

PREA Facility Audit Report: Final

Name of Facility: Casa Grande Transitional Housing

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 06/27/2021

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: John Katavich	Date of Signature: 06/27/2021

AUDITOR INFORMATION	
Auditor name:	Katavich, John
Email:	John.Katavich@cdcr.ca.gov
Start Date of On-Site Audit:	05/20/2021
End Date of On-Site Audit:	05/21/2021

FACILITY INFORMATION	
Facility name:	Casa Grande Transitional Housing
Facility physical address:	3955 W. Russell Road, Las Vegas, Nevada - 89118
Facility Phone	
Facility mailing address:	

Primary Contact	
Name:	LaShawn Smith
Email Address:	lmillersmith@doc.nv.gov
Telephone Number:	725-216-6031

Warden/Jail Administrator/Sheriff/Director	
Name:	Brian Williams, Sr.
Email Address:	bwilliams@doc.nv.gov
Telephone Number:	725-216-6068

Facility PREA Compliance Manager	
Name:	Lashawn Smith
Email Address:	lmillersmith@doc.nv.gov
Telephone Number:	O: (725) 216-6031

Facility Characteristics	
Designed facility capacity:	400
Current population of facility:	107
Average daily population for the past 12 months:	111
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	19-65 years
Facility security levels/inmate custody levels:	In-house minimum and Community Trustee
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	83
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	61
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	100

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

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

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

AUDIT FINDINGS

Narrative:

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

Casa Grande Transitional Housing (CGTH) is located at 3955 W. Russell Road, Las Vegas, Nevada. CGTH is participating in a Prison Rape Elimination Act (PREA) audit conducted by certified auditors from the California Department of Corrections and Rehabilitation (CDCR). The on-site portion of the audit was conducted at the address stated above during the period of May 20-21, 2021. Following coordination, preparatory work and collaboration with management staff at CGTH, some pre-audit work was completed prior to traveling to the facility for the on-site review portion of the audit.

PRE-AUDIT PHASE

On January 21, 2021, the Nevada Department of Corrections' (NDOC) PREA Coordinator (PC) created an audit on the PREA On-line Audit System (OAS). The audit tool was downloaded into the system on April 1, 2021. On April 1, 2021, photographs of the PREA audit notices, including contact information was posted on the OAS. Notices were posted in areas accessible to offenders, visitors and staff.

Pre-audit section of audit: On April 1, 2021, the State of Nevada PREA Coordinator provided the completed pre-audit questionnaire, including supporting documentation, to the audit team via the OAS. This auditor started compiling pre-audit notes using the compliance tool as a guideline. This auditor reviewed information from the pre-audit questionnaire and from supporting documentation making notes of how the information was or was not in compliance with PREA. Policies and procedures were reviewed for compliance with the PREA. The auditor took notes to follow-up on any questions about policies that were unclear or did not appear to address the standard adequately. Supporting documentation was reviewed for relevance to the standards and notes were taken to request clarification or to verify the accuracy of the information during the on-site tour. This auditor did not receive any letters from any inmate during this audit process.

Prior to the on-site visit, an e-mail was sent to Just Detention International (JDI) to ascertain if there had been any concerns reported to their organization. This auditor received an e-mail from JDI on May 3, 2021, and was informed by JDI that they have not received any correspondence regarding CGTH in the past twelve months. The Rape Crisis Center in Las Vegas Nevada was also contacted to find out if there had been any allegations or complaints reported to them relative to CGTH. The Rape Crisis Center Staff stated that they had a positive working relationship with CGTH and had not received any contact from inmates at that facility.

ON-SITE PHASE

On May 20, 2021, the audit team comprised of Ms. N. Hardy, certified auditor and I arrived at CGTH. The audit team met with the Facility Manager, the Facility Lieutenant, the Assistant PREA Compliance Manager, the Nevada PREA Coordinator and several support staff for greetings, introductions and information sharing. The meeting took place in a class room which served as a home base for audit preparation and organization.

Upon arrival at CGTH, the audit team requested and received a roster of all of the staff employed at CGTH including the names of the employees assigned in the management and specialized staff positions that might be interviewed during the on-site portion of the audit. Also on this date, the audit team received a roster of all offenders at the facility with identification numbers and assigned bed numbers, sorted by housing unit. The auditor also requested and received a list of offenders classified into any of the following specialized categories:

Disabled Inmates

Limited English Proficient Inmates

Transgender & Intersex Inmates

Gay & Bisexual Inmates

Inmates who Reported Sexual Abuse

Inmates who Disclosed Sexual Victimization During Risk Screening

The audit team also received a list of all custody staff scheduled to work on the days of the on-site review, sorted by shift. A majority of the CGTH custody staff work 12 hour shifts. The auditor explained that these rosters were required for the audit team to select random custody staff and offenders for interviews. The audit team selected the names of random and specialized staff, as well as random offenders and offenders who had been classified in special categories who would be interviewed. These lists were provided to the PCM so that the individuals could report to the offices that the interviews were taking place.

On-site Review: The audit team conducted a thorough site review of the facility. The audit team was provided a map of the facility. CGTH is comprised of 3 buildings, 2 of which are standalone housing units. Each of the housing units have two floors. Each floor has a central foyer with staff offices and two housing unit wings. Each housing wing is comprised of twelve four person dorms and a common restroom/shower area. As the tours moved through the facility, the teams would make a notation on the map indicating that that area had been visited. Additionally staffing levels were observed to insure that there was adequate security coverage and the inmates could not move around the facility unsupervised. There are cameras located throughout the area, however they were not operating at the time of the audit.

The facility houses Community Trustees. Community trustees travel in the community daily for work and programs. Their movements are approved and monitored, but not immediately supervised by NDOC staff. Minimum custody inmates work on-site and are not allowed to leave unless escorted by NDOC staff

During the tour, we asked impromptu questions of staff and inmates. The audit team also noted the placement and coverage of surveillance cameras, identified potential blind spots, inspected bathrooms, showers and strip search areas to identify potential cross gender viewing concerns. The team also noted the placement of PREA information posters in offender housing areas and placement of the PREA audit notice provided to the facility. Housing unit logs were reviewed as well as other on-site documentation that would be relevant to demonstrating compliance with the PREA Standards.

PREA Management Interviews: The audit team members split up the interviews of the Facility Manager, PREA Coordinator, Director of the Nevada Department of Corrections, Contract Administrator and PCM. The auditors worked with facility staff to schedule a time for each of these interviews; audit team members were escorted to the office of the respective manager and conducted the interviews using the applicable interview protocols and recorded the responses by hand. Some of the interviews were conducted via telephone.

Specialized Staff Interviews: Using the list of specialized staff received from the PREA Compliance Manager, the audit team members utilized the conference room or private offices to conduct confidential interviews. Because of the small number of staff, all staff were asked the random staff questions and additional questions related to their special skill set.

The audit team identified specialized staff to be interviewed. Interviews included the following:

Medical and Mental Health

Incident Review Team Members

Staff who Conduct Intake Screening

Case Workers

Investigations and Intelligence Staff (facility level investigations)

Sexual Assault Nurse Examiner

Human Resources

Person Responsible for Monitoring Retaliation

Higher Level Supervisors

First Responders

Administrative Segregation Supervisors

Training Director

Grievance Coordinator

The audit team was not able to interview any volunteers for this audit. Because of COVID restrictions, no volunteers have been allowed into the facility since March 2020.

During interviews with investigative staff, the team learned that offender grievances against staff are forwarded to the Facility Manager. If the grievance alleges PREA, the information is entered into Nevada Offender Tracking Information System (NOTIS) and forwarded to the Inspector General. The IG's office reviews the grievance to determine if it meets the prima facie of PREA, or if the grievance is about a different issue. If the grievance is a PREA, the IG's Office then assigns it to an NDOC Investigator. The IG can assign it to a local investigator if the case is not criminal in nature and does not involve staff. The assigned investigator then investigates the allegation and completes a report. The members of the audit team interviewed one of the investigators for the IG and one of the local investigators about this process. The audit team also questioned designated staff about the process for logging and tracking offender grievances and assigning cases. There were no grievances received that made PREA allegations during this audit period.

The Training Manager was interviewed and he explained how he tracked and logged all of the training that staff, volunteers and contractors receive. Full time employees are scheduled for one week of training each year. The employee is pulled off post during their training week. The Training Manager is also responsible to insure that all volunteers and contractors have access to the training.

The Intake staff were interviewed and asked to explain the intake process for the offenders. The intake process happens the day of arrival includes PREA and Facility Orientation, PREA Risk Assessment and initial housing. If the inmate arrives after normal business hours, the PREA education and screening are done the next day.

Where the circumstances dictate, the interviewer would ask to review documentation, logs, computerized tracking, or other material necessary to make a determination of compliance with the standards. Copies were made of relevant documents to demonstrate proof of practice.

Random Staff Interviews: Due to the small number of staff employed at the facility, the audit team interviewed every staff who was on site as random staff. The random interviews included line staff, supervisory staff, managers and non-custody staff. The interviews were conducted in the privacy of a classroom or private offices. The auditors introduced themselves, communicated the advisory statements to the staff, proceeded to ask the line of questions from the interview protocols for random staff and recorded the answers by hand. Audit team members asked for clarifications when needed to ensure the responses were clear enough to make a determination of compliance with applicable standards. A total of 16 random staff interviews were conducted.

Random Offender Interviews: The auditor determined that at least one offender from each housing unit would be interviewed. One audit team member was assigned responsibility for the various offender interviews. Audit team members used the alphabetical roster of offenders to randomly select offenders from each housing unit. The audit team members completed the interviews in private offices. During the interviews the audit team member introduced themselves, communicated the standard advisory statements to the offender before proceeding with the standard line of questions from the random offender interview protocols and recorded the offender answers by hand using the designated form. Clarification was requested, as needed to ensure the offender's responses were clear. A total of 15 offenders were interviewed as part of the random offender interviews.

PREA-Interest Offender Interviews: One audit team member was assigned responsibility for interviewing specific categories of offenders identified for interviews based upon their relevance to specific PREA standards. These categories are:

- Disabled Inmates (none)

- Youthful Inmates (none)

- Limited English Proficient Inmates (none)

- Transgender and Intersex Inmates (none)

- Gay & Bisexual Inmates (none)

- Inmates in Segregated Housing for Risk of Sexual Victimization (none)

- Inmates who Reported Sexual Abuse (none)

- Inmates who Disclosed Sexual Victimization during Risk Screening (five interviewees)

- Inmates who wrote letters (none)

Because of the small population and the nature of the Transitional Housing Center, there were only five inmates that fit into any of the specialized inmate categories. All five of these inmates were interviewed. The interviews were conducted in a private office. The auditor introduced themselves, communicated the standard advisory statement and asked the line of questions in the respective interview protocols. These inmates were also asked the same interview questions as the random inmate interviewees. During these interviews, the audit team member based the line of questioning on the interview protocols and recorded responses by hand.

Document Reviews: The document review process was completed by both of the auditors. One auditor made a list of random staff names and both of the auditors reviewed all training, personnel, contractor and volunteer records for these staff members. 16 personnel files were reviewed. A list of offender names was generated using the list of selected and randomly interviewed inmates. These inmate's files were reviewed by the audit team. A total of 15 inmate files were reviewed, including the records maintained through the offender intake process, classification records and relevant medical documentation. The audit team was provided copies of the documents to support the audit findings. There were no allegations filed during this audit period, therefore there were no investigation files to review.

