer or contract within the department must pass the mandated Prison Rape Elimination Act, (PREA), related background check, as defined under PREA Standard 115.17 and conducted by staff of the Office of the Inspector General.</p> <p>D) Any outside contractor, vendor, employee or volunteer associated or working in conjunction with a community group who have direct contact or control of inmates are responsible to be notified of and acknowledge the NDOC PREA zero tolerance policy and may require a background check and training as appropriate.</p> <p>E) The agency conducts criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees.</p> <p>F) The Department shall ask all applicants and employees who may have contact with offenders directly about previous misconduct in written applications or interviews for hiring and promotions. All staff have an affirmative and immediate duty to disclose any sexual abuse conduct.</p> <p>G) Any material omissions or false or misleading information shall be grounds for termination. The questionnaire asks applicants to disclose any sexual abuse conduct. The form instructs staff that any omissions will be grounds for termination.</p> <p>According to interviews, the facility performs criminal background record checks on all newly hired employees, employees considered for promotion and contractors. The facility considers prior incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor. Background record checks are performed annually, exceeding this standard. All applicants and employees are asked about previous misconduct for hiring and promotions using a PREA questionnaire sheet. The facility imposes upon employees a duty to disclose any such previous misconduct. When a former employee applies for work at another institution, the facility will provide information on substantiated allegations of sexual abuse or sexual harassment involving that former employee.</p> <p>The facility meets compliance with this standard.</p>
--	--

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence analyzed:</p> <ol style="list-style-type: none"> 1. Pre-audit questionnaire (PAQ) 2. Interviews with the Director and the Warden 3. Statement regarding upgrades <p>Findings:</p> <p>115.18 Upgrades to facilities and technologies.</p> <p>A) When the Department is designing or acquiring any new institutions or facilities or planning any substantial expansion or modification to existing facilities the Director, Deputy Director(s), and designees shall consider the effect of the design, acquisition, expansion, or modification on the agency's ability to protect offenders from sexual abuse.</p> <p>B) When installing or updating any video monitoring system, electronic surveillance system, or other types of monitoring technology, the Department shall consider the technology and how it may enhance the Department's ability to protect offenders from sexual abuse.</p> <p>The auditor reviewed a statement that they have not made any upgrades to the buildings or video equipment in the last 3 years. According to interviews, PREA would be considered in any facility expansion, modification or camera upgrade.</p> <p>The facility meets compliance with this standard.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>.115.21 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The PREA standard and department PREA policy 2. National Protocol for Sexual Assault Medical forensic exams 3. Recommendations for administrators from the US Department of Justice on forensic exams and the medical Directive. 4. The contract for victim services 5. Memos from the PREA Coordinator 6. Contract for victim advocacy with Signs of Hope 7. Flyer that describes how to contact Signs of Hope 8. Community advocate questionnaire with Signs of Hope 9. Interviews with random staff, PREA Compliance Manager (PCM), and three

offenders who reported sexual abuse

Findings:

Auditor Comments:

A) The Office of the Inspector General (OIG), Criminal Investigators is responsible for investigating all allegations of sexual abuse. Criminal investigators and facility supervisors shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution.

B) Investigators assigned to investigate allegations of sexual abuse or sexual assault shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

The auditor reviewed the training curricular submitted is adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011. All investigators completed the National Institute of Correction policy on conducting investigations,

C) Allegations of sexual abuse reported within 96 hours shall offer the victim access to a forensic medical examination, performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. Sexual abuse forensic exams will be conducted at a hospital or medical facility outside of the facility, without financial cost, where evidentiarily or medically appropriate. If a SAFE or SANE cannot be made available, the examination can be performed by other qualified medical practitioners outside of the facility.

As stated by the memo from the PREA Coordinator the facility uses a hospital that does have trained Safe/ Sane nurses.

D) The Department makes attempts to make available to the victim a victim advocate from a rape crisis center and will document efforts to secure services from a rape crisis center. Any services offered to offender victims from an outside agency shall not be connected to a law enforcement agency and at a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.

E) As requested by the victim, the victim advocate will accompany the offender victim through the forensic medical examination process and investigatory interviews and will provide emotional support, crisis intervention, information, and referrals.

	<p>F and G is not applicable as the IGS office conducts all investigations on an allegation of sexual misconduct.</p> <p>The auditor reviewed the PREA policies and a memo from the PREA Coordinator stating "The State of Nevada only has two geographical locations where incarcerated offenders who report an allegation of sexual abuse requiring a sexual assault forensic exam are transported to. Depending on the geographical location of the facility the offender would be transported to a hospital in Las Vegas or Renown Hospital in Reno. Exams are performed by a Sexual Assault Nurse Examiner (SANE) or Sexual Assault Forensic Examiner (SAFE)." I reviewed a memo from PREA Coordinator "Medical staff will contact the signs of hope in Las Vegas, NV and request services from the contracted volunteer. The volunteer from the Signs of Hope will be approved to meet with the victim at the hospital and/or institution." The facility submitted a contract for victim advocacy with Signs of Hope and a flyer that describes how to contact Signs of Hope. There were 7 requests from offenders requesting victim advocacy services.</p> <p>According to interviews, SAFE SANE examinations are not provided by facility medical staff. Staff understand the agency's protocol for obtaining usable physical evidence if an offender alleges sexual abuse. The facility allows the victim to contact a victim advocacy agency. Staff are aware of who conducts sexual abuse investigations. The facility has a MOU with a victim advocacy agency.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.22 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The policy on PREA investigations 2. Investigation tracking sheets for offender on offender and staff on offender allegations of sexual harassment or sexual abuse 3. Information stating that there were 33 allegations in 2024 of sexual harassment or abuse with 15 of those investigated criminally. 4. Link on the department's website describing the investigation protocol reviewed 5. Policies to ensure referrals of allegations for investigations 6. Interviews with the Director and investigators <p>Findings:</p> <p>115.22 Policies to ensure referrals of allegations for investigations.</p> <p>A) The department supports the zero-tolerance standard for sexual abuse and sexual harassment by aggressively responding to, investigating, and supporting the prosecution of incidents of sexual abuse and sexual harassment in all department</p>

	<p>facilities. The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.</p> <p>B) The department policy submitted requires the IG's (Inspector General) Office will review, assign and investigate as promptly, thoroughly and objectively as possible, all reports of offender sexual harassment and sexual abuse, including third-party and anonymous reporting. All investigations will include collection, preservation, and documentation of any direct and/or circumstantial evidence.</p> <p>C, D and E are not applicable the IGS office investigates all sexual misconduct.</p> <p>The agency has published such policy on its website. The auditor checked the website to ensure compliance. There is a link on the department's website describing the investigation protocol.</p> <p>The Department policy requires that criminal investigators and facility supervisors shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution.</p> <p>According to interviews, the Inspector General conducts criminal investigations. The agency ensures that investigations are completed for all allegations of sexual abuse and sexual harassment.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.31	Employee training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.31 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. PREA policy on training 2. Staff PREA training curricula 3. Signed training acknowledgements 4. Pre-audit questionnaire (PAQ) 5. Interviews with random staff <p>Findings:</p> <p>115.31 Employee training.</p> <p>A) To be most effective in providing a safe environment, all staff members must recognize the signs of sexual abuse and sexual harassment and understand their responsibility in the detection, prevention, response and reporting of alleged sexual abuse or sexual harassment of residents. The Employee Development Division (EDD), with input from the PREA Coordinator, will develop, revise, and provide a block of</p>

	<p>instruction to all staff on the requirements and responsibilities related to PREA. The facility training coordinator ensures training is properly delivered and documented. Staff, volunteers, and contractors must verify by signature, or electronic confirmation, that they have received and understand the PREA training. The facility trains all employees, contractors and volunteers who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</p> <p>B) The PREA training is tailored to both male and female inmates.</p> <p>C) At a minimum of every two years, all staff will receive a refresher PREA training during even years as part of in-service training (IST). In odd years, all staff will receive information on the Department's current sexual abuse and sexual harassment policies.</p> <p>a. In-service refresher training will be provided during in-class instruction or web-based computer training.</p> <p>b. EDD will maintain a negative tracking report and provide a copy to facility Wardens to ensure staff has completed PREA training.</p> <p>c. EDD will maintain signed training acknowledgment forms, training certificates, and/or electronic training verification for all employees.</p> <p>D) The signature or electronic verification is an affirmative acknowledgment that each staff member understands the training received.</p> <p>According to interviews, staff receive full PREA training at hire and every other year and refresher training in between.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.32 Evidence analyzed:

	<ol style="list-style-type: none"> 1. The volunteer and contractors PREA training requirements 2. The contracts policy 3. Community volunteer program policy 4. The training curricular and sample training records for volunteers and contractors 5. The approved Volunteer list 6. Volunteer signed training acknowledgements for PREA training 7. Interviews with contractors and volunteers <p>Findings:</p> <p>115.32 Volunteer and contractor training.</p> <p>A) All volunteers and contractors are notified of the zero-tolerance standard for sexual abuse and sexual harassment and informed on how to respond if they observe or receive a report of sexual abuse or sexual harassment.</p> <p>B) The department trains volunteers and contractors on their PREA responsibilities based on the services they provide and level of contact they have with residents.</p> <p>C) The Department maintains all documentation confirming the training of the volunteers and contractors, which confirms their acknowledgment of understanding the training they have received. All volunteers and contractors for the Department who have any amount of unsupervised contact with any offender will participate in the same and the full amount of the mandatory employee block of PREA instruction. In those cases, involving a contractor who may have slight or no contact with an offender, supervision of the contractor will be maintained the full time the contractor is present in any facility, will be notified of the Department's zero-tolerance policy and how to report incidents of sexual abuse or sexual harassment.</p> <p>According to interviews, contractors have been trained in their responsibilities regarding sexual abuse and sexual harassment prevention, detection and response, to include the agency's zero tolerance policy and how to report incidents. Training is received prior to them working with offenders.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.33 Inmate education	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.33 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The offender orientation manual 2. Offender PREA education facilitator guide 3. Large font orientation handout in English and Spanish 4. The Intake PREA training video in English, Spanish, close caption that includes sign

language

5. "Don't touch me" video

6. Comprehensive PREA training video English, Spanish, close caption, includes sign language

7. Large font orientation handout

8. Photos of the posters that state the zero-tolerance policy and hot line number

9. The offender PREA training curriculum

10. Samples of training acknowledgement forms of attendance

11. Site review observations

12. Interviews with intake staff and random offenders

Findings:

115.33 Inmate education.

A) During the intake process, inmates receive information explaining the agency's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

B) Within 21 days of intake, the agency provides comprehensive education to inmates either in person or through 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 agency policies and procedures for responding to such incidents.

C) The agency shall maintain documentation of inmate participation to ensure all inmates have attended the training required in these education sessions. In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.

D) The facility provides offender education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills.

E) As evidenced by the signed PREA training attendance records the facility maintains

documentation of offender participation in these education sessions. Confirmation of all offenders participating in PREA offender education are documented within the Nevada

Offender Information Tracking System (NOTIS) case note each time the initial intake information or comprehensive education is provided to each offender. Each facility PCM or designee will ensure PREA posters are in areas where staff and offenders are present and make readily available offender handbooks for all offenders.

F) Facilities ensure that essential information on sexual abuse prevention and reporting is continually accessible through visible signage, handbooks, and other written materials. PREA Audit Notices are posted abundantly and visible to staff, offenders, and visitors. Notices are posted in each unit, culinary, lobby, administration

area, intake, and other areas throughout the facility. Emotional support services information is posted in each unit, lobby, administration area, and other areas throughout the facility. Phones were accessible nearby. Reporting sexual abuse/sexual harassment information is posted in each unit, lobby, administration area, and other areas throughout the facility. Phones are available for offender use.

Civil immigration is not applicable to this facility.

Third party reporting information is posted in each unit, public lobby, and other areas frequented by offenders, staff, visitors and contractors. It is also located on the agency website. Other PREA signage, such as zero tolerance information are available in each unit. This information is readily available throughout the facility. PREA flyer is located in units. Electronic reporting methods are not available to offenders. Staff and third-party electronic reporting are available on the agency's website.

Informal conversations with staff and offenders were held during the facility tour. All stated that PREA information is readable and accessible; contains consistent and accurate information; and always posted. The Audit Notice has been posted for several weeks and offenders pointed out that the Notice contains the date it was posted.

The auditor observed a mock demonstration of the intake process where PREA information/zero tolerance is provided to all offenders upon entry to the facility. Designated intake staff are responsible for this process. Offenders receive a PREA handout and zero tolerance information containing PREA information. The handout is reviewed verbally with each offender. Written information is clear and at an appropriate reading level.

Offenders sign an acknowledgement of understanding form after the review. Materials are available in English and Spanish. Language line information was readily available to staff and offenders. The auditor made a test call to the language line. A live person answered and then transfers you to the appropriate language. The call is free and does not require a PIN number to be entered. Services are available on demand.

Staff demonstrated to the auditor how comprehensive education is provided to all offenders during the intake process upon arrival via a PREA video. Additionally, posters are provided throughout the facility containing PREA education and information. After the video, offenders are able to ask questions from intake staff. Offenders sign an acknowledgement of understanding. The video contains their rights to be free of sexual abuse and sexual harassment and to be free of retaliation for reporting such incidents. Video is available in multiple languages and is closed captioning. It can be viewed, listened to and read. Informal conversations with staff confirmed their understanding of the information provided. Language line information was readily available to staff and offenders. The auditor made a test call to the language line. A live person answered and then transfers you to the appropriate language. The call is free and does not require a PIN number to be entered. Services are available on demand.

	<p>Informal conversations with intake staff verified their understanding of the PREA information provided during the intake process. Informal conversations with staff and offenders confirm their understanding of the services available and how to access them if needed. According to interviews, intake staff provide offenders with information about the agency's zero- tolerance policy and how to report incidents or suspicions of sexual abuse and sexual harassment during the PREA orientation. Offenders are provided with a PREA video, PREA packet and in-person review by intake staff. PREA signage is located throughout the facility. Offenders are provided with information about PREA at time of intake.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.34 Specialized training: Investigations	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.34 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The NIC Training curricula for initial and advanced investigators training 2. The Investigator PREA training tracker log 3. All investigator training certifications 4. Memo from the PREA Coordinator 5. Interviews with investigators <p>Findings:</p> <p>115.34 Specialized training: Investigations.</p> <p>A) The Department PREA policy submitted on training for investigators state: In addition to required staff PREA training, all Office of the Inspector General Criminal Investigators, and facility custody supervisors will complete specialized investigator training in conducting sexual abuse investigations in a confinement setting.</p> <p>B) Training shall include but not be limited to: Techniques for interviewing sexual abuse victims; Proper use of Miranda and Garrity warnings; Sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.</p> <p>OIG Investigators will complete this training within one month of the date of hire. Facility supervisors, Sergeant or above will complete within one month of hire/ promotion date. Facility supervisors will complete a refresher course every three years and the facility PREA compliance manager will maintain the signed training acknowledgment forms, training certificates, and/or electronic training verification. I received a memo from the PREA Coordinator stating: In compliance the standard, the Office of the Inspector General Criminal Investigators and designated facility</p>

	<p>supervisory staff take the National Institute of Corrections on-line Specialize Investigator training at https://nic.learm.com/learmcenter. The main purpose of this course is to assist agencies in meeting the requirements of Prison Rape Elimination Act (PREA) Section 115.34 Specialized Training for Investigators. At the end of this course, investigators and designated facility staff will be able to explain the knowledge, components, and considerations that an investigator must use to perform a successful sexual abuse or sexual harassment investigation consistent with PREA standards. Investigators and designated facility supervisors also completed an advanced specialized training: This course provided case studies that allow investigators to apply and practice their investigative skills to conduct appropriate investigations in accordance with PREA standards. At the end of the course, learners will be able to articulate some of the unique aspects of investigating sexual abuse of offenders in confinement settings.</p> <p>C) As evidenced by the training curricular and training certificates the facility documents all the training.</p> <p>D) Not applicable - The agency conducts all sexual misconduct allegations.</p> <p>According to interviews, investigative staff received training specific to conducting sexual abuse and sexual harassment investigations.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.35 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The PREA training for medical and mental health staff 2. Training outline for the training through the National Institute of Corrections 3. All Medical and mental health staff training completion certificates 4. An excerpt from a memo from the PREA Coordinator 5. The department PREA policy to ensure that it meets the requirements of the PREA standards 6. Interviews with medical and mental health staff <p>Findings:</p> <p>115.35 Specialized training: Medical and mental health care.</p> <p>A) The agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to</p>