A list of approved volunteers and contractors was provided with the pre-audit materials. Because of COVID, there have not been any volunteers and only one contractor allowed into the facility during the pandemic. Even though there were no volunteers during the audit period, documents were requested and reviewed to check with compliance with training and background checks for seventeen contractors and volunteers.

All of the relevant information from the training, personnel and offender files was transferred to the PREA Audit Documentation Review Tracking Sheets.

Because there were no allegations during this audit period, there was none of the following supporting documentation:

Investigation files

Notice to the inmate about the conclusion of the investigation

Retaliation Monitoring

PREA Committee Review

Medical/Mental Health referrals

Disciplinary actions

Throughout the on-site review, the team had discussion about what was being observed and reviewed any discrepancies that were being identified. The team members would seek clarification, when discrepancies were identified to ensure that we were not missing pertinent information. The audit team held a close-out discussion with the Facility Manager, PREA Coordinator, PCM and other administrative staff on May 21, 2021. During this close-out discussion, the facility staff and the PREA Coordinator were provided with an overview of what had been identified as areas of concern.

POST-AUDIT PHASE

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

The auditor and PREA Compliance Manager agreed that any documents not received during the pre-audit phase or site review would be requested via e-mail and provided by the PREA Compliance Manager and placed on the OAS.

Prior to the completion of this report all of the discrepancies noted during the on-site portion of the audit were addressed and adequate documentation was provided. None of the compliance issues observed by the audit team at CGTH were systematic issues requiring, new procedures, training, a period of month to month monitoring and proof of practice. Because of the facilities willingness to make the necessary minor corrections there was no interim report or corrective action needed.

AUDIT FINDINGS

Facility Characteristics:

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

Casa Grande Transitional Housing (CGTH) is located at 3955 W. Russell Road, Las Vegas, Nevada. The facility is located in downtown Las Vegas in a light industrial area. In 1979, the State Legislature passed a law authorizing the establishment of a Restitution Center Program for non-violent, non-sex offender inmates. The Casa Grande Transitional Housing center has been operating since December 2005. The dormitory-style facility was built to house non-violent, non-sex crime inmates who are within 18 months of their parole eligibility date. The main purpose of Casa Grande was, and still is, to allow these "residents" the opportunity to seek work and secure permanent housing prior to reintegrating into society. Since its inception, Casa Grande has expanded its programs to include parolees, probation violators, and ex-offenders.

CGTH is three buildings located on approximately 5 acres of land. The main building is shared with the Nevada Department of Corrections Southern Headquarters Office. This building includes classrooms, the kitchen and dining room, medical offices and staff offices. The other two buildings are the housing units. Each of these buildings have two floors. Each floor has a central foyer with staff offices and two housing unit wings. Each housing wing is comprised of twelve four person dorms and a common restroom/shower area. The second floor of Unit 1 is reserved for housing female inmates. There are cameras located throughout the area, however they were not operating at the time of the audit. The facility houses Community Trusties. Community trustees travel in the community daily for work and programs. Their movements are approved and monitored, but not immediately supervised by NDOC staff. Minimum custody inmates work on-site and are not allowed to leave unless escorted by NDOC staff.

Casa Grande Transitional Housing is legislatively approved for 20 Correctional Officers, two Senior Correctional Officers, and one Correctional Manager (Facility Manager). CGTH also has one Correctional Caseworker Specialist III, two Correctional Caseworker Specialist II, an Account Technician and a Maintenance repair specialist III. Under a separate legislative budget there are is Lieutenant, one Senior Correctional Officer and six Correctional Officers approved for the Boot Camp program.

CGTH offers programs in vocational training, educational opportunities, and treatment services. The facility also offers an alternative to jail/prison which provides close supervision for probation violators while allowing them to continue to work in the community and/or complete additional court-mandated service. The courts can utilize this facility as an alternative to jail/prison which provides close supervision of offenders while allowing them to participate in community treatment programs. CGTH also offers a boot camp stepdown program. This is an alternative to incarceration which provides a streamlined transition back into the community by providing assistance with obtaining housing, employment, vocational training, and social services. Due to COVID restrictions none of these programs were operational at the time of this audit.

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). 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.

Number of standards exceeded:	0
Number of standards met:	45
Number of standards not met:	0

The on-site portion of the audit was a consistent paced review of all areas of the institution. Facility staff were very helpful and responsive to the questions and concerns expressed during this portion of the audit. Facility staff were attentive to the needs of the auditors and were extremely hospitable. The audit team thanks the Facility Manager, PREA Compliance Manager, assistant PCM, and the entire staff at Casa Grande Transitional Housing.

Overall, it is evident that Casa Grande Transitional Housing staff have been working towards compliance with the PREA standards. Because of this hard work, the facility is in compliance with all but one of the standards.

Some of the positives observed by the audit team included:

- The PREA Compliance Manager and Facility Manager are extremely knowledgeable and committed to helping eliminate sexual abuse and sexual harassment of offenders at CGTH.
- The management staff have corrected all of the deficiencies identified during the pre-audit and on-site portion of this audit.
- PREA posters were in place in all housing units, and common areas.
- All of the staff have a clear understanding of the policy.
- Supervisory and management staff ensured the audit team had access to staff and offenders for interviewing. Any documentation requested was received promptly.
- There is a positive relationship between the inmates and staff.
- The facility is clean and well maintained.

The following corrections were made, after the site visit and prior to the submission of the final report, to come in compliance with the

PREA standards:

115.13(c)(2) Supervision and Monitoring

The facility cameras were not functioning at the time of the visit. Even though there was adequate staff supervision, the cameras should be repaired. A Department of Public Works schedule of repair was provided to the audit team to show that repairs will be completed by February 2022.

115.17(c)(2) Hiring and Promotion Decisions

During the review of the personnel files one of the files did not contain evidence that NDOC attempted to contact a prior institutional employer for information on substantiated allegations of sexual abuse or if the employee resigned during a sexual abuse investigation. This was corrected and the request for information was sent.

115.51(b) Inmate Reporting

Even though the NDOC has an agreement with New Mexico Department of corrections for outside agency reporting, some of the staff at CGTH were not aware of where the forms were located. Prior to the completion of this report all staff were trained on where the forms are maintained and how inmates can obtain them.

115.64(3) Staff First Responder Duties

During the interview process some of the staff indicated that they would prevent to victim from destroying evidence by toileting, drinking, washing, etc. During the interview, the NDOC Policy and the PREA standard was explained to the staff. Training was provided to all staff on how to request that the alleged victim not take any action that may destroy usable physical evidence that may be on their persons.

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 453 235">Auditor Discussion</p> <p data-bbox="242 271 1490 629">Nevada Department of Corrections (NDOC) Administrative Regulation (AR) 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.01, states "The Department has a Zero Tolerance policy for any form of sexual misconduct to include staff/contractor/or volunteer-on-inmate or inmate-on-inmate sexual harassment, sexual assault, sexual abusive contact and consensual sex." Casa Grande Transitional Housing (CGTH) has an additional policy (Operational Procedure 421) that reiterates AR 421. Section 421.01, on page 3, this policy states that CGTH follows the Department's Zero Tolerance policy for any form of sexual misconduct to include staff/contractor/or volunteer-on-inmate or inmate-on-inmate sexual harassment, sexual assault, sexual abusive contact and consensual sex. Any staff member/contractor/volunteer who engages in, fails to report, or knowingly condones sexual harassment or sexual contact with or between inmates shall be subject to disciplinary action and may be subject to criminal prosecution. CGTH shall take a proactive approach regarding the prevention, detection, response and punishment of any type of sexual contact through education and training of staff, inmates, and the public.</p> <p data-bbox="242 723 1490 813">Administrative Regulation 421 defines sexual abuse and sexual harassment. The policy explains what behaviors are violation of the PREA policy. The zero tolerance policy includes the statement that disciplinary action will be taken, including possible prosecution on any staff/volunteer or contractor who violates the PREA policy.</p> <p data-bbox="242 902 1490 1160">NDOC's PREA Coordinator is Deborah Striplin. Ms. Striplin was assigned on January 1, 2019, as the PREA Coordinator for the Nevada Department of Corrections. During this PREA Audit, Ms. Striplin was readily available to assist the audit team and CGTH through the audit process. Prior to being appointed as the PREA Coordinator, Ms. Striplin assisted the Inspector General for the State of Nevada in developing, implementing, and overseeing the NDOC's efforts to comply with the PREA standards. During the interactions with Ms. Striplin, it is apparent that she is committed to ensuring that the State of Nevada is compliant with the PREA standards. She is actively involved with all of the facilities in Nevada, overseeing their PREA compliance efforts. The Director of Corrections has delegated Ms. Striplin the authority to implement agency wide policies, procedures and practices. She reports directly to the State Inspector General.</p> <p data-bbox="242 1249 1490 1507">CGTH's PREA Compliance Manager (PCM) is LaShawn Smith, Correctional Case Supervisor III. CCSII Smith has been assigned as the PREA compliance Manager at CGTH for over three years. CCSIII Smith reports directly to the Deputy Director and works in coordination with the Facility Manager. Do to medical concerns, Ms. Smith was interviewed telephonically. According to CCSIII Smith, she does feel that he has sufficient time to coordinate the facility's efforts to comply with PREA. Ms. Smith was not available at the time of the on-site audit due to medical issues. The Facility back-up PREA Compliance Manager, Correctional Caseworker Ms. Payton, assisted the audit team during the on-site portion of the audit. The Facility Manager and his administrative staff appear committed to insuring CGTH's commitment to preventing, detecting, responding to and reporting sexual abuse of inmates.</p>

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="231 197 1508 257">Auditor Discussion</p> <p data-bbox="231 257 1508 313">CGTH 115.12</p> <p data-bbox="231 313 1508 470">The last contract that Nevada Department of Corrections (NDOC) entered to house inmates was with CoreCivics to house 200 NDOC inmates in October 2017. In November 2020, all NDOC inmates were transferred out of the CoreCivics facility and returned to the State of Nevada. According to the PREA Coordinator, there are no future plans to enter any contracts with any other entity to house inmates for the State of Nevada.</p> <p data-bbox="231 470 1508 694">Further questions were asked to see if the NDOC uses contracted facilities to house inmates for substance abuse programs or "half way houses" for paroled inmates and the auditor was told that NDOC does not use outside contractors for these types of programs. The NDOC PREA Coordinator stated that she would be involved if a contract were initiated with an external entity for this function. She would insure that language in the contract is consistent with the requirements of PREA.</p> <p data-bbox="231 694 1508 902">During the interview with the Agency Contract Administrator, he stated that if a new contract were to be negotiated he would check to see if the company had any recent audits posted on line. He said he would look at their training history, their facility PREA history, and their PREA standard compliance. He stated that he would work with the contract negotiation team to make sure that the proper PREA compliance language was in the contract.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 235">Auditor Discussion</p> <p data-bbox="240 271 1484 360">Administrative Regulation 326, Posting of Shifts, requires that at least once a year the PREA Coordinator shall assess, determine, and document whether adjustments are needed to the staffing plan and or video monitoring system. This auditor was provided a copy of the Casa Grande Transitional Housing Staffing Plan that was signed on September 23, 2020.</p> <p data-bbox="240 371 1461 432">According to the Staffing Plan, Nevada Department of Corrections' PREA Coordinator initiated a review and discussion of the staffing patterns for CGTH with the Director of Corrections. The staffing plan considers:</p> <p data-bbox="240 461 807 488">Generally accepted detention and correctional practices;</p> <p data-bbox="240 517 671 544">Any Judicial findings of inadequacy (none);</p> <p data-bbox="240 573 963 600">Any findings of inadequacies from a federal investigation agency (none);</p> <p data-bbox="240 629 1035 656">Any findings of inadequacies from an internal or external oversight body (none);</p> <p data-bbox="240 685 695 712">All components of the facilities physical plant;</p> <p data-bbox="240 741 663 768">The composition of the inmate population;</p> <p data-bbox="240 797 719 824">The number and placement of supervisory staff;</p> <p data-bbox="240 853 759 880">Institutional programs occurring on a particular shift;</p> <p data-bbox="240 909 799 936">Any applicable state or local laws or regulations (none);</p> <p data-bbox="240 965 1019 992">The prevalence of substantiated or unsubstantiated incidents of sexual abuse.</p> <p data-bbox="240 1088 1493 1216">Casa Grande Transitional Housing is legislatively approved for 20 Correctional Officers, two Senior Correctional Officers, and one Correctional Manager (Facility Manager). CGTH also has one Correctional Caseworker Specialist III, two Correctional Caseworker Specialist II, an Account Technician and a Maintenance repair specialist III. Under a separate legislative budget there are is Lieutenant, one Senior Correctional Officer and six Correctional Officers approved for the Boot Camp program.</p> <p data-bbox="240 1227 1453 1317">Every staff member is qualified to supervise the inmate population. According to the Facility Manager, there was one vacancy for a Senior Correctional Officer at the time of the onsite portion of the audit. The hiring package for that position has already been submitted. The minimum staffing for the facility is three officers. Overtime is hired to fill any vacancies.</p> <p data-bbox="240 1328 1469 1518">Operational Procedure 326, Posting of Shifts/Overtime, defines two separate levels of staffing. Minimum Staffing is the number of staff required to for normal operation of the facility. There are no modifications to program during this staffing level. Emergency Operations is when there is just enough staff to fill the minimum number of posts to maintain the security of the facility. Whenever a modification to program is made, due to lack of staff, an incident report is created in Nevada Offender Tracking Information System (NOTIS). According to a memorandum signed by the Facility Manager, CGTH has not had fewer staff then the minimum level during this audit period.</p> <p data-bbox="240 1603 1485 1865">CGTH is three buildings located on approximately 5 acres of land. The main building is shared with the Nevada Department of Corrections Southern Headquarters Office. This building includes classrooms, the kitchen and dining room, medical offices and staff offices. The other two buildings are the housing units. Each of these buildings have two floors. Each floor has a central foyer with staff offices and two housing unit wings. Each housing wing is comprised of twelve four person dorms and a common restroom/shower area. There are cameras located throughout the area, however they were not operating at the time of the audit. The facility houses Community Trustees. Community trustees travel in the community daily for work and programs. Their movements are approved and monitored, but not immediately supervised by NDOC staff. Minimum custody inmates work on-site and are not allowed to leave unless escorted by NDOC staff.</p> <p data-bbox="240 1951 1493 2152">During the interview with the Facility Manager, he explained how the staffing plan is established, adjusted and enforced. The staffing plan is approved by the Nevada Legislature as part of the budget process. The plan is based on best practices, and the American Correctional Association's and National Institute of Correction's staffing models. Each year the plan is reviewed to see if adjustments need to be made based on mission changes, PREA and/or other serious incidents, program changes, legal challenges or legislative changes. According to the 2019 staffing plan, there are no findings of inadequacies by judicial ruling, Federal Investigative Agencies, or internal or external oversight bodies. There are no state, or local laws</p>

that dictate staffing requirements. The staffing plan contains an analysis of the inmate population by ethnicity and security threat group.

Operational Procedure 400.03, General Security Supervision, requires that supervisors make unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The policy also prohibits staff from alerting other staff members that the supervisory rounds are occurring. When supervisors make these rounds they are required to document them in the housing unit log book and post an entry in NOTIS. The Pre-Audit materials contained NOTIS entries demonstrating compliance with this standard. During the tour of the facility, the auditors were informed that the staff in the control station enter the unannounced PREA rounds in NOTIS for the supervisor. A review of the NOTIS entries indicates that supervisor's rounds are being documented. Three supervisors were interviewed and they stated that they do not let staff know when they are visiting the facility during none business hours. There are a minimum of three staff on duty at all times. During the night time hours, the three staff are in constant communication with each other. At any given time all three staff know where each other are.

During the tour, the audit team noted that the camera system was not working. This was discussed with the Facility Management. The cameras were supposed to be repaired in 2020, however due to COVID, the repair funds were redirected for emergency services. The repairs are scheduled to be conducted this year. According to the project schedule provided by the Department of Public Works, the cameras will be repaired by February 11, 2022.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 271 1485 365">Nevada Department of Corrections (NDOC) requires that any juvenile inmate housed at an adult correctional facility shall be housed in a location out of sight, sound and physical contact of the adult inmates. The youthful inmates are not to be placed in isolation for this purpose.</p> <p data-bbox="244 454 1485 512">The Nevada Department of Corrections houses all inmates under the age of 18 at Lovelock Correctional Center. There were no juveniles housed at CGTH at the time of the audit.</p>

115.15	Limits to cross-gender viewing and searches
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1469 398">Operational Procedure 422, Searches and Seizure Procedures, page 3, section 422.03, states that The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners. All cross-gender strip searches and cross-gender visual body cavity searches will be documented in NOTIS.</p> <p data-bbox="240 488 1469 645">According to the staff and inmates interviewed, female staff have not conducted any strip searches on male inmates at CGTH. Staff stated that they would only do a strip search of a cross gender inmate if it was an extreme emergency. These staff knew that in the event that they had to strip search a cross gender inmate, they would document it. A memorandum authored by the Facility Manager, dated May 7, 2021, states that there have not been any cross gender unclothed body searches conducted at CGTH in the past year.</p> <p data-bbox="240 734 1469 860">Operational Procedure 422, Search and Seizure Standards, section 422.03 states that CGTH shall not permit cross-gender pat down searches of female inmates, absent exigent circumstances. Any cross-gender pat search of a female inmate must be documented in NOTIS. According to the Facility Manager, there have not been any pat searches of female inmates by male staff during this audit period.</p> <p data-bbox="240 949 1469 1142">OP 422, Search and Seizure Standards, section 422.03, states The facility will enable inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to the routine performance of their job duties. Inmates are required to change clothes in the restroom area. There are doors on the toilet stalls and curtains on all of the functioning showers. When asked, all of the inmates stated that they are allowed to toilet, dress and shower without staff of the opposite gender watching them.</p> <p data-bbox="240 1232 1469 1357">If an inmate is suspected of trafficking contraband in from the community, they may be subject to strip search. The strip searches are conducted in the staff office restroom, with the door closed. Only staff of the same gender will strip search an inmate. Even though the video monitoring system was not functioning at the time of the tour, the auditors did not see any cameras in the inmate restrooms or where inmates may be strip searched.</p> <p data-bbox="240 1447 1469 1671">Operational Procedure 422, section 422.03, Staff of the opposite gender are required to be announced each and every time when entering a housing unit. The staff member who is entering the housing unit is required to make this announcement. According to an e-mail date July 17, 2020, directed to All Staff, the announcements are made very loudly as the staff walk into the housing unit and then documented in NOTIS. A review of NOTIS confirmed this documentation. During the inmate interviews, every inmate stated that female staff's presence is announced every time that they enter the housing unit. During the tour the announcements were always made in our presence. All staff stated that the announcements are routine and expected.</p> <p data-bbox="240 1760 1469 1886">OP 422, Search and Seizure Standards, section 422.03, page 3, restricts staff from searching inmates for the sole purpose of determining their genital statues. Information on an offender's genital statues is to be obtained during routine conversation or a review of medical records. All of the staff interviewed stated that they do not search inmates to determine their genitalia statues. None of the inmates claimed to have been strip searched for this reason.</p> <p data-bbox="240 1975 1469 2132">The training that is provided to custody staff by NDOC is very thorough and comprehensive on searching methods. The training power point demonstrates, to staff, how to properly conduct a pat down search of transgender and intersex inmates. All staff are required to demonstrate proper search technics to the instructor prior to passing the class. The training is provided annually during the Defensive Tactics Class. A review of the training files showed that all of the custody staff have attended this training.</p>

115.16	Inmates with disabilities and inmates who are limited English proficient
	<p data-bbox="242 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 273 1489 432">Administrative Regulation 421, Prison Rape Elimination Act, section 421.07, states that all inmates will be afforded PREA education, including inmates who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The PREA resource Manual requires that the facility utilize the necessary resources that are available to assist inmates who have disabilities to insure those inmates have equal access to participate in or benefit from every aspect of the prevention, detection and response to sexual abuse and sexual harassment.</p> <p data-bbox="242 521 1489 680">Operational Procedure 421, Prison Rape Elimination Act, section 421.07, states that CGTH will provide the inmate education in formats accessible to all inmates, including those inmates who are limited English proficient, deaf, visually impaired or otherwise disabled as well as to those who have limited reading skills. If it appears that an inmate is unable to comprehend the information being provided, staff will utilize effective communication (e.g. using simple language, requesting feedback confirming comprehension) to convey the PREA information to the inmate.</p> <p data-bbox="242 770 1461 965">The inmates receive the PREA information in the Prison Rape Elimination Act Education and Information Sheet when they first arrive at the facility. The PREA information sheets are available in both English and Spanish. All inmates are also required to watch a 15 minute video on NDOC's PREA policy. The video and handout are available in both English, and Spanish. The video does have closed caption for the hearing impaired. The policy is also available in braille format. The PCM stated that is able to obtain the PREA policy in braille if a blind inmate were to be housed at CGTH. Inmates are required to sign acknowledgement of receiving the information.</p> <p data-bbox="242 1055 1238 1081">The PREA information posters and the Rape Crisis Center posters are in both English and Spanish.</p> <p data-bbox="242 1171 1493 1361">Administrative Regulation 658, Reasonable Accommodations, section 658.07, states that the ADA Coordinator, with the assistance on the Medical Department, will ensure that hearing and vision impaired inmates have access to auxiliary aids when required for effective communication in assessing and participating in programs and services, including PREA reporting and follow-up. Since all inmates arriving at CGTH are transferred from a different facility, their medical appliances are transferred with them. In the event that an inmate needs a hearing or vision assistive device, the medical department from either HDSP (men) of FMWCC (women) will be contacted and an appointment for an assessment will be made.</p> <p data-bbox="242 1451 1489 1576">NDOC has contracted with CTS Language Link to provide both spoken interpretation and written translation services. Information on how to access those services can be found in the Supervisor's office, and the caseworker's offices. The audit team was provided copies of the contract with CTS Language Link. At the time of the audit there were no inmates housed at CGTH that did not speak fluent English.</p> <p data-bbox="242 1666 1461 1756">NDOC PREA Manual states that staff shall not use and/or rely upon inmate interpreters, inmate readers, or other types of inmate assistants. CGTH does not have any staff that are certified interpreters. All of the staff knew the limit of utilizing an inmate interpreter. A majority of the staff were aware of and knew how to use the language link.</p>