	<p>detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>B) Medical at the facility do not conduct forensic exams.</p> <p>C) The agency maintains documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere. (d) Medical and mental health care practitioners shall also receive the PREA training mandated for employees, contractors and volunteers.</p> <p>D) All full-time and part-time medical and mental health care practitioners, including contract medical practitioners, will complete this zero tolerance PREA training as soon as they have received computer access and again every three years. The institution and facility PREA compliance manager will maintain the signed training acknowledgment forms, training certificates, and/or electronic training verification. The auditor reviewed an excerpt from a memo from the PREA Coordinator: "In compliance the standard all Medical and Mental Health practitioners take the National Institute of Corrections on-line Specialized Medical and Mental Health training. Medical Health Care for Sexual Assault Victims in Confinement Setting: The purpose of this course is to assist agencies in meeting the requirements of the Prison Rape Elimination Act (PREA) Section 115.35. At the end of this course staff will be able to explain the PREA standards that relate to the provision of medical care for victims of sexual abuse. They will also be able to describe their role and responsibilities in providing this care."</p> <p>According to interviews, facility medical staff do not conduct forensic examinations. Medical staff will complete an initial wellness assessment prior to sending the offender out to the local hospital. Medical and mental health staff receive regular staff training and specialized training regarding sexual abuse and sexual harassment. Training is documented.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.41	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.41 Evidence Analyzed:</p> <ol style="list-style-type: none"> 1. The assessment flow chart identifies the steps for assessments from the time the offender arrives at the facility (initial assessment, follow-up assessment within 21 days, and special assessments). 2. Offender PREA assessment 3. Follow up tracking logs

4. Samples of PREA assessments and reassessments
5. Facility PREA policy and PREA standards to ensure the policy and practice ensure compliance
6. Site review observations
7. Interviews with risk screeners, random offenders, the PREA Coordinator (PC), and the PREA Compliance Manager (PCM)
8. Offender PREA assessment logs
9. Transgender intersex questionnaire

Findings:

115.41 Screening for risk of victimization and abusiveness.

A) All offenders are assessed during intake and again upon transfer between facilities for their risk of being sexually abused by or abusive toward other offenders.

B) Intake screening ordinarily takes place within 72 hours of arrival at the facility and again within a set time period, not to exceed 21 days from the offender's arrival at the facility.

C) The agency uses an objective screening tool.

D) The PREA risk screening instrument includes at a minimum: Whether the offender has a mental, physical, or developmental disability; The age of the offender; The physical build of the offender; Whether the offender has previously been incarcerated; Whether the offender's criminal history is exclusively nonviolent, Whether the offender has prior convictions for sex offenses against an adult or child. Whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; Whether the offender has previously experienced sexual victimization; and the offender's own perception of vulnerability.

E) For Offender risks of being sexually abusive, the risk assessment reviews prior acts of sexual abuse, prior convictions for violent offenses, history of prior facility violence sexual abuse history that may be known or available to the Department.

F) Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

G) All offenders will be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that could impact the offender's risk of being sexually victimized or sexually abusive.

H) Offenders shall not be disciplined for refusing to answer or for failing to disclose complete information in response to questions asked on the intake screening related to: Any mental, physical, or developmental disability. Whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming. Whether or not the offender has previously experienced sexual

	<p>victimization; or the offender's own perception of vulnerability.</p> <p>I) All staff is prohibited from the dissemination of any of the PREA screening for risk of victimization and abusiveness except on a need and right-to-know basis. The Reports of the unauthorized dissemination of confidential information shall be investigated and may result in disciplinary action up to and including termination.</p> <p>The auditor observed a mock demonstration of the intake process where the PREA risk screening is administrated by designated intake staff and medical staff. The screening takes place in the intake area that allows for privacy and sensitive information to be discussed. Staff ask screening questions in a manner that fosters comfort and elicit responses. Intake staff use a screening tool to collect information during the risk screening process. Staff ask questions about offenders' sexual orientation and gender identity by asking if they identify as LGBTI as well as making a subjective determination about perceived status. Staff utilize other forms of documentation to complete the full risk assessment. Informal conversations with staff confirm their understanding of the risk screening process.</p> <p>The auditor was able to observe the physical storage and electronic storage of the risk assessments, medical records, and sexual abuse allegation reports. The physical storage was secured under lock and key. Electronic records are password protected with restricted and limited access.</p> <p>Informal conversations with staff verified that records are securely stored and access to electronic information is highly restricted on a need-to-know basis.</p> <p>According to interviews, offenders are screened at time of admission or within 24 hours to the facility for risk of sexual abuse victimization or sexual abusiveness toward other offenders. A standardized set of questions is utilized. Only caseworkers, investigators, Inspector General and upper-level managers have access to risk assessments. Risk levels are reassessed every six months. Information is used to determine risk, safety planning and housing/bed assignments. Placement and programming assignments for transgender and intersex offenders are completed every six months. Transgender and intersex offenders are given the opportunity to shower separately. Medical and mental health follow-ups, post screening, are within 14 days. Offenders recall being asked risk screening questions at time of intake. The PCM and PC are aware that only caseworkers have access to the risk of screening.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.42 Evidence analyzed:

- 1, The assessment flow chart
2. Bed roster that identifies offenders that are possible victims or possible aggressors
3. PREA incident summary from the transgender intersex review committee
4. Samples of offender or intersex Questionnaire
5. The PREA policy and the PREA standard to ensure compliance
6. Interviews with medical and mental health staff; risk screeners; Warden; PREA Coordinator (PC); PREA Compliance Manager (PCM); one transgender offender; and two offenders that identified as gay/lesbian/bisexual. There were no offenders held in isolation.
7. Transgender Intersex review committee
8. Eight samples of offender or intersex questionnaires

Findings:

115.42 Use of screening information.

A) Staff use information from the risk assessment to make informed decisions on 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.

B) CCS staff, in conjunction with appropriate supervisory staff (CCSIII, PCM, AW, warden), shall make individualized determinations about how to ensure the safety of each offender.

C) In deciding whether to assign a transgender or intersex residents to a facility for male or female residents, and in making other housing and programming assignments.

D) Placement and programming assignments for each transgender or intersex residents shall be reassessed at least twice each year to review any threats to safety experienced by the residents. An individualized assessment will be completed on offenders who identify as transgender or intersex by utilizing confidential document Transgender or Intersex Offender Questionnaire at intake, the 21-day follow-up, when new information is presented and at the 6-month wellness review.

E) The agency considers on a case-by-case basis whether a placement would ensure the offenders health and safety, whether the placement would present management or security risks.

F) Transgender and intersex inmates are given the opportunity to shower separately from other inmates.

G) The agency does place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status.

According to interviews, the facility does not have a housing unit solely for LGBTI offenders. The PCM was able to explain how information is used from the risk

	<p>screening. The agency considers whether the placement of a LGBTI offender will ensure the offenders health and safety and if it would present management or security problems. Placement and programming assignments for each transgender or intersex offender is reassessed every six months and upon a report or concern.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.43 Protective Custody	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.43 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. Operating procedures 2. PREA standards and department policy to ensure compliance 3. Information from the PAQ stating they have not placed any offender in isolation due to risk of sexual abuse. 4. Interview with the Warden. There were no offenders held in segregated housing for having a high risk of sexual victimization. <p>Memorandum from the Warden</p> <p>Findings:</p> <p>115.43 Protective custody.</p> <p>A) The policy requires that offenders at high risk for sexual victimization shall “not” be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and there are no available alternative means of separation from likely abusers.</p> <p>B) Offenders placed in restrictive housing for this purpose, on an on-going and extended basis, shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education or work opportunities, the assigned CCS shall document the following in NOTIS:</p> <p>C) Assignment shall be temporary until and alternative means of separation can be arranged and should not ordinarily exceed a period of 30 days.</p> <p>D) The due process case note documenting this status include: The basis for the facility's concern for the offender's safety and the reason why no alternative means of separation can be arranged. There were (0) number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months.</p> <p>According to interviews, offenders are not held in segregated housing due to having a high risk of sexual victimization.</p>

	The facility meets compliance with this standard.
--	---

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.51 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The training curriculum on PREA reporting 2. PREA posters in English and Spanish 3. Intergovernmental agreement with the state of New Mexico for accepting PREA allegations 4. New Mexico report form 5. PREA policy 6. "PREA at a Glance" form that outlines 1st responder duties and how to report a PREA allegation 7. The PREA policy's and PREA standards to ensure compliance 8. Site review observations 9. Testing documentation 10. Interviews with random staff; random offenders; and the PREA Compliance Manager (PCM) 11. Offender handbook <p>Findings:</p> <p>115.51 Inmate reporting</p> <p>A) The Department policy provides multiple ways for offenders to report allegations of sexual abuse, sexual harassment, or retaliation by other offenders or staff for reporting or cooperating with an investigation related to PREA, or any staff negligence or violation of responsibilities that may have contributed to sexual assault or sexual harassment.</p> <ol style="list-style-type: none"> a. Verbally report to any staff member, contractor, or volunteer; b. A written report submitted via any staff member, contractor, or volunteer; c. Filing a grievance, or d. Calling the PREA hotline <p>B) Offenders may report anonymously or otherwise to an outside public agency (New Mexico Department of Correction), which is able to immediately report to the Department complaints from offenders about sexual abuse, sexual harassment, or retaliation by staff or other offenders. Written notification to offenders of the outside public agency identifiers is included on PREA posters placed in all housing units, work, and program areas, and within the written intake/reception offender orientation packet. Offenders can write directly to the New Mexico Department of Corrections or request the outside agency reporting form.</p>

C) All staff are required to report immediately without reservation any corrupt or unethical behavior which could affect either offenders, employees or the integrity of the Department of Corrections any knowledge, suspicion, or information regarding any incidents of sexual abuse, sexual harassment or retaliation that occurred inside or outside of the facility to their immediate supervisor, another supervisor, warden, or inspector general. In the event the allegations of sexual abuse or sexual harassment concern is the immediate supervisor the report shall be made to another supervisor, warden, or OIG.

D) Staff shall privately report sexual abuse and sexual harassment incidents to supervisory staff. Staff can report either in person, by telephone, email or via the NDOC website, PREA incident report form. No other person shall be in the vicinity of hearing the reporting information. Staff shall not reveal any information related to the report to anyone other than the extent necessary as specified in department policy. Reports shall be accepted verbally, in writing, anonymously and from third parties. Supervisors are required to promptly document any verbal reports they receive.

PREA Audit Notices are posted abundantly and visible to staff, offenders, and visitors. Notices are posted in each unit, culinary, lobby, administration area, intake, and other areas throughout the facility. Emotional support services information is posted in each unit, lobby, administration area, and other areas throughout the facility. Phones were accessible nearby. Reporting sexual abuse/sexual harassment information is posted in each unit, lobby, administration area, and other areas throughout the facility. Phones are available for offender use. Civil immigration is not applicable to this facility. Third party reporting information is posted in each unit, public lobby, and other areas frequented by offenders, staff, visitors and contractors. It is also located on the agency website. Other PREA signage, such as zero tolerance information are available in each unit. This information is readily available throughout the facility. PREA flyer is located in units.

Electronic reporting methods are not available to offenders. Staff and third-party electronic reporting are available on the agency's website.

Informal conversations with staff and offenders were held during the facility tour. All stated that PREA information is readable and accessible; contains consistent and accurate information; and always posted. The Audit Notice has been posted for several weeks and offenders pointed out that the Notice contains the date it was posted.

The auditor was able to observe the physical storage and electronic storage of the risk assessments, medical records, and sexual abuse allegation reports. The physical storage was secured under lock and key. Electronic records are password protected with restricted and limited access.

Informal conversations with staff verified that records are securely stored and access to electronic information is highly restricted on a need-to-know basis.

Each unit contains written materials and a secure drop box. The boxes are checked on weekdays by caseworkers. Boxes can be used for any note, grievance or concern. Mail is picked up from units on weekdays and mailed out. Mail is not read but is checked for contraband prior to sending and receiving. No restrictive housing was observed.

Informal conversations with staff regarding the process of sending and receiving mail to/from the external reporting entity, outside emotional support services, and legal mail were unremarkable. Staff understood which mail is to remain private and confidential. Staff are also aware of having writing tools available and that managers check the locked boxes every weekday.

Multiple internal ways of reporting were observed. Offenders are provided with paper/forms, pencils (upon request), envelopes and secure drop boxes to report in writing in each unit. Boxes are checked by caseworkers on weekdays. An offender was asked to walk the auditor through the internal reporting by writing process.

The facility does not have a process for offenders to report electronically. Informal conversations with staff confirm that staff are aware of the process of receiving verbal reports. When verbal reports are received, staff stated that they are to write an incident report before the end of their shift. Informal conversations with offenders confirm their understanding of how to report verbally. They can report directly to security or non-security staff, any staff member of any position, contractors, volunteers, attorneys, probation officers, or visitors. The phone number is provided on posters throughout the facility to include each unit. The auditor made a test call. The phone call went through without issue. The call was free to make. The number on the posters is accurate. No PIN number was required. Callers can remain anonymous.

The address is also provided on postings throughout the facility to include each unit. Paper, pencils, envelopes and free postage are available to all offenders. Informal conversations with staff and offenders confirm their understanding of access to phones, reasonable accommodation and anonymity.

According to interviews, staff are aware of the various ways staff and offenders can report an allegation of sexual abuse or sexual harassment of offenders privately. Offenders involved in making the PREA signage exceed this standard. Offenders were able to describe various ways to report sexual abuse or sexual harassment, in person, in writing, through a third party, and anonymously. The PCM stated grievance drop boxes and a PREA reporting phone number are available for offender reporting. When reports are made to the hotline, the hotline will notify facility.

The facility meets compliance with this standard.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.52 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. Pictures of the PREA posters in English and Spanish 2. Statement that the facility has not had any grievances that concerned PREA issues in the last 12 months. 3. PREA policy and the PREA standard to ensure compliance. 4. Site review observations 5. Testing documentation 6. There were no offenders who reported sexual abuse to interview <p>Findings:</p> <p>115.52 Exhaustion of administrative remedies.</p> <p>A) The agency has a grievance policy.</p> <p>B) The offender grievance process is a means that offenders can utilize to make a report of sexual abuse or sexual harassment by a staff member or another offender. Any grievance that has an allegation or report related to sexual abuse must be accepted without constraints. Grievances that are outside the accepted time frames for a filed grievance shall be accepted for any portion of the grievance that has a claim of sexual abuse.</p> <p>C) The grievance process shall not be required to resolve or attempt to resolve the grievance with the accused staff member for any claim of sexual abuse; The grievance shall not be referred to the accused or named staff member; and, Grievances received by staff members that involve a family member or other staff that they have a close or intimate relationship with will be immediately forwarded to an impartial and designated staff member for review.</p> <p>D) The grievance should be confidential and may be submitted to the facility head, PREA compliance manager, or PREA coordinator for review and appropriate referral. It should not be submitted or referred to the subject of the investigation. A final decision on the merits of any portion of a grievance is required within 90 days of receiving the grievance. Computation for the 90-day time period does not include time consumed by the resident in preparing an appeal. An extension may be granted based on normal grievance procedures. If an extension is granted, notify the resident in writing and provide a date when the final decision will be made.</p> <p>E) Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, can assist the resident submitting the grievance. Third parties may submit such allegations on behalf of a resident. Third parties are not required to use the standard grievance form when submitting an PREA grievance. If the alleged victim denies the allegation, declines to participate, and there is no</p>

	<p>evidence to support it, the allegation will be deemed unfounded and closed.</p> <p>F) The agency has established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. Any grievance filed by another offender on behalf of the victim when sexual abuse is reported will be accepted and allowed to continue until a response from the IG's Office. At any level that a grievance is filed with a claim or report of sexual abuse, that grievance will be scanned and emailed for review to the OIG, PREA Management Division.</p> <p>G) The Department, institutions, and facilities are prohibited from applying disciplinary action against an offender for filing any level of a grievance unless it is clearly demonstrated and documented that the offender filed the grievance in bad faith.</p> <p>Third party reporting information is posted in each unit, public lobby, and other areas frequented by offenders, staff, visitors and contractors. It is also located on the agency website. Staff and third-party electronic reporting are available on the agency's website. The auditor placed a call using the dedicated phone line. This was a free call, available on demand and answered by operators. Bilingual staff and translation services are available.</p> <p>According to interviews, offenders understand how to report sexual abuse and sexual harassment.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.53 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. Pictures of PREA posters in English and Spanish 2. Copy of an offender ID that has information on who and how to report a PREA allegation 3. Samples of the advocacy request form offenders filled out. 4. The PREA policies and procedures on calling victim advocacies 5. Contract with Signs of Hope. 6. The departmental policy and PREA standard to ensure compliance. 7. Community questionnaire 8. Site review observations 9. Interviews with random staff; PREA Compliance Manager (PCM); and the Warden.

There
were no offenders who reported sexual abuse.

Findings:

115.53 Inmate access to outside confidential support services.

A) The facility provides offenders with access to outside victim advocates for emotional support services related to sexual abuse by giving offenders mailing addresses and telephone numbers, including toll-free hotline numbers for victim advocate Signs of Hope organizations.

B) The facility informs inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

Privileged Mail between an inmate and the following person(s): (1) State and local elected officials; (2) State officials appointed by the Governor; (3) Attorney listed with a State Bar Association, a recognized legal assistance agency, or an attorney representative; (4) Diplomatic personnel; (5) The Rape Crisis Center (RCC); (6) Sexual Assault Support Services (SASS); and (7) communication deemed privileged through a court order.

C) As evidenced by the MOU with Signs of Hope the agency has entered into memoranda of understanding with a community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse.