115.17	Hiring and promotion decisions
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1493 398">Nevada Department of Corrections Prison Rape Elimination Act Manual, page 4, mandates that the Department shall not hire or promote an individual to a position that may have contact with offenders who meets any of the three criteria listed in section 115.17 (a). NDOC requires that every applicant/volunteer/contractor who may have contact with an inmate disclose the following information prior to entering into any NDOC facility:</p> <p data-bbox="240 434 1493 560">Have they engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, or have they been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse, or have they been civilly or administratively adjudicated to have engaged in the activity described in any part of this question.</p> <p data-bbox="240 595 1493 680">Have they been adjudicated as having engaged in any type of inmate Sexual Harassment, which includes as a staff member, volunteer, contractor, or as any type of service provider coming in contact with an inmate in the facilities mentioned in question 1.</p> <p data-bbox="240 716 1493 873">Answering affirmative to either of these questions can result in the denial of employment or, in the case of contractors and volunteers, denial of access into the facility. Providing false information is grounds for dismissal. Staff answer these questions during the initial interview process, and during any promotional interview. A review of the personnel and volunteer's files demonstrated compliance with this policy. Every file reviewed had a copy of these questions answered by the employee.</p> <p data-bbox="240 958 1493 1120">NDOC Administrative Regulation 300 requires that NDOC complete a background check before hiring or promoting any staff member. NDOC uses National Crime Information Center (NCIC) and the Nevada Department of Public Safety, Records, communications and Compliance Division to complete background clearances. Sixteen employee's personnel files were reviewed. All sixteen of the personnel files showed that a background check had been completed upon initial hiring or during the last promotion.</p> <p data-bbox="240 1205 1493 1469">Human Resources must make its best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Six of the sixteen personnel files reviewed disclosed prior employment in an institutional setting. Three of these employees were hired after the implementation of the PREA standards in 2013. Of these three only two had record of a PREA information request being sent to the previous agency. This oversight was corrected prior to the completion of this report. During the interview with the head of personnel, she explained the hiring process and how back ground checks are conducted. She explained what her staff would do if they discovered that an employee was dishonest during the application and hiring process.</p> <p data-bbox="240 1554 1493 1818">The office of the Inspector General is required to do a biannual audit of random HR files for employees of the Department who were hired in the previous six months to ensure compliance with the required background check. According to Administrative Regulation 4521.04, NDOC conducts background checks on all current employees every three years. The month that the employee was hired determines which month the follow-up background check will be conducted. The last cycle was conducted in spring of 2020. According to the tracking list provided with the pre-audit materials, all CGTH employees have had their background checks completed upon initial hiring and within the past five years (most within 2 years). All sixteen of the personnel files reviewed showed that a background check completed by the Office of the Inspector General within the past three years.</p> <p data-bbox="240 1966 1493 2128">NDOC policy requires Human Resources to disclose any substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom the employee has applied for work. CGTH did not have any occurrences of requests from other agencies since the last audit. The head of personnel stated that she would provide any information on prior sexual abuse or sexual harassment of an inmate if she received an inquiry from another institution about a previous employee.</p>

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

CGTH was able to provide the documents that all contractors and volunteers must fill out and sign prior to being allowed to have contact with inmates. Additionally they are required to disclose any prior sexual misconduct convictions, administrative or civil actions, annually during their PREA training. Policy requires the volunteer or contractor to disclose any sexual misconduct. Failure to do so would result in restriction from grounds. Three examples of the volunteer background clearance were provided with the pre-audit materials. A list of all of the volunteers and contract staff approved to enter NDOC facilities was provided to this auditor. Due to COVID-19 protocols, contractors and volunteers have not been allowed to visit the facility over the past year. The one contractor file and seventeen volunteer files were reviewed by the audit team.

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

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 271 1490 432">The NDOC PREA Manual requires that when the Department is designing or acquiring any new facility or planning any major expansion, acquisition or modification, that the Director, Deputy Director(s) and designee consider the effect of the design, acquisition, expansion or modification on the Department's ability to protect inmates from sexual abuse. Additionally the manual requires the Department when installing new electronic monitoring systems, to consider how the technology will enhance the Department's ability to protect inmates from sexual abuse.</p> <p data-bbox="244 521 1474 647">According to the PCM, CGTH has not had any upgrades completed since the last audit. The video monitoring system is currently no-operational. It was scheduled to be repaired in 2020, however due to COVID pandemic, the funds were not available. The funds are now available and the repair request is being scheduled though Department of Public Works. The repairs are scheduled to be completed by February, 2022.</p>

115.21	Evidence protocol and forensic medical examinations
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1485 432">Administrative Regulation 421, section 421.12, states that NDOC office of the Inspector General, will investigate all allegations of staff on inmate sexual abuse and sexual harassment and all inmate on inmate sexual abuse. Operational Procedure 421.12, Prison Rape Elimination Act, address the protocols for collection of evidence for use in an administrative proceedings and criminal prosecution. The policies include discovery, handling, delivery, retrieval, logging, storage, retention and destruction of all evidence.</p> <p data-bbox="242 519 1485 714">NDOC policies mirror the National Protocol for Sexual Assault Medical Forensic Examinations as set forth by the Office of Violence Against Women. CGTH uses a coordinated team approach to respond to reports of sexual assault. They provide access to a victim advocate, and provide immediate medical care through the local medical center. All allegations are investigated. CGTH utilizes a qualified SAFE/SANE nurse from the community to conduct medical exams and the process is handled, keeping the victims confidentiality in mind. The policy states that the inmate will be provided medical and emotional support at no cost to the inmate.</p> <p data-bbox="242 801 1485 996">Operational Procedure 421, Prison Rape Elimination Act, sections 421.12 and 421.13, provides staff with guidance on to transport an inmate that is in need of a forensic exam. The procedure explains the evidence collection process, prior to the exam, the time frames for conducting the exam and the location to transport the inmate victim to. The facility utilizes a check list (form B2093 and C2094) to make sure that all procedures are followed during the initial PREA response. These check lists cover evidence collection, crime scene preservation, medical referral and transfer to a medical exam. No inmates have required a forensic exam during this audit period.</p> <p data-bbox="242 1084 1485 1312">NDOC and CGTH utilize a local hospital's Sexual Assault Nurse Examiner (SANE) to conduct the forensic exams. Currently NDOC has an agreement with University Medical Center in Las Vegas Nevada to conduct forensic exams. The audit team contacted the SAFE/SANE Coordinator with UMC and confirmed that they conduct the forensic exams for CGTH. If an inmate is taken to UMC for a SAFE/SANE exam, they report to the emergency room. A SAFE/SANE nurse is called in to perform the exam. If there is no SAFE/SANE nurse available, the physician on duty will perform the exam. The person that the team spoke to stated that all of the certified SAFE/SANE nurses' training follows the National Protocol for Sexual Assault Medical Forensic Examinations as set forth by the Office of Violence Against Women.</p> <p data-bbox="242 1400 1485 1628">CGTH uses the Rape Crisis Center (RCC) in Las Vegas for victim advocacy services. The audit team was provided a copy of the contract however, the Rape Crisis Center has not signed the agreement as of the time of the audit. The victim advocate is still providing emotional support services and schedules ongoing emotional support telephonic meetings with offenders. Telephonic meetings are currently the scope of services due COVID-19. According to the coordinator, they will accompany the offender, if requested, during the exam and investigation process under normal, non-pandemic conditions. NDOC is working with RCC to update the contract. RCC has either staff or volunteers answering the rape hotline 24 hours a day, seven days a week. All of the volunteers are required to take a 50 hour training course on crisis intervention.</p> <p data-bbox="242 1715 1485 1843">During the interviews with the investigators and the PCM they stated that inmates are offered a victim advocate in the event that they are going to have a forensic exam. The investigators also stated that they would let the victim advocate accompany the victim inmate during the investigation interview if the inmate requests it. They had not had any inmates request a victim advocate during the interview in the past.</p>

115.22	<p>Policies to ensure referrals of allegations for investigations</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Administrative Regulation 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.12, states “NDOC Office of the Inspector General will investigate all allegations of staff on inmate sexual abuse, sexual harassment and inmate on inmate sexual abuse.” Additionally the AR states that all substantiated criminal cases shall be referred to the applicable prosecutorial authority for review of prosecution. This information is on the NDOC website. AR 457, Investigations, states that all incidents shall be reported to the IG per the requirements of AR 332. The IG or designee shall be immediately notified of PREA related or serious incidents involving suspected criminal activity by inmates, staff, or outside parties; or serious violations of Department policy.</p> <p>CGTH Operational Procedure 421, Prison Rape Elimination Act, section 421.21, requires that all allegations of sexual abuse and sexual harassment will be investigated by the Inspector General. It is the responsibility of every employee, regardless of assignment or class, to report Sexual assault/abuse/harassment according with PREA Standard 115.22.</p> <p>This auditor spoke with the Inspector General for the NDOC. He confirmed that it is the IG Office’s responsibility to investigate PREA allegations in NDOC. The IG’s office is notified via the Nevada Offender Tracking Information System (NOTIS), the electronic incident notice system used by NDOC. In emergency cases they are notified via telephone. Once the IG’s office receives the notice, they will assign an investigator to the case. At the conclusion of the investigation, if it appears that a felony has taken place, the IG will refer the case to the Attorney General. The Nevada Department of Corrections Prison Rape Elimination Act Manual provides further direction on the Office of Inspector General’s responsibility while conducting a criminal investigation.</p> <p>This auditor interviewed the Supervising Investigators for the Inspector General’s Office regarding the investigation of PREA allegations. The investigator stated that they (the IG’s Office) investigate all PREA cases that may result in prosecution. If the incident does not appear to be a criminal act, or involve a staff member, the case may be assigned to a supervisor at the institution for fact finding and investigation. One of the institutional investigators was also interviewed. He stated that, if an investigation is not criminal or involve staff, the investigation may be delegated to him through the Facility Manager’s Office.</p> <p>During the audit the PREA incident log was reviewed. There were zero cases reported during the audit period. The last PREA allegation that was reported was in 2019.</p>
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115.31	Employee training
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1453 365">Administrative Regulation 360, Correctional Employee/Officer Basic Training Program, requires that all staff attend the 80 hour new employee training upon employment. Included in this training is PREA training. The training syllabus was provided with the pre-audit materials. The training includes the following:</p> <ul data-bbox="242 396 916 940" style="list-style-type: none"> <li data-bbox="242 396 464 425">Zero Tolerance Policy <li data-bbox="242 454 863 483">How to report, detect, prevent and respond to such allegations <li data-bbox="242 512 798 542">Inmate's right to be free from sexual abuse/harassment <li data-bbox="242 571 877 600">Inmate's right to be free from retaliation from reporting incidents <li data-bbox="242 629 871 658">The dynamics of sexual abuse and harassment in confinement <li data-bbox="242 687 879 716">The common reactions of sexual abuse and harassment victims <li data-bbox="242 745 914 775">How to detect and respond to signs of threatened and actual abuse <li data-bbox="242 804 777 833">How to avoid inappropriate relationships with inmates <li data-bbox="242 862 903 891">How to communicate effectively and professionally with the LGBTI <li data-bbox="242 920 884 949">How to comply with relevant laws related to mandatory reporting <p data-bbox="242 1028 1461 1122">The policy requires staff to be trained initially in PREA upon employment through the Correctional Employee/Officer Basic Pre-Service Training (PST). After the PST, the training is required every two years. In years which an employee does not receive PREA refresher training, the employee shall receive refresher information on current PREA policies.</p> <p data-bbox="242 1211 1474 1305">Operational Procedure 421, Prison Rape Elimination Act, section 421.05, states that in a staff member transfers from an all-male facility, they will receive PREA training tailored specifically toward female offenders. Completed training will be documented on an On-The-Job training form and placed in the employee's training file.</p> <p data-bbox="242 1395 1477 1554">In 2017, all current employees were to receive training in cross gender/transgender pat down searches. Any employee that is hired after 2017 receives the training in the PST. Additionally this training is provided in the annual Defensive Tactics Course. PREA training for 2019, 2020 and 2021 are computer based training. This is a full PREA training course, including any relevant updates or changes to PREA policies. Participants must pass a quiz to receive credit for the course. A certificate of completion is printed at the completion of these courses.</p> <p data-bbox="242 1644 1490 1836">Training for CGTH is conducted by NDOC Central Office. In an attempt to determine compliance with this standard, the audit team was provided with a printout of all staff that work at CGTH who have received the training for 2017 (pat-down search of transgender inmates), 2019 (current PREA training) and 2020, (refresher PREA training) from the Training Manager. The Training Manager was able to provide the lists of staff who completed the training and staff who had not completed the training. A review 16 of the training files showed that all but one staff attend the required PREA training in 2019, and 2020. Computer generated certificates of completion were provided to the auditor.</p> <p data-bbox="242 1924 1485 2083">All of the staff interviewed were able to explain their role in the PREA process. Every staff knew the zero tolerance policy. They knew that they were mandated to report any PREA allegation to their supervisor and to maintain confidentiality. The staff stated that they would make sure the alleged victim was safe and preserve any crime scene. The general view of the staff that were interviewed was that they would take any allegation serious and would respond accordingly. The staff did not present an air of indifference to the audit team.</p>

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 453 237">Auditor Discussion</p> <p data-bbox="240 271 1474 432">Administrative Regulation 802, Community Volunteer Program, requires that all volunteers and contractual staff shall attend PREA training. The training covers the NDOC zero tolerance policy, and the volunteer/contractor's responsibility under the NDOC's sexual abuse and sexual harassment prevention, detection and response policies and procedures. An acknowledgment of receipt of training is then signed by the volunteer or contractual staff. This training is required prior to having contact with inmates and then every three years after that.</p> <p data-bbox="240 521 1493 683">CGTH has 17 volunteers on their Gatehouse list that actually come into the facility. None of the volunteers have been able to visit the facility within the past year due to COVID-19 precautions. Three examples of the zero tolerance acknowledgment forms were provided with the pre-audit materials. Documentation was provided showing that all seventeen volunteers have received the PREA training. All of them signed acknowledging that they have received and understood the PREA training. All of the documents were signed by the volunteer within the past 24 months.</p> <p data-bbox="240 772 1465 831">One contractor currently is able to provide services to the inmate population. The facility provided proof that the contractor attended PREA training.</p> <p data-bbox="240 920 1497 1010">During the interview with the contractor, he was able to explain the NDOC zero tolerance policy. He knew his responsibility to report sexual abuse/sexual harassment and he was able to adequately describe what he would do if an inmate disclosed to him that they had been sexually abused or harassed.</p> <p data-bbox="240 1099 858 1126">No volunteers were interviewed due to COVID-19 restrictions.</p>

115.33	Inmate education
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1485 566">Administrative Regulation 511, Inmate Orientation Program, requires that inmates receive information on PREA upon arrival. The inmates are provided an orientation handbook and a PREA Information and Education Sheet. This document explains the NDOC zero tolerance policy, the inmate's rights under PREA and how to report a PREA incident. The Information and Education Sheet are available in both English and Spanish. AR 511 requires that when a literacy problem exists, staff will assist an inmate in understanding the material. AR 421 states that inmates are shown the NDOC Comprehensive PREA video within 30 minutes of upon arrival. The inmates then sign a document acknowledging that they watched the video and understand the information. The information that the inmate received the training is input into NOTIS. CGTH OP 504, Reception and Initial Classification Process, section 504.1, reiterates the NDOC policy on educating newly arrived inmates to the facility.</p> <p data-bbox="240 656 1485 846">The Offender Handbook contains the NDOC zero tolerance policy on sexual abuse and sexual harassment, that inmates have a right to be free from sexual abuse/harassment and how to report sexual abuse/harassment. The handbook provides the phone numbers and addresses to the State of Nevada's Inspector General's Office, the Rape Crisis Center in Las Vegas and the New Mexico Department of Correction PREA Unit so that inmates can report to an outside government agency. All of this information is on page 7 and 8. NDOC has a contract in place with CTS Language Link to provide interpretive services for offenders who do not understand English.</p> <p data-bbox="240 936 1453 1066">CGTH has the policy available in written format in both Spanish and English. The video is available in both Spanish and English and includes closed caption for the hearing impaired. CGTH has access to the PREA policy in braille for inmates who are vision impaired. According to the intakes staff who provide the inmates the education, if the inmate is unable to comprehend the information, it is explained to them in detail.</p> <p data-bbox="240 1155 1485 1514">The audit team requested that the intake staff show them through the intake process. When the inmates first arrive they are shown a 15 minute video. This video explains the NDOC zero tolerance policy and how to report a PREA allegation. The inmates are then interviewed and asked the PREA screening questions addressed in standard 115.41. The inmates are also provided the inmate handbook and PREA information and Education Sheet. The caseworker then interviews the inmate and discusses the PREA information that was provided with the inmate to make sure that the inmate understands the information that they are received. The inmate then signs the acknowledgment sheet at that time. If the inmate arrives after normal business hours, they are provided the information the next day. The intake staff explained to the audit team what they do if an inmate does not comprehend English. They provide the Spanish version of the video for them to watch and give them copies of PREA Information and Education Sheet in Spanish. If the inmate does not speak either English or Spanish, they would use the Language Link. According to the intake staff, they have not had to use the Language Link in the past. At the time of the on-site portion of the audit, there were no inmates that did not speak fluent English.</p> <p data-bbox="240 1603 1414 1664">None of the inmates currently housed at CGTH were housed at CGTH prior to NDOC's implementation of the PREA policies.</p> <p data-bbox="240 1753 1453 1910">Six examples of the inmate education acknowledgment forms were provided with the pre-audit materials. Documentation provided to this auditor, along with random reviews of fifteen inmate files, and inmate interviews indicated that the inmate education portion of PREA is well within the standard. A review of inmate files revealed that copies of the signed acknowledgement form were in 15 of the 15 files reviewed. All of the inmates were provided the comprehensive PREA education on the day of arrival or the next day.</p> <p data-bbox="240 2000 1485 2089">Of the inmates 20 inmates interviewed, all of those stated that they remember receiving the PREA information upon arrival. All 20 inmates were familiar with the PREA policy and knew that sexual assault and harassment were a violation of the rules. Every one of the inmates that were interviewed knew at least three way that they could report a PREA.</p>

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

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 453 237">Auditor Discussion</p> <p data-bbox="242 273 1473 434">NDOC utilizes investigators from the Inspector General's Office to conduct all PREA allegation investigations. The investigators are required to attend the same PREA training as all NDOC employees. Additionally they are required to take the National Institute of Corrections course on Investigating Sexual Abuse in a Confined Setting. This course covers techniques for interviewing sexual abuse victims, compelled interview warnings, sexual abuse evidence collection and criteria and evidence required to substantiate a case for administrative or criminal prosecution.</p> <p data-bbox="242 519 1485 680">This auditor was provided a copy of the training syllabus and completion certificates of the investigators for the Inspector General's Office. The IG's Office has nineteen PREA trained investigators. The audit team was provided copies of all nineteen investigator's training certificates. CGTH has four supervisors that are used as local investigators to investigate non-criminal, non-staff PREA cases. Their training certificates, demonstrating completion of the NIC courses, were provided to the audit team for review.</p> <p data-bbox="242 766 1485 927">The audit team interviewed one investigator from CGTH and two Investigators from the IG's Office. During the interview with the investigators, they demonstrated knowledge on how to conduct a PREA investigation. This knowledge included what evidence to look for during an investigation, how to interview the alleged victim, suspect and potential witnesses. The investigators were able to explain how and when they would refer a case for prosecution. Both of the investigators interviewed knew how to conduct compelled interviews.</p>

115.35	<p>Specialized training: Medical and mental health care</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>NDOC policy on medical training requires that all full and part time medical and mental health care practitioners who work regularly in the facility receive specialized PREA training.</p> <p>The NDOC PREA Manual states that all medical and mental health employees assigned in the Department will complete specialized training specifically in:</p> <p>How to detect and assess signs of sexual abuse and sexual harassment</p> <p>How to preserve physical evidence of sexual harassment</p> <p>How to respond effectively and professionally to victims of sexual abuse and sexual harassment</p> <p>How and to whom to report allegations or suspicions of sexual abuse and sexual harassment</p> <p>This training is provided by the National Institute of Corrections on-line training facility. A printed certificate documenting the completion of the class is to be placed in the employee's supervisory file at the institution and within the Department's employee training file. The two on-line classes that medical/mental health staff are required to take to fulfill this standard are "Medical Health Care for Sexual Assault Victims in a Confined Setting" and "Behavioral Health Care for Sexual Assault Victims in a Confined Setting".</p> <p>All medical and mental health care practitioners are also required to receive the training mandated for employees in PREA standards 115.31 and 115.32, depending on their employment status. Administrative Regulation 360, Correctional Employee/Officer Basic Training Program, requires that all staff attend the 80 hour new employee training upon employment. Included in this training is PREA training. Medical Staff are not excluded from this requirement.</p> <p>CGTH does not have any medical or mental health staff assigned to the facility. There are medical and mental health staff, which work at the other State Prisons in the area, who regularly visit CGTH to provide routine medical and mental health services to the inmate population. In the event of a medical or mental health emergency, the inmate is transferred to the local hospital or a local NDOC facility (High Desert Correctional Center for males and Florence McClure Women's Correctional Center for females).</p>
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115.41	Screening for risk of victimization and abusiveness
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1489 398">CGTH Operational Procedure 573, PREA Screening and Classification, section 573.01, states that a transfer screening should take place as soon as possible, but shall be completed within 72 hours of arrival at a new facility. Whenever possible, and consistent with the safety and security needs, inmates are not to be housed together in two-man cells prior to PREA screening. A case note (PREA-Intake Assessment) will be generated to document said action.</p> <p data-bbox="240 488 1489 546">The PREA Risk Assessment Tool (DOC 2097) utilized by NDOC has 10 questions to assess the inmate's vulnerability toward victimization and 4 questions to assess his potential toward predatory behavior.</p> <p data-bbox="240 577 1302 604">The PREA Risk Assessment will be used for all screenings and assessments include the following factors:</p> <p data-bbox="240 689 485 716">Possible Victim Factors:</p> <p data-bbox="240 801 948 828">Whether the inmate has a mental, physical or developmental disability.</p> <p data-bbox="240 918 469 945">The age of the inmate.</p> <p data-bbox="240 1034 568 1061">The physical build of the inmate.</p> <p data-bbox="240 1151 783 1178">Whether the inmate has previously been incarcerated.</p> <p data-bbox="240 1267 866 1294">Whether the inmate's criminal history is exclusively nonviolent.</p> <p data-bbox="240 1384 825 1411">Whether the inmate has prior convictions for sex offenses.</p> <p data-bbox="240 1500 1388 1527">Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming.</p> <p data-bbox="240 1617 927 1644">Whether the inmate has previously experienced sexual victimization.</p> <p data-bbox="240 1733 687 1760">The inmate's own perception of vulnerability.</p> <p data-bbox="240 1850 1404 1877">A transgender and/or intersex inmate's own views with respect to his/her safety shall be given serious consideration.</p> <p data-bbox="240 1966 528 1993">Possible Aggressor Factors:</p> <p data-bbox="240 2083 628 2110">History of institutional violent behavior.</p>

Any history of sexual abuse.

History of convictions for violent offenses.

History of correctional facility sexual abuse, which may include violations contained in AR 707 that are of a sexual nature.

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

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

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

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

The audit team reviewed fifteen random inmate files. All of the files included the initial screening and all but one contained the information of the 30 day follow-up screening. One of the inmates had not yet been at CGTH for 30 day.