Emotional support services information is posted in each unit, lobby, administration area, and other areas throughout the facility. Phones were accessible nearby.

Each unit contains written materials and a secure drop box. The boxes are checked on weekdays by caseworkers. Boxes can be used for any note, grievance or concern. Mail is picked up from units on weekdays and mailed out. Mail is not read but is checked for contraband prior to sending and receiving. No restrictive housing was observed.

Informal conversations with staff regarding the process of sending and receiving mail to/from the external reporting entity, outside emotional support services, and legal mail were unremarkable. Staff understood which mail is to remain private and confidential. Staff are also aware of having writing tools available and that managers check the locked boxes every weekday.

HOPE phone number is provided on postings throughout the facility to include each unit. Calls are free, unmonitored, and no PIN number is required. The auditor made a test call to HOPE and completed the community advocacy questionnaire. The phone was answered by a live person. The provider was prepared to offer services. HOPE has bilingual staff available as well as language assistance services. HOPE stated that the information shared is confidential.

	<p>The HOPE mailing address is also provided on posters throughout the facility to include each unit. Paper, pencils, envelopes and free postage is provided in each unit. Mail is sent out on weekdays.</p> <p>Informal conversations with staff and offenders confirm their access to HOPE, cell phones and writing materials.</p> <p>According to interviews, most offenders were aware that services are available outside the facility for dealing with sexual abuse. Offenders are aware of signage posted in the units and other areas of the facility containing phone numbers and addresses to outside services and most offenders knew that they could speak privately to this service. The facility allows offenders to see or speak to attorneys privately. The facility allows offenders to see or speak to parents or legal guardians during designated times. Offenders have unmonitored, unlimited phone calls with attorneys. Offenders have in-person, phone and mail contact with parents.</p> <p>Signage states the call is confidential and free. Offenders understand that they can call their attorney and parents if they choose.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.54 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. Link on the IGs website for anonymous 3rd party reporting of a PREA issue 2. Photos of posters that explain the zero-tolerance policy and how to report PREA allegations 3. PREA policy to ensure that it complied with the PREA standard 4. Site review observations <p>Findings:</p> <p>115.54 Third-party reporting.</p> <p>A) The Department provides a method for third parties to report sexual abuse and sexual harassment on behalf of an offender. Information on how to report sexual abuse and sexual harassment on behalf of an offender.</p> <p>The IGs website states:</p> <p>It is the vision of the PREA Management Team to give a means to report sexual abuse and/or harassment. The PREA Management Team is committed to ensuring offenders and staff are held accountable for their actions if they engage in sexual abuse and/or harassment of offenders or staff; train staff and offenders regarding sexual abuse</p>

	<p>and/or harassment in prison; and educate Staff and offenders on the Department's Zero Tolerance Policy. If you wish to make an anonymous complaint or report information, contact the PREA Management Division by mail, email or phone.</p> <p>Office of the Inspector General, PREA Management Division P.O. Box 7011 Carson City, NV 89702 (775) 977-5587</p> <p>Third party reporting information is posted in each unit, public lobby, and other areas frequented by offenders, staff, visitors and contractors. It is also located on the agency website. Staff and third-party electronic reporting are available on the agency's website. The auditor placed a call using the dedicated phone line. This was a free call, available 24/7/365 and answered by operators. Bilingual staff and translation services are available.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.61 Staff and agency reporting duties	
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.61 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The PREA policy and the PREA standard to ensure compliance 2. Staff PREA training curricula 3. Staff training records 4. Signed PREA training acknowledgments 5. PREA at a glance handout (At-A-Glance Procedures: Reporting Sexual Abuse, immediately report any knowledge, information, or suspicion of sexual abuse to a security supervisor. Do not redirect a person to the PREA hotlines or to report to a different staff member. It is every staff member's responsibility to take action). 6. Site review observations 7. Interviews with PREA Coordinator, medical and mental health staff, random staff, and the Warden. 8. Testing documentation 9. Adult Protective Services report form 10. Suspected Child Abuse report form 11. State Law related to abuse and reporting <p>Findings:</p> <p>115.61 Staff and agency reporting duties.</p>

	<p>A) The PREA policy states all staff are required to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the department; retaliation against offenders or staff who reported such incidents; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>B) Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in Department policy, to make treatment, investigation, and other security and management decisions.</p> <p>C) Medical and Mental health practitioners are required to report sexual abuse and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.</p> <p>(d) If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.</p> <p>D is N/A The facility does not hold juvenal offender.</p> <p>E) The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators. In the event that the allegations of sexual abuse or sexual harassment concern the staff member's immediate supervisor, the report shall be made to another supervisor, Warden, or OIG.</p> <p>According to interviews, offenders are advised by medical and mental health staff at the initiation of services regarding limitations of confidentiality and their duty to report. All staff are mandatory reporters. Medical and mental health staff are not aware of any disclosures that required to be reported. The PCM and Warden stated that parents/legal guardians/child welfare are notified of an allegation right away. Attorneys are generally notified within 72 hours. The Warden also stated that allegations are reported directly to the facility investigators.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.62 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The PREA policy and the PREA standard to ensure compliance 2. Pre-audit questionnaire (PAQ)

	<p>3. Interviews with the Director, Warden and random staff.</p> <p>Findings:</p> <p>115.62 Agency protection duties.</p> <p>A) The PREA policy requires when the Department, institution, or facility learns that an offender is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the offender. The facility stated they have not had any inmates in imminent risk for sexual abuse.</p> <p>According to interviews, staff understand that immediate action is required to protect offenders at risk of imminent sexual abuse.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.63 Reporting to other confinement facilities	
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.63 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The PREA policy and the PREA standard to ensure the policy complied with the PREA standard. 2. Statement in the Pre-audit questionnaire (PAQ) 3. Interviews with the Director and the Warden to Warden Notifications <p>Findings:</p> <p>115.63 Reporting to other confinement facilities.</p> <p>A) Upon receiving an allegation that an offender was sexually abused while confined at another facility, the Warden notifies the facility Warden or the appropriate office of the agency where the abuse occurred. Appropriate Individuals outside of the Department that may be appropriate recipients of the allegation notifications may be sent to the agency's PREA Coordinator or the Department Head.</p> <p>B) Within 72 hours of the offender reporting, the Warden will complete and send the written notification. When the Department, institution, or facility receives such notifications, they shall ensure that the allegation is investigated if not already investigated.</p> <p>C) As evidenced by the notifications the facility complies with the need to document the reports.</p> <p>D) The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.</p>

	<p>According to interviews, reports from other facilities are thoroughly investigated.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.64 Document's reviewed:</p> <ol style="list-style-type: none"> 1.The PREA policy requirements and the PREA standard to ensure compliance 2.Training curriculum 3.PREA at a Glance form that outlines 1st responders' duties. 4.Statement in the PAQ 5.Staff first responder wallet cards 6. Interviews with first responders, and random staff, and offenders who reported sexual abuse. <p>Findings:</p> <p>115.64 Staff first responder duties.</p> <p>A) Upon learning of an allegation that an offender was sexually abused, the first security staff member to respond to the report shall: Separate the alleged victim and abuser; Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; If the abuse occurred within a time period (96 hours) that still allows for the collection of physical evidence, request that the alleged victim ensures that the alleged abuser does not take any action that could destroy physical evidence including as appropriate: Washing/showering, brushing teeth, changing clothes, urinating, defecating, drinking or eating.</p> <p>B) If the first staff responder is not a custody staff member, the first responder shall request that the alleged victim does not take any actions that could destroy physical evidence, and then immediately notify the first custody staff member available.</p> <p>According to interviews, security staff, non-security staff and random staff were able to describe all actions to be taken as a first responder in for allegation of sexual abuse. Staff respond as soon as the allegation is made. Offenders who reported sexual abuse were able to see medical and mental health.</p> <p>The facility meets compliance with this standard.</p>

115.65	Coordinated response
---------------	-----------------------------

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.65 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The coordinated response plan outlying responsibilities related to a PREA incident for all staff in the facility. 2. Offender victim interview forms 3. Shift commanders coordinate response guide 4. Statement in the Pre-audit questionnaire (PAQ) 5. The department PREA policy and the PREA standard. 6. Interview with the Warden <p>Findings:</p> <p>115.65 Coordinated response.</p> <p>A) The PREA policy require all institutions and facilities will develop and follow a coordinated response procedure for reported incidents of sexual abuse. The procedure will include staff first responders, medical and mental health practitioners, investigators, and facility leadership. Procedures will include the custody supervisor utilizing Coordinated response forms. The facility has not had any incidents in the last 12 months that required the need for a coordinated response. The alleged PREA complaints were all after the 96-hour time frame.</p> <p>According to interviews, the facility coordinated response plan is in policy.</p> <p>The facility meets compliance with this standard.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.66 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The PREA policy 2. AFSCME and Fraternal order of Police collective bargaining agreements. 3. A memo from the PREA Coordinator stated the State of Nevada American Federation of State, County, and Municipal Employees (ASCME). Local 4041 agreement 7/1/2023 – 6/30/2025 allows for the agency to remove alleged staff sexual abusers from contact with offenders pending investigation. 4. The department policy met the requirements of the PREA standard. 5. Interview with the Director

	<p>Findings:</p> <p>115.66 Preservation of ability to protect inmates from contact with abusers.</p> <p>A) The PREA policy States: Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any offenders pending the outcome of an investigation or of a determination of whether, and to what extent, discipline is warranted.</p> <p>B) Nothing in this standard shall restrict the entering into or renewal of agreements that govern: The conduct of the disciplinary process, as long as such agreements are not inconsistent with the evidentiary standard for administrative investigations and disciplinary sanctions for staff outlined in standard or whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated.</p> <p>According to interviews, the facility has a contract with the State of Nevada American Federation of State, County, and Municipal Employees (ASCME).</p> <p>The facility meets compliance with this standard.</p>
--	---

115.67	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.67 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. Statement in the Pre-audit questionnaire (PAQ) 2. PREA policy 3. Interviews with the Director, Warden, and the designated staff charged with monitoring retaliation. At the time of audit there were no offenders held in segregated housing (for risk of sexual victimization/who alleged to have suffered sexual abuse) or who reported sexual abuse. <p>Findings:</p> <p>115.67 Agency protection against retaliation.</p> <p>A) The facility has a policy on protective measures.</p> <p>B) The facility employs multiple protection measures, such as housing changes or transfers for offender victims or abusers, removal of alleged staff or offender abusers</p>

	<p>from contact with victims, and emotional support services for offenders or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.</p> <p>C) For at least 90 days following a report of sexual abuse, the PCM or designee shall monitor and document the conduct and treatment of offenders or staff who reported the sexual abuse and of offenders who were reported to have suffered sexual abuse to determine if there are changes that may suggest possible retaliation by offenders or staff; and shall act promptly to remedy any such retaliation.</p> <p>D) The PCM or designee monitoring will include reviewing:</p> <ul style="list-style-type: none"> a. offender disciplinary reports, b. housing or program changes, c. negative performance reviews, or d. reassignments of staff <p>5. In the case of offenders, such monitoring shall also include periodic status checks.</p> <p>6. If any other individual who cooperates with an investigation expresses a fear of retaliation, the Department, institution, or facility shall take appropriate measures to protect that individual against retaliation. The obligation to monitor will terminate if the Department determines that the allegation is unfounded.</p> <p>E) The 90-day monitoring will continue past 90 days if the need continues. In instances of offender transfer at any point in the retaliation monitoring process, the sending facility PREA Compliance Manager will notify the receiving facility of the 90day retaliation monitoring. This notification will be made via the telephone with a follow-up e-mail to the PCM at the receiving facility. This e-mail should be maintained, for audit purposes, as proof of notification. The sending facility PREA Compliance Manager will maintain the offender on their PREA retaliation monitoring log to ensure that the retaliation monitoring is completed.</p> <p>F) The PREA Compliance Manager will follow up with the PREA Compliance Manager at the Receiving Facility, in 30, 60, and 90 days, to ensure the required monitoring has been completed.</p> <p>According to interviews, retaliation is monitored weekly. Contact with offenders who have reported sexual abuse is initiated. Monitoring will last 90 days or longer. A retaliation questionnaire will be completed. Offenders feel protected enough against retaliation.</p> <p>The facility meets compliance with the standard.</p>
--	---

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>115.68 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The PREA policy 2. Pre-audit questionnaire (PAQ) 3. Interviews with the Warden and staff who supervise segregated housing. At the time of audit there were no offenders held in segregated housing (for risk of sexual victimization/who alleged to have suffered sexual abuse). <p>Findings:</p> <p>115.68 post-allegation protective custody.</p> <p>A) The PREA policy requires all institutions and facilities will develop, implement, and periodically review policies to strictly prohibit any offender who is or was at high risk for sexual victimization from being placed into involuntary segregated housing unless: An assessment has been done and a determination made and documented that there is no available alternative means for housing the offender who is or was or is at high risk for sexual victimization from an abuser.</p> <p>All placements of offenders into involuntary segregation for being a victim or a risk of victimization will be documented in NOTIS and shall clearly demonstrate the basis for the reason why no alternative was available. The institution or facility may place the offender in involuntary segregated housing for less than 24 hours while completing the assessment. Institution and facility procedures and practice involving involuntary segregated housing shall include for the offenders, to the extent possible, access to programs, privileges, education, and work opportunities. The institution or facility will document in NOTIS the opportunities that have been limited, the duration of the limitation, and the reason why the limitation.</p> <p>Any offender placed into involuntary segregation due to having been a victim or at risk of victimization shall only remain in involuntary segregation only until an alternative housing arrangement is made but shall not ordinarily exceed 30 days. Any offender placed into involuntary segregation due to being a victim or a risk of victimization shall provide for a 30-day review to determine and document the continued need for separation from the general population, if applicable.</p> <p>A statement in the PAQ that no offenders have been placed in protective custody after an allegation of sexual abuse or harassment or is at risk for sexual abuse in the last 12 months.</p> <p>According to interviews, segregated housing is not utilized for offenders at risk of sexual victimization or who are alleged to have suffered sexual abuse.</p> <p>The facility is in compliance with this standard.</p>
--	---

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.71 Evidence analyzed:

1. OG investigation guide
2. Six-page pamphlet "standard in focus" for investigations
3. Statement in the PAQ that 4 allegations of sexual abuse have been referred for prosecution since 2021
4. PREA investigation guide
5. PREA policies PREA standards and laws for the State of Nevada.
6. Laws for the State of Nevada
7. Site review observation of physical storage
8. Interviews with investigators, Warden, PREA Coordinator (PC), PREA Compliance Manager (PCM) and offenders who reported sexual abuse.
9. The PREA investigation tracking log
10. Eight completed investigations (that note any staff failures that could have prevented the sexual abuse or harassment), completed by trained investigators

Findings:

115.71 Criminal and administrative agency investigations.

A) The Department Office of the Inspector General Criminal Investigators are responsible for investigating all allegations of staff-on-offender sexual abuse and sexual harassment and offender-on-offender sexual abuse. Investigators assigned to investigate allegations of sexual abuse or sexual assault shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The protocol is developmentally appropriate for youth and is adapted from the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

B) The Warden or designee is responsible for assigning a facility supervisor who has completed specialized training to conduct offender-on-offender sexual harassment investigations as assigned by the Office of the Inspector General. Investigations will be completed promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

C) Investigators gather and preserve direct and circumstantial evidence, including: Any available physical and DNA evidence; Any available electronic monitoring data; Shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrators.

D) When the quality of evidence appears to support a criminal prosecution, the assigned criminal investigator shall conduct compelled interviews only after

consulting with the Nevada Attorney General as to whether compelled interviews may be an obstacle to subsequent criminal prosecution.

E) The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as an offender or staff. The Department does not require an offender who alleges sexual abuse to submit to a polygraph examination or other truth-telling devices as a condition of proceeding with the investigation of such an allegation.

F) Administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse and be documented in written reports to include a description of the physical, and testimonial evidence, and the reasoning behind credibility assessments and investigative facts and findings.

G) Criminal investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence with copies of all documentary evidence attached, where feasible.

H) Substantiated sexual abuse and/or sexual harassment allegations of conduct that appear to be criminal will be referred to the Attorney General's Office.

I) The facility maintains all documents.

J) The departure of the alleged abuser or victim from the employment or control of the facility or Department shall not provide a basis for terminating an investigation.

K and L are N/A due to the IGs investigate on allegations of sexual abuse.

The auditor was able to observe the physical storage and electronic storage of the risk assessments, medical records, and sexual abuse allegation reports. The physical storage was secured under lock and key. Electronic records are password protected with restricted and limited access.

Informal conversations with staff verified that records are securely stored and access to electronic information is highly restricted on a need-to-know basis.