During interviews with a sample of the inmate population all 20 inmates interviewed remember going through the PREA screening process on the day of arrival. Of those same 20 inmates, all but two remember being asked questions regarding their sexual safety a second time within one month of arrival (most said about one week).

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

115.42	Use of screening information
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1481 528">Administrative Regulation 573, Prison Rape Elimination Act Screening and Classification, section 573.03, states that staff shall use information from the risk assessment to make informed housing, bed, work, education and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. Staff shall make individualized determinations about how to ensure the safety of each inmate. Prior to initiating a bed move, the caseworker must check PREA Alerts for victimization and/or abusiveness. At no time will a known victim and a known aggressor be housed together in a two man cell. A possible victim and a possible aggressor should not be housed together unless necessary. Non-victims and non-aggressors may be housed with any other category, subject to individual case factors.</p> <p data-bbox="242 620 1449 745">CGTH is a work release facility. All of the inmates housed here, except four, have jobs in the community. The physical design of the facility is comprised of two housing units. Each housing unit has two floors with two wings of 12 two inmate mini dorms. If the facility had any inmates classified as victim likely or aggressor likely, they would not be housed in the same unit.</p> <p data-bbox="242 837 1485 1095">AR 494, evaluation, Placement, and Treatment of Transgender and/or Intersex Inmates, requires the Non-Conforming Gender Review Committee (NGRC) to determine where to house transgender inmates. The committee requires the input from medical doctors and Mental Health Clinicians. A complete medical and mental health history is required and any relevant information from the inmate is considered. The NGRC convenes every quarter. As of this date, they have reviewed seven requests by trans-female inmates to house at a female facility. Notes from the NGRC were provided with the pre-audit materials. The committee was attended by the NDOC Medical Director, Mental Health Director, the PREA Coordinator, and Deputy Director. The committee was chaired by the NDOC Director. All seven cases were denied placement in a female facility, citing predatory and other safety concerns.</p> <p data-bbox="242 1240 1490 1500">All NDOC inmates' safety and program needs are reassessed every twelve months. CGTH OP 573, PREA Screening and Classification, section 573.01, states that Placement and programming assignments for each transgender or intersex inmate will be reassessed at least twice each year to review any threats to safety experienced by the inmate. These reassessments should be completed in conjunction with the inmate's regularly scheduled periodic/six month review. Inmates will be personally interviewed by a Caseworker, a PREA Special Assessment will be completed in NOTIS, and a PREA Special Referral case note will be generated documenting that the assessment was completed. Policy requires that the view of the transgender or intersex inmate toward their safety will be given serious consideration. There were no transgender or intersex inmates housed at CGTH during the time of this audit.</p> <p data-bbox="242 1592 1477 1684">AR 573, section 573.02, requires that transgender and intersex inmates are given the opportunity to shower separately from the other inmates. The design of the showers at CGTH allows all inmates to shower separately from each other. There were no transgender inmates housed at CGTH during the time of this audit.</p> <p data-bbox="242 1776 1458 1868">NDOC does not house transgender, intersex, lesbian, gay or bisexual inmates in specific facilities. CGTH does not house transgender, intersex, homosexual or bi-sexual inmates in specific housing units. At the time of the on-site portion of the audit, there were no inmates identified as transgender, intersex, lesbian, gay or bisexual.</p>

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 451 235">Auditor Discussion</p> <p data-bbox="242 271 1481 600">NDOC does not allow inmates to be placed in involuntary segregated housing based solely on victimization concerns unless there are no other safe housing options. Administrative Regulation 573.04, states "Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and it has been determined that there are no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing no more than 24 hours. During the weekends or holidays the on-duty Associate Warden must be notified to make appropriate arrangements. If the inmate voluntarily requests segregated housing, the inmate will be seen by classification within 72 hours of segregation. Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education or work opportunities, the facility shall document:</p> <p data-bbox="242 629 652 654">The opportunities that have been limited;</p> <p data-bbox="242 745 579 770">The duration of the limitation; and</p> <p data-bbox="242 862 568 887">The reasons for such limitations.</p> <p data-bbox="242 978 1481 1133">The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged and such assignment shall not ordinarily exceed a period of 30 days. If an involuntary segregated housing assignment is made the facility shall clearly document the basis for the facility's concern for the inmate's safety and the reason why no alternative means of separation can be arranged. Every 30 days the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population."</p> <p data-bbox="242 1225 1481 1348">CGTH does not have Segregated Housing. Any inmate that requests separation is transferred to an alternate facility. If the inmate is a female, they would be transferred to Florence McClure Women's Correctional Center, if the inmate is male, they are transferred to High Desert State Prison. There have been no inmates transferred from CGTH due to victimization concerns during this audit period.</p>

115.51	Inmate reporting
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1469 398">Administrative Regulation 421, Prison Rape Elimination Act, section 421.09, states that inmates, visitors, inmate family members, associates, and other community members can privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Such reporting can include, but not limited to:</p> <p data-bbox="240 488 735 515">Verbal complaints to any Departmental employee</p> <p data-bbox="240 600 970 627">Written complaints, which may be made through the following processes:</p> <p data-bbox="240 712 427 739">Inmate grievances</p> <p data-bbox="240 828 1493 927">Grievances alleging staff on inmate sexual misconduct or inmate on inmate sexual abuse will be forwarded immediately to the PREA Compliance Manager and/or AW followed by a confidential report completed in NOTIS. A copy of the grievance will be forwarded to the PREA Coordinator and Office of the Inspector General for review and investigation.</p> <p data-bbox="240 1012 852 1039">Inmate kites, written notes or letters to staff or administrators,</p> <p data-bbox="240 1124 1187 1151">And letter directed to the PREA coordinator or any member of the Inspector General's Office.</p> <p data-bbox="240 1236 932 1263">NDOC Family Services Office by phone or email at info@doc.nv.gov.</p> <p data-bbox="240 1348 695 1375">Writing the Nevada Attorney General's Office</p> <p data-bbox="240 1460 935 1487">Calling the internal PREA Hotline telephone number at 775-887-3152</p> <p data-bbox="240 1572 1461 1644">Written documentation received by custody staff will be forwarded to the PREA compliance manager for retention after the allegation has been handled appropriately.</p> <p data-bbox="240 1729 1485 2029">The NDOC has an agreement with the New Mexico Department of Corrections to accept PREA allegations from NDOC inmates, family or public. This gives the inmates a chance to report PREA to another law enforcement agency that is not associated with NDOC. The contact information for the PREA Coordinator at New Mexico Department of Corrections is provided to the inmates via the PREA Information and Education Sheet, the PREA inmate handbook and it is posted on the walls in common areas around the facility. The letters and envelopes for New Mexico Department of Corrections is maintained in the caseworker's offices of each housing units. Unfortunately most of the staff working the housing units did not know where this information was maintained. Prior to this report, staff a CGTH were retrained on the New Mexico PREA reporting forms. The staff signed acknowledgment of the training upon completion. All of the signed training documents were provided to this auditor.</p> <p data-bbox="240 2114 1461 2141">Additionally the IG's PREA hotline is available on the inmate's phone. The inmates only need to enter a four digit number,</p>

provided to the inmate whenever the phone receiver is picked up, to prompt a direct line to the IG's PREA hotline to report an incident. The inmates are not required to give their name to make a report. The access to the PREA hotline was checked by the audit team. We were able to contact the number and leave a message without providing any identifying information about ourselves. Shortly after testing the phone line we received confirmation from the IG's office that the message was received.

All of the inmates interviewed were aware of at least three different ways to report a PREA incident. Some of the examples that the inmates provided included, tell staff, call their family to have them report it, file a grievance, call the hot line or write a kite.

AR 421, requires that all staff report immediately any knowledge, suspicion, or information regarding any incidents of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. Staff shall privately report sexual abuse and sexual harassment incidents with their on duty supervisor. Avenues of reporting can be either in person or by telephone. No other person shall be in the vicinity of hearing the reporting information. Staff is required to report known incidents involving both other staff and inmates. Staff is required to accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. Information is disseminated on a need to know bases according to policy.

All of the staff interviewed during this audit stated that they would report a PREA allegation immediately no matter how they received the information.

According to the representative of the IG's office that was present during the audit, staff can contact them and report confidentially. On May 11, 2020, the Facility Manager issued a memorandum to all staff explaining how a staff member can report a PREA allegation to the Office of the Inspector General anonymously. The random staff that were interviewed said that they felt that they could report confidentially to their supervisor or the PCM. Some of them said that they could also report it on the PREA hotline.

NDOC does not house any inmates solely for civil immigration purposes.

115.52	Exhaustion of administrative remedies
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1493 434">Administrative Regulation 740, Inmate Grievance Procedure, section 740.06, states that all grievances containing allegations of sexual abuse will be referred to the Inspector General's Office for investigation and they will be designated as "PARTIALLY GRANTED" indicating that it has been submitted for investigation by the Inspector General's Office. Operational Procedure 740, Inmate Grievance Procedure, section 740.08, removes all time frame restrictions for the filing of a grievance when the grievance alleges sexual abuse.</p> <p data-bbox="240 519 1493 645">Operational Procedure 740, section 740.03, states that any grievance that alleges sexual assault by a staff member, the inmate is not required to give the grievance to the staff member named in the grievance, nor is the inmate required to attempt to resolve the issue with that staff member. AR 740 states that the grievance will not be forwarded to the staff member who is the subject of the complaint.</p> <p data-bbox="240 730 1493 927">Policy requires that all grievances alleging sexual abuse are forwarded to the Inspector General's (IG) Office. The IG's Office will render a decision of the outcome of the appeal within 90 days and initiate an investigation, if appropriate. In the event that more time is needed to resolve the grievance the IG's Office may ask for a 70 day extension. If an extension is needed, the IG's Office will notify the inmate of the extension and the expected date of the reply. Upon the completion of the investigation the IG's Office will notify the inmate of the results of the investigation. If the inmate does not receive a response within the allotted time limits, the inmate may consider this a denial.</p> <p data-bbox="240 1012 1493 1173">NDOC and CGTH's Operational Procedures do allow for third party reporting. Third party individuals could be a fellow inmate, staff member, family member, attorney or an outside advocate. If a grievance is filed via third party, the inmate is to be interviewed. The inmate must confirm the allegation and agree to the administrative remedies. If the inmate declines to have the request processed, it shall be documented in the tracking log and on NOTIS (Nevada Offender Tracking Information System).</p> <p data-bbox="240 1258 1493 1523">Operational Procedure 740, section 740.10, addresses the emergency grievance process. If an inmate submits an emergency grievance, the Shift Supervisor will be notified immediately. The Shift Supervisor is to determine if the grievance constitutes an emergency. The highest ranking officer on duty will respond to the grievance. At any time an inmate may file an Emergency Grievance for issues involving substantial risk of imminent sexual abuse. The person responding to the Emergency Grievance alleging substantial risk of imminent sexual abuse will separate the inmate, speak to the inmate, and give the inmate a bed move if necessary to protect them. The grievance will be responded to on the same day it is received and the response to the will be documented in NOTIS. PREA Compliance Manager will ensure that the grievance has been referred for investigation.</p> <p data-bbox="240 1608 1377 1675">An inmate may not be disciplined for filing a grievance related to alleged sexual abuse unless the Department has demonstrated that the inmate filed the grievance in bad faith.</p> <p data-bbox="240 1760 1493 1989">The Grievance Coordinator for CGTH explained how the grievance process works when there is an allegation of PREA. Inmates are to place the grievance in one of the four (4) black grievance boxes located in each housing unit. The Grievance Coordinator or designee checks these boxes daily. If the grievance alleges PREA, the coordinator scans the grievance and forwards a copy to the PCM and Facility Manager. The PCM enters the information into NOTIS. If the IG's office initiates an investigation, the grievance is returned to the inmate with a "partially granted" response. At the conclusion of the investigation, if the inmate is still not satisfied, they may submit the appeal directly to the IG's Office as a second level appeal.</p> <p data-bbox="240 2074 1430 2141">The Grievance Coordinator stated that they do not require the inmate to give the grievance to the staff member that the grievance is against nor do they require the inmate to try to settle the grievance informally with that staff member.</p>

According to a memorandum date March 25, 2021, Casa Grande Transitional Housing has not received a grievance alleging PREA during this audit period. A review on the facilities grievance log did not reveal any PREA grievances being filed.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 453 237">Auditor Discussion</p> <p data-bbox="240 271 1477 465">Currently CGTH utilizes the Rape Crisis Center (RCC) in Las Vegas for victim advocacy. NDOC is in the process of renewing the Memorandum of Understanding (MOU) with Community Action Against Rape DBA the RCC in Las Vegas to provide inmates emotional support in the event of a sexual assault. The inmates receive the information via PREA Education and Information Sheet and the PREA handbook when they first arrive at the facility; additionally there are posters on the walls of the housing units with this information and the phone number is posted on the wall by the telephones. Only about half of inmates interviewed knew about these services even though the information was visible everywhere.</p> <p data-bbox="240 555 1477 680">Phone calls to the IG's office are recorded by the IG's office only. The recordings can only be shared for investigation or security reasons. Phone calls to the Rape Crisis Center are not recorded. Any mail to the RCC or IG's office is treated as legal mail and not read by the staff. This information is included on the posters, the PREA Education and Information Sheet and the PREA handbook that the inmates receive upon arrival.</p> <p data-bbox="240 770 1453 831">Copies of the MOU (pending signatures), the PREA Information and Education Sheet and Inmate PREA handbook were provided to the auditors with the pre-audit materials.</p> <p data-bbox="240 920 1477 1077">The Victim Advocate from the Rape Crisis Center was interviewed on May 19, 2021. She stated that she has not had any contact with any inmates at CGTH. If she were to receive a request for emotional support from an inmate at CGTH, she would provide the support and teach coping skills over the phone. If the inmate needed direct contact, she would request a meeting with the inmate through the PCM. She further stated, that if an inmate were reporting an incident to her, she would receive consent from the inmate prior to reporting it as a third party.</p>

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1477 398">The Offender Handbook provided to the inmates as they arrive at CGTH explains that a PREA allegation can be reported to family or friends who can report on their behalf (third party reporting). This information is also on the posters in the housing units and in the visiting room. The Inspector General's website contains this information and is available to the public. The visiting rules provided to visitors by CGTH contains the information on how to report a PREA on behalf of an inmate.</p> <p data-bbox="240 488 1477 678">Operational Procedure 421, Custodial Sexual Misconduct, Inmate Sexual Offenses (PREA), section 421.02, reiterates that inmates, family, friends and associates may file a PREA allegation on an inmate's behalf. Staff must report all allegations, even those received from third party. Administrative Regulation 421 states that inmates, visitors, inmate family members, associates, and other community members can privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p data-bbox="240 768 1477 862">During the interviews with the inmates, they all knew that they could have somebody else (friend, family member or other inmate) report the allegation for them and that they could report a PREA allegation for another inmate. Most of the inmates stated that this was one of the methods that they would use to report a PREA incident.</p> <p data-bbox="240 952 1477 1010">Every staff member stated that they would accept a third party PREA report the same as a first party report when asked. All three investigators that were interviewed stated that they would investigate a third party report, just like any other allegation.</p>

115.61	Staff and agency reporting duties
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1474 499">Administrative Regulation 421, section 421.05, requires that all staff must report immediately any knowledge, suspicion, or information regarding any incidents of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. Staff is required to report known incidents involving both other staff and inmates. Policy also requires an employee to report any other employee's neglect or violation of responsibilities that may have contributed to an incident of sexual abuse, sexual harassment or retaliation. CGTH OP 421, Prison Rape Elimination Act, section 421.02, reiterates the employee's responsibility to report any knowledge or reasonable suspicion of sexual misconduct by another employee, contractor or volunteer to a supervisor or Inspector General.</p> <p data-bbox="240 589 1445 647">Medical Directive 117, Sexual Assaults, section 117.02, requires that medical staff report sexual assault or misconduct in accordance with AR 332, OP421, and PREA standards.</p> <p data-bbox="240 736 1453 896">CGTH Operational Procedure 421, Custodial Sexual Misconduct, Inmate Sexual Offenses (PREA), section 421.10, states CGTH will accept reports from any and all sources to include but not limited to: inmates, visitors, inmate family members, associates, and other community members. These individuals can privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p data-bbox="240 985 1485 1245">NDOC policy mandates that staff shall not reveal any information related to a sexual abuse report to anyone other than their immediate supervisor. All reports of sexual abuse to include inmates and staff are to be kept confidential. Section 421.17 states all case records associated with claims of staff sexual abuse, sexual harassment, inmate sexual abuse or any attempt thereof including written reports, investigation reports, evidence, inmate information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are confidential. OP 421, section 421.05, states that 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 agency policy, to make treatment, investigation and other security and management decisions.</p> <p data-bbox="240 1335 1490 1460">NDOC policy requires that all allegations of sexual abuse and sexual harassment, including third party reports, be forwarded to the Inspector General's Office for review and possible investigation. The IG's Office then either assigns an investigator from the IG's Office or refers the case back to the Facility Manager to handle the case administratively. The Facility Manager then assigns a local investigator to investigate the allegations.</p> <p data-bbox="240 1550 968 1576">There were no PREA allegations made during this audit period at CGTH.</p> <p data-bbox="240 1666 1493 1892">All of the staff interviewed knew their responsibility to report all allegations of sexual abuse and sexual harassment. They stated that they would report the information immediately to their supervisor or the PCM. They also explained that they would not share any information about a PREA incident with any other staff except of those that have a need to know (such as an investigator). The Facility Manager stated that he makes sure that all PREA allegations are entered into the Nevada Offender Tracking Information System (NOTIS). According to the Inspector General, their office receives all NOTIS entries. They would receive any PREA allegation entered in the system and immediately initiate a response by contacting the facility to provide direction or obtain additional information.</p> <p data-bbox="240 1982 1461 2076">Institutional Nursing Procedure 200, Prison Rape Elimination Act, section II, A. 4, states that medical and mental health practitioners will obtain informed consent from inmate prior to reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under 18. There are no medical staff assigned to CGTH.</p>

Due to the nature of the facility's mission (work release) CGTH does not house minors or vulnerable adults.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 453 237">Auditor Discussion</p> <p data-bbox="240 271 1469 432">Administrative Regulation 421 states that if any NDOC employee becomes aware that an inmate is subject to a substantial risk of imminent sexual abuse, they shall take immediate action to protect the inmate. If the knowledge is obtained by receiving a verbal/written report, the employee will immediately notify the on duty shift supervisor. If the knowledge is obtained by visual observance, the employee will initiate first responder duties in accordance with PREA guidelines. In the Sexual Assault Response procedure, it requires staff to separate the victim from the aggressor and keep the victim safe.</p> <p data-bbox="240 521 1485 582">CGTH Operational Procedure 421, section 421.12, Requires CGTH staff will ensure that immediate action is taken to protect an inmate who is subject to substantial risk of imminent sexual abuse.</p> <p data-bbox="240 669 1485 797">If information that an inmate is at substantial risk of imminent sexual abuse is received via emergency grievance, the grievance is to be taken to the supervisor. The supervisor shall take immediate action to protect the potential victim and document their actions in NOTIS. According to Operational Procedure 740, Inmate Grievance Procedure, the supervisor will prepare a response to the grievance.</p> <p data-bbox="240 884 1485 1111">During the interviews, staff explained what they would do if they received information that an inmate was at imminent risk of being sexually assaulted. All of the staff responses were variations of what policy requires. In general most staff responses were as follows: Based on how the information was received, they would interview the potential victim to insure their safety. They would notify their supervisor and advise them of the situation. They would separate the potential victim from the potential predator while arrangements were made to rehouse either or both inmates or to transfer to alternate institutions. All of the actions taken would be documented in NOTIS. If the potential victim made a PREA allegation, the Inspector General's Office would be notified.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 453 237">Auditor Discussion</p> <p data-bbox="240 271 1490 499">Operational Procedure 421, Prison Rape Elimination Act, Section 421.20, states that upon receiving an allegation that an inmate was sexually abused while confined at another institution/ facility, the PREA Compliance Manager or Facility Manager must be notified immediately. If the inmate reports that this sexual abuse had been previously reported, a review of NOTIS will be conducted, and if necessary the PREA Coordinator will be contacted, in an attempt to ascertain if there is documentation of the report. The Facility Manager will notify the head of the facility or appropriate office of the agency where the alleged abuse occurred as soon as possible but no later than 72 hours after receiving the allegation. The PREA Coordinator will also be notified.</p> <p data-bbox="240 589 1461 680">Upon receiving notification from another facility/agency claiming that a possible PREA incident had occurred at CGTH, the Facility Manager will refer the allegation to the Inspector General's Office for investigation. The PREA Coordinator will ensure the allegation is investigated.</p> <p data-bbox="240 770 1473 862">Casa Grande Transitional Housing has not received any allegations that a sexual assault occurred at CGTH from any other facility during the past audit period. Additionally, there have not been any inmates who made a PREA allegation that occurred in a different facility while housed at CGTH.</p> <p data-bbox="240 952 1473 1043">The Facility Manager stated that he forwards any allegations that occurred at a different facility, made by inmates at CGTH, to the Warden of that facility. He also notifies the Inspector General's Office of the allegation. He further stated that if he receives an allegation from another institution, he would make sure that it was investigated per policy.</p>

115.64	Staff first responder duties
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1484 365">CGTH Operational Procedure 421, Prison Rape Elimination Act, section 421.12, provides a detailed process for first responders to follow upon learning of a sexual assault. The manual states that upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to:</p> <p data-bbox="240 396 1477 456">Separate the alleged victim and abuser. The victim and the suspect will not have any contact with each other either visually or audibly. The victim will be held in medical and the suspect will be placed in a holding cell;</p> <p data-bbox="347 488 1422 515">Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;</p> <p data-bbox="240 546 1484 638">If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating;</p> <p data-bbox="240 669 1418 730">The supervisor will complete the check list, notify the Facility Manager, PMC and the Inspector General's Office. The supervisor will complete all reports in NOTIS;</p> <p data-bbox="240 761 1458 853">If the alleged victim agrees to a forensic exam, they will be transferred to University Medical Center to be evaluated by the SAFE/SANE Nurse. Upon completion of the exam the inmate will be transferred to High Desert State Prison (male) or Florence McClure Women's Correctional Center (female) medical department;</p> <p data-bbox="240 884 1414 945">If the inmate declines the forensic exam, the inmate will be transferred to High Desert State Prison (male) or Florence McClure Women's Correctional Center (female) medical department;</p> <p data-bbox="341 976 775 1003">All involved staff will complete their reports;</p> <p data-bbox="341 1034 772 1061">Evidence will be preserved and processed;</p> <p data-bbox="240 1146 1310 1173">NDOC policy and training states that whomever receives the allegation from the inmate is a first responder.</p> <p data-bbox="240 1321 1492 1480">During the interviews with staff they were able to explain their role in the response to a sexual assault. The general response was that the staff would separate the alleged victim from the alleged suspect (if known). They would contact their supervisor and medical at Florence McClure Women's Correctional Center (if needed). They would secure the dorm or preserve the crime scene until the investigation team arrives to process the crime scene. They would discourage the alleged victim from washing their hands, change their clothes, shower, brush their teeth or use the toilet to preserve any possible evidence.</p> <p data-bbox="240 1489 1489 1615">They would prevent the alleged suspect from washing their hands, change their clothes, shower, brush their teeth or use the toilet. At no time do they let the alleged victim or the alleged suspect have communication with each other while awaiting transportation to the SAFE/SANE Nurse. The alleged victim and the alleged suspect are kept in separate rooms out of sight and ear shot from each other. They are transported in separate vehicles.</p> <p data-bbox="240 1704 1485 1863">During the interviews with the staff, some of the staff stated that they would prevent the victim from doing anything to destroy evidence such as drinking water or going to the bathroom. When questioned further on this, they admitted that they would probably let the victim do these things if they were insistent. This discrepancy in policy knowledge was addressed with the Facility Manager. All of the staff at CGTH were provided training relative to requesting the victim not destroy evidence and ensuring the suspect not destroy evidence. The signed training documents were forwarded to this auditor.</p> <p data-bbox="240 1953 895 1980">CGTH has not had any PREA allegations during this audit period.</p>