According to interviews, investigative staff received training specific to conducting sexual abuse and sexual harassment investigations. Investigations are initiated right away following an allegation of sexual abuse or sexual harassment. The first step in initiating an investigation is to assure first responder duties have been completed and proper notifications have been made. Investigators were able to thoroughly describe the investigation process. Anonymous and third-party reports are handled in the same manner as all other investigations. All direct and circumstantial evidence would be collected and preserved. When evidence is discovered that a prosecutable crime may have taken place, prosecutors are consulted. Polygraphs are not utilized. Investigations continue to be completed regardless of if the staff terminates employment or the alleged victim leaves the facility. Investigations will not terminate should a victim recant his/her allegation. Administrative and criminal investigations are documented in written reports. A preponderance of the evidence is required to

	<p>substantiate allegations of non criminal sexual abuse or sexual harassment. Victims are informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.72 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. OP 421 PREA policy 2. Interviews with investigators <p>Findings:</p> <p>115.72 Evidentiary standard for administrative investigations.</p> <p>The PREA policy states: The Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>According to interviews, the agency shall impose no standard higher than a preponderance of the evidence in determining whether criminal allegations of sexual abuse or sexual harassment are substantiated.</p> <p>The facility meets compliance with this standard.</p>

115.73	Reporting to inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.73 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. PREA policy. 2. Five completed investigation offender notifications 3. Interviews with Warden and investigators. There were no offenders who reported sexual abuse. <p>Findings:</p> <p>115.73 Reporting to inmates.</p>

	<p>A) Following an investigation into an offender's allegation that they suffered sexual abuse, the facility informs the offender victim as to whether the allegation has been determined to be substantiated, unsubstantiated, unfounded, or did not meet a violation of sexual abuse or harassment.</p> <p>B) If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate. N/A the agency investigates all allegations of sexual misconduct.</p> <p>C) Following an offender's allegation that a staff member has committed sexual abuse against the offender, and the allegation was shown to be substantiated the offender will be notified by the Department, institution, or facility whenever:</p> <ol style="list-style-type: none"> The staff member is no longer posted within the offender's unit; The staff member is no longer employed at the facility; The Department learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or The Department learns that the staff member has been convicted on a charge related to sexual abuse within the facility. <p>D) Following an offender's allegation that they had been sexually abused by another offender and the allegation was shown to be substantiated the Department, institution, or facility shall subsequently inform the alleged victim whenever:</p> <ol style="list-style-type: none"> The Department learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; The Department learns that the alleged abuser has been convicted of a charge related to sexual abuse within the facility. <p>E) The institution documents all such notifications or attempted notifications on the Offender PREA Report Notification form DOC 2095.</p> <p>F) The facility's obligation to provide notification shall terminate if the offender is released from the Department's custody.</p> <p>According to interviews, offenders are notified of the outcome of the investigation within a short period of time.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.76 Evidence analyzed:

	<ol style="list-style-type: none"> 1. Policy on prohibitions and penalties 2. PREA policy and PREA standard to ensure compliance. 3. Employment status transaction showing staff resignation during an investigation <p>Findings:</p> <p>115.76 Disciplinary sanctions for staff.</p> <p>A) The PREA policy states: Staff shall be subject to disciplinary sanctions up to and including termination for violating the Department's sexual abuse and sexual harassment policy.</p> <p>B) Termination shall be a presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p>C) Disciplinary sanctions against staff members for any violation of the agency's policy prohibiting acts of sexual abuse and sexual harassment (other than engaging in sexual abuse) against an offender will be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed against other staff members for comparable offenses in similar circumstances.</p> <p>D) All terminations of any staff member for violations of the sexual harassment policy, or resignations by staff, who would have been terminated if not for their resignation, shall be reported to law enforcement agencies and any relevant licensing body. Unless the activity was clearly not criminal.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.77 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. Negotiated Contract that contractors sign that outlines the PREA investigative process and the notice that any contractor that violates the PREA requirements will no longer be allowed into the facility. 2. The Warden submitted a memo stating that they have not had any volunteers or contractors to violate the zero-tolerance policy in the last 12 months. 3. Interview with the Warden. <p>Findings:</p> <p>115.77 Corrective action for contractors and volunteers.</p> <p>A) Any contractor or volunteer who engages in sexual abuse shall be prohibited from</p>

	<p>contact with offenders and shall be reported to law enforcement agencies unless the activity was clearly not criminal, and to relevant licensing bodies.</p> <p>B) The facility shall take appropriate remedial measures and shall consider whether to prohibit further contact with offenders, in the case of any other violation of Department sexual abuse, sexual harassment, or over-familiarity policies by a contractor or volunteer.</p> <p>According to interviews, remedial measures would be taken against contractors and volunteers for any violation of agency PREA policies.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.78	Disciplinary sanctions for inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.78 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The department PREA policy and the PREA standard to ensure compliance. 2. The information in the PAQ that states that no offenders have received any disciplinary action for any PREA incident. 3. Interviews with medical and mental health staff and the Warden. <p>Memo from the Warden</p> <p>Findings:</p> <p>115.78 Disciplinary sanctions for inmates.</p> <p>A) Upon completion of an administrative investigation which results in a substantiated finding for offender-on-offender sexual harassment will result in administrative disciplinary charges in accordance with AR 707 offender discipline MJ50 sexual harassment.</p> <p>B) The institution or facility disciplinary hearing officer will ensure sanctions are commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories.</p> <p>C) The disciplinary hearing officer shall consider whether an offender's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanctions, in any, should be imposed.</p> <p>D) The facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility considers whether to require the offending inmate to participate in such interventions as a</p>

	<p>condition of access to programming or other benefits.</p> <p>E) For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>F) The facility prohibits all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.</p> <p>According to interviews, the facility offers therapy, counseling and other intervention services designed to address and correct the underlying reasons or motivations for sexual abuse. The facility does not require an offender's participation as a condition of access to any rewards-based behavior management system, programming or education. No isolation was observed.</p> <p>The Warden understands that offenders can be subjected to disciplinary sanctions for engaging in offender-on-offender sexual abuse.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.81 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. PREA intake assessments. 2. Logs from 11-1-23 through 10-29-24 on when an offender arrived and the date of the referral to mental health 3. List of all offenders who refused a follow up by mental health 4. Memo from the Warden stating "Jean Conservation Camp has not had any offenders that arrived in the last 12 months request mental health services for prior sexual abuse. This is addressed at initial intake and follow up at FMWCC prior to transfer." 5. Site review observations - record storage 6. Interviews with the risk screener, medical and mental health staff, and offenders who disclosed sexual victimization at risk screening. 7. PAQ states that there were 98 referrals for victims of prior sexual abuse 8. 12 allegations that were referred to and documented by mental health staff 9. 3 referrals for sexual abuse perpetrators that were referred to mental health 10. Sample mental health case notes 11. Release of medical information form <p>Findings:</p>

	<p>115.81 Medical and mental health screenings; history of sexual abuse.</p> <p>A) During the intake or reception screening that indicates an offender has experienced prior sexual victimization or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or the community, as evidenced by the mental health referral log staff ensured that the offender is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.</p> <p>B) If the screening indicates that an offender has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the offender is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.</p> <p>C) If the screening pursuant to § 115.41 indicates that a jail offender has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. N/A this is not a jail</p> <p>D) Any information related to sexual victimization or abusiveness that occurred in a confinement facility setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.</p> <p>E) Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in a facility setting unless the offender is under the age of 18. The facility provided the documentation of a referral of medical and mental health review and the medical records release form.</p> <p>The auditor was able to observe the physical storage and electronic storage of the risk assessments, medical records, and sexual abuse allegation reports. The physical storage was secured under lock and key. Electronic records are password protected with restricted and limited access. Informal conversations with staff verified that records are securely stored and access to electronic information is highly restricted on a need-to-know basis. According to interviews, informed consent is required. Offenders that disclose prior sexual victimization at intake are offered to see medical or mental health.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard

Auditor Discussion

115.82 Evidence analyzed:

1. Memo from the PREA Coordinator states any medical emergency that requires a more extensive treatment the offender is taken to a hospital. The Nevada Department of Correction does not have a direct contract with any hospital but uses hospitals in the PPO networks. Hometown Health is utilized in northern Nevada and Sierra Health Organization is used in southern Nevada. Contract with a PPO "Sierra Health Care Options"
2. Unusual Occurrence report and a progressive note form.
3. Interviews with medical and mental health staff, first responders, and offenders who reported sexual abuse.

Findings:

115.82 Access to emergency medical and mental health services.

A) Offender victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.

B) If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, custody staff first responders shall take preliminary steps to protect the victim and immediately notify the appropriate medical and mental health practitioners.

C) Offender 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.

D) Treatment services shall be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

According to interviews, offender victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of these services are determined according to their professional judgement. Victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis. Security staff and non-security staff were able to describe all actions to be taken as a first responder for allegations of sexual abuse. The offender who reported sexual abuse was seen by medical and mental health right away. No forensic examination was required. The offender who reported sexual abuse did not require additional treatment.

The facility meets compliance with this standard.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 309 544 342">Auditor Discussion</p> <p data-bbox="256 387 639 421">115.83 Evidence analyzed:</p> <ol data-bbox="256 454 1417 656" style="list-style-type: none"> 1. PREA policy and procedures 2. Medical directives 3. PREA standards to ensure compliance 4. Interviews with medical and mental health staff and one offender who reported sexual abuse. <p data-bbox="256 701 384 734">Findings:</p> <p data-bbox="256 768 1358 846">115.83 Ongoing medical and mental health care for sexual abuse victims and abusers.</p> <p data-bbox="256 880 1417 1003">A) The facility offers medical and mental health evaluation and treatment to all offenders who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.</p> <p data-bbox="256 1037 1417 1160">B) The evaluation and treatment of such victims shall includes follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.</p> <p data-bbox="256 1193 1433 1272">C) The facility provides victims with medical and mental health services consistent with the community level of care.</p> <p data-bbox="256 1305 1465 1384">D) Offender victims of sexually abusive vaginal penetration, while incarcerated, shall be offered pregnancy tests.</p> <p data-bbox="256 1417 1469 1496">E) If pregnancy results, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.</p> <p data-bbox="256 1529 1401 1608">F) Offender victims of sexual abuse, while incarcerated, shall be offered tests for sexually transmitted infections as medically appropriate.</p> <p data-bbox="256 1641 1476 1765">G) Treatment services are provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p data-bbox="256 1798 1476 1921">H) Facilities attempt to conduct a mental health evaluation of all known offender-on offender abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.</p> <p data-bbox="256 1955 1460 2123">According to interviews, emergency services would be provided through the local hospital. Facility medical and mental health staff would follow up afterwards on the treatment plan and provide community referrals for continued care. Medical and mental health services are consistent with community level of care. This is a female-</p>

	<p>only facility. A psychosocial evaluation would be conducted for all known offender-on-offender abusers and treatment offered if appropriate. Medical and mental health spoke with an offender who reported sexual abuse regarding other serves available. No tests for infections were required.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.86	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.86 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. PREA policy and the PREA standards to ensure compliance. 2. PREA-audit questionnaire (PAQ) stating that the facility has not had any investigations or reviews in the last 12 months. 3. Interviews with the Warden, PREA Compliance Manager (PCM), and incident review team members. 4. 7 Sexual Abuse Incident Reviews <p>Findings:</p> <p>115.86 Sexual abuse incident reviews.</p> <p>The Department PREA Coordinator or designee will notify the facility PCM when a sexual abuse investigation has been officially closed.</p> <p>A) The facility conducts a Sexual Abuse Incident Review (SAIR) at the conclusion of every substantiated sexual abuse investigation, including where the allegation has not been substantiated unless the allegation has been determined to be unfounded.</p> <p>B) The SAIR shall ordinarily occur within 30 days of the conclusion of every substantiated and unsubstantiated sexual abuse investigation, whether administrative or criminal.</p> <p>C) The incident review team includes upper-level facility supervisor, Line supervisors, Investigators Medical or Mental Health practitioner.</p> <p>D) The SAIR team shall utilize DOC 1925 and document their review for the following criteria:</p> <ol style="list-style-type: none"> a. Considered whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse. b. Considered whether the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or was motivated or otherwise caused by other

	<p>group dynamics at the facility.</p> <p>c. Examined the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;</p> <p>d. Assessed the adequacy of staffing levels in that area during different shifts.</p> <p>e. Assessed whether monitoring technology should be deployed or augmented to supplement supervision by staff.</p> <p>E) A report of the committee's findings includes determinations made and any recommendations for improvement. The committee chair submits the report to the PCM and Warden unless they are part of the committee review. The Warden considers implementing recommendations for improvement or document the reasons for not doing so.</p> <p>The committee is comprised of the Associate Warden, PREA Compliance Manager, Shift Commander, Medical Practitioner, Mental Health Practitioner and OIG Investigator.</p> <p>According to interviews, all were able to describe all areas required to be considered during a review. The PCM will follow-up with concerns from the review.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>115.87 Evidence analyzed:</p> <ol style="list-style-type: none"> 1.The Surveys of Sexual Violence for 2012 through 2023. 2.The PREA policies and PREA standards to ensure compliance. <p>115.87 Data collection.</p> <p>A) The Department collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and a set of definitions.</p> <p>B) The Department aggregates the incident-based sexual abuse data at least annually.</p> <p>C) The incident-based data collected includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.</p> <p>D) The Department maintains, reviews, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p>

	<p>E) The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates. N/A Does not contract for the housing of inmates.</p> <p>F) Upon request, the Department shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.</p> <p>The facility meets compliance with this standard.</p>
--	---

115.88	Data review for corrective action
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>115.88 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The PREA annual reviews from 2019 through 2023. The reviews contain all information required and are posted on the Agency website. 2. The PREA policy and PREA standard to ensure compliance. 3. Interviews with the Director, PREA Coordinator (PC) and the PREA Compliance Manager (PCM). <p>Findings:</p> <p>115.88 Data review for corrective action.</p> <p>A) The Department reviews data collected and aggregated to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas; Taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility, as well as the Department as a whole.</p> <p>B) Such reports 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.</p> <p>C) The agency's report shall be approved by the Director and made readily available to the public through its website.</p> <p>D) The Department may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.</p> <p>According to interviews, the PCM collects sexual abuse and sexual harassment data using a spreadsheet. The PC retains data collected and prepares the annual report. All personally identifiable information (PII) is withheld from the report.</p> <p>The facility meets compliance with this standard.</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.89 Evidence analyzed:</p> <ol style="list-style-type: none"> 1. The department policy 2. The department website 3. Site review observations – record storage 4. Interview with PREA Coordinator (PC) <p>Findings:</p> <p>115.89 Data storage, publication, and destruction.</p> <p>A) The Department ensures that data collected pursuant to are securely retained.</p> <p>B) The Department shall make all aggregated sexual abuse data, from facilities under its direct control, and any facilities it contracts with, readily available to the public at least annually through its website.</p> <p>C) Before making aggregated sexual abuse data publicly available, the Department shall remove all personal identifiers. The website was reviewed to verify that sexual abuse data is publicly made available and does not include any personally identifiable information.</p> <p>D) The Department shall maintain sexual abuse data collected for at least 10 years after the date of the initial collection unless federal, State, or local law requires otherwise.</p> <p>The auditor was able to observe the physical storage and electronic storage of the risk assessments, medical records, and sexual abuse allegation reports. The physical storage was secured under lock and key. Electronic records are password protected with restricted and limited access.</p> <p>Informal conversations with staff verified that records are securely stored and access to electronic information is highly restricted on a need-to-know basis. According to interviews, incident-based and aggregated data are securely retained.</p> <p>The facility meets compliance with this standard.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Documentation reviewed:</p> <ol style="list-style-type: none"> 1. Agency website review of PREA audit reports for all facilities 2. Site review observations 3. Pre-audit questionnaire (PAQ) 4. Issue log 5. Data collection worksheets 6. Notice of Audit (NOA) postings <p>Findings:</p> <p>(A) A review of the agency website verifies that during the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency ensured that each facility operated by the Agency is audited at least once.</p> <p>(B) This is the third year of cycle four. The agency ensures that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.</p> <p>(H) The auditor had full access to, and observed, all areas of the audited facility.</p> <p>(I) The auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>(M) The auditor was permitted to conduct interviews with offenders in a private setting.</p> <p>(N) Offenders were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. NOA signage was provided to the facility in English and Spanish with instructions to post in all housing areas and other locations. Staff understood the process for mailing confidential mail to the auditor. The NOA contained language regarding the confidential nature of any correspondence sent to the auditor. All information included on the NOA was accurate. The auditor did not receive written correspondence from offenders, staff or third party. During the site review, NOA postings were consistently visible in each of the housing units.</p> <p>The facility meets compliance with this standard.</p>
--	--

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documentation reviewed:

	<p>1. Agency website reviewed for final reports</p> <p>Findings:</p> <p>(F) The agency ensures that the auditor’s final reports are published on the agency’s website.</p> <p>The facility meets compliance with this standard.</p>
--	---

Appendix: Provision Findings**115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
--	-----

Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
---	-----

115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Has the agency employed or designated an agency-wide PREA Coordinator?	yes
--	-----

Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
--	-----

Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
--	-----

115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
---	-----

Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
---	-----

115.12 (a) Contracting with other entities for the confinement of inmates

If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
---	----

115.12 (b) Contracting with other entities for the confinement of inmates

Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na
---	----

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

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

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

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

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

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

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

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

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

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

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

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

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

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

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

(f)	
	<div data-bbox="322 185 1273 555"> <p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p> </div> <div data-bbox="1305 185 1353 219">yes</div>