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 453 237">Auditor Discussion</p> <p data-bbox="242 271 1484 365">Operational Procedure 421.2, PREA Sexual Assault Response-Staff First Responder Duties, provides a detailed process for a coordinated response to a sexual assault. The OP requires upon learning of an allegation that an inmate was sexually abused; the first security staff member to respond to the report shall be required to separate the alleged victim and abuser. The victim and suspected abuser shall not have any contact with one another either visually or audibly. The victim shall be held in the clinic until transportation to High Desert State Prison (male) or Florence McClure Women's Correctional Center (female) medical can be achieved. The suspected abuser shall be secured in a temporary holding cell. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. The Custody Officer shall notify the Facility Manager immediately, who will then notify the Inspector General's Office as soon as practical. The Custody Officer will complete a detailed NOTIS entry (028) and the Facility Manager will complete a 019 Incident Report for the Deputy Director. Custody staff shall collect and book into evidence all clothing from the inmate victim. The inmate will wear an orange jumpsuit to the forensic examination. If the inmate victim agrees to a forensic exam, transportation to the contracted provider to be evaluated by the SAFE/SANE nurse shall be arranged. The inmate victim shall be transported to either HDSP or FMWCC Medical for a follow-up medical exam. Staff are to secure the incident area and treat it as a crime scene until released by the Deputy Director, Inspector General or designee.</p> <p data-bbox="242 920 1484 1014">The Facility Manager will interview the victim, if possible to get a preliminary statement. The Investigator from the Inspector General Office will report to the facility and process the crime scene. The medical and Mental Health Staff at either HDSP or FMWCC will conduct all follow-up medical and mental health requirements.</p> <p data-bbox="242 1104 1484 1162">Each staff member that was interviewed knew their role when responding to a sexual assault. CGTH has not had any PREA allegations reported during this audit period.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The State of Nevada signed collective bargaining into law in 2019. As of the date of the audit the bargaining unit agreements have not been signed. According to the State of Nevada PREA Coordinator, the contract is still in the negotiation process and the negotiator has been provided the language included in PREA standard 115.66.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 453 237">Auditor Discussion</p> <p data-bbox="240 271 1458 465">Administrative Regulation 421, Prison Rape Elimination Act, Section 421.13, states that no staff member or inmate who reports sexual abuse or sexual harassment or cooperates with asexual abuse or sexual harassment investigation will be subjected to any form of retaliation from other staff members or inmates of the Department. Operational Procedure 421, Prison Rape Elimination Act, section 421.25, requires the PCM to monitor and track all inmates and staff who reported the sexual abuse, or cooperate with an investigation, from retaliation from both staff and inmates. The monitoring will be conducted for at least 90 days.</p> <p data-bbox="240 555 1485 680">The Caseworker is responsible to meet with the inmate who is being monitored at least every 30 days for a total of 90 days. The caseworker will review documents such as housing assignments, job assignments and disciplinary reports to determine if retaliation is occurring. Once per month, the Caseworker completes a NOTIS Chrono entry for each inmate who has been tracked for protection purposes.</p> <p data-bbox="240 770 1485 965">If any facility staff member learns of or receives information that a person who cooperated with an investigation, including an inmate or staff reporter, has expressed a fear of retaliation, the Inspector General's Office will be immediately notified. The matter will be immediately reviewed by PREA management staff of the Inspector General's Office and contact made with the person by the assigned staff member of the IG's Office. Appropriate measures will be taken by the assigned investigator, including, follow up with the person who expressed the fear and if applicable referral to an outside law enforcement body or advocacy group.</p> <p data-bbox="240 1055 1442 1115">CGTH has not had any PREA allegations reported during this audit cycle. Additionally there have not been any inmates transferred to CGTH, from other facilities, which were currently being monitored for retaliation.</p>

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 510">Operational Procedure 573, PREA Screening and Classification, section 573.03, states that inmates who have been a victim of sexual assault shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.</p> <p data-bbox="229 510 1509 613">Administrative Regulation 573.04, states “Any use of Segregated Housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of standard 115.43.”</p> <p data-bbox="229 613 1509 869">Casa Grande Transitional Housing (CGTH) does not have segregated housing for the purpose of Protective Segregation. If an inmate requires Protective Segregation, that inmate will be temporarily housed in a secure cell until transportation and reclassification to another facility can be completed. Male inmates are transferred to High Desert State Prison and female inmates are transferred to Florence McClure Women’s Correctional Center. This should take place within 24 hours of separation from the population at CGTH.</p> <p data-bbox="229 869 1509 990">According to a memorandum authored by the Facility Manager, CGTH has not had any inmates transferred from the facility due to being a victim of a PREA during this audit period.</p>

115.71	Criminal and administrative agency investigations
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1485 566">Administrative Regulation 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, mandates that the NDOC, Office of the Inspector General (IG), will investigate all allegations of staff on inmate sexual abuse, sexual harassment and inmate on inmate sexual abuse within the NDOC. This includes third party and anonymous reporting of a PREA allegation. Investigators are assigned to cases via the IG's Office as soon as a complaint is received. The investigators are trained in how to do criminal and sexual assault investigations. This includes a thorough, complete and objective investigation. Investigators assigned to investigate allegations of sexual abuse or sexual assault shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. If the case is determined to be none criminal, and does not involve staff, the IG's Office may assign it to an investigator from the facility.</p> <p data-bbox="242 651 1485 846">The IG's Office has a team of 19 investigators trained in investigating sexual assault cases. The training includes conducting sexual assault investigations in a confinement setting, interviewing victims of sexual assault, proper use of Maranda and Garrity warnings, sexual abuse evidence collection, and preparing a case for referral for prosecution. Reviewing the training record confirmed that the investigation team had all received the proper training. Local investigators who work at the institution, not assigned to the IG's Office, receive the same training. These local investigators typically investigate inmate on inmate sexual harassment or other non-criminal cases that do not involve staff.</p> <p data-bbox="242 934 1485 1196">The investigators that were interviewed for this audit were able to explain the investigation process. When they are first assigned to a case, they make sure that the alleged victim is safe and receiving medical attention, including a forensic exam if needed. They report to the crime scene and collect any evidence. They also collect the evidence from the forensic exam. They review staff reports and interview the victim. They then interview the suspect (if known) and any witnesses. The investigators stated that they also review any video tapes, phone calls, documents or other relevant evidence. Once all of the interviews are completed and evidence has been reviewed, they write a report stating the facts of the case. The investigator then submits the case to the Attorney General's for possible prosecution. The Facility Manager is provided all of the reports. The evidentiary standard to substantiate a case is preponderance of evidence.</p> <p data-bbox="242 1283 1453 1346">Policy requires that all substantiated criminal cases shall be referred to the applicable prosecutorial authority for review of prosecution. This is done by the Attorney General's Office.</p> <p data-bbox="242 1433 1485 1561">During interviews and discussion with investigative staff, each of them stated that the creditability of the individual being interviewed is not based on their status as an employee or offender, it is based on an individual bases. NDOC policy forbids the use of any form of lie detector test when interviewing the victim. Prior to conducting a compelled interview, the investigator will consult with the Attorney General's Office for advice and direction.</p> <p data-bbox="242 1648 1485 1711">According to the IG, all completed investigations are retained in her office for at least five years after the alleged abuser is no longer in the control of NDOC or separated from state service.</p> <p data-bbox="242 1798 1485 1926">Policy states that the departure of the alleged abuser or victim from the employment of the Department or control of the institution/facility shall not provide a basis for terminating an investigation. All three investigators that were interviewed stated that they would continue with the case, even if the victim or suspect was released to the community or, in the case of an employee, the suspect resigns from the Department.</p> <p data-bbox="242 2013 991 2042">CGTH did not have any PREA allegations reported during this audit period.</p>

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="231 190 1508 257">Auditor Discussion</p> <p data-bbox="231 257 1508 369">The NDOC PREA Manual states that the Department shall impose no standard higher than a preponderance of the evidence in determining whether an allegation(s) of sexual abuse is substantiated.</p> <p data-bbox="231 369 1508 548">During the interviews with the investigators, they knew what level of evidence was required to substantiate a case. The Facility Manager was also aware of these criteria. All four expressed that preponderance of evidence means that the incident was more likely to have happened than not to have happened.</p> <p data-bbox="231 548 1508 642">CGTH did not have any PREA allegations reported during this audit cycle. There was no documentation to review.</p>

115.73	Reporting to inmates
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1493 566">Administrative Regulation 421, Custodial Sexual Misconduct Inmates Sexual Offences and Prison Rape Elimination Act, requires that, at the conclusion of an investigation, the inmate be informed on whether the allegation has been substantiated, unsubstantiated or unfounded. Additionally, if the allegation is against a staff member, the department will inform the offender when the staff member no longer works in the unit, when the staff member no longer works at the facility, if the staff member is indicted on charges related to sexual abuse within the facility or if the staff member is convicted of a charge related to sexual abuse within the facility. If the allegation is against another offender, the departmental policy requires the victim be notified if the perpetrator has been indicted or convicted on a charge related to sexual abuse. The NDOC PREA Manual requires that staff will notify the inmate and enter a case note within the NOTIS system indicating that the inmate had been notified.</p> <p data-bbox="242 651 1474 781">Operational Procedure 421, Prison Rape Elimination Act, section 421.27, the caseworker is responsible to notify the inmate of the outcome of the investigation. The caseworker is provided a form DOC 2095, Notification of Investigation/Inquiry Resolution, by the PCM. The inmate is required to sign the notification document which is then forwarded to the PCM. The PCM ensures that the document is placed in NOTIS.</p> <p data-bbox="242 866 1485 1164">Following an inmate's allegation that a staff member committed sexual abuse against the inmate, and the allegation was shown to be substantiated or unsubstantiated, the NDOC Inmate PREA Notification of Investigation/Inquiry Resolution (DOC 2095) will also be utilized to notify the inmate that the staff member is no longer posted within the inmate's unit; the staff member is no longer employed at the facility; the staff member has been indicted on a charge related to sexual abuse within the Department; or the Department learns that the staff member has been convicted on a charge related to sexual abuse within the Department. The NDOC Inmate PREA Notification of Investigation/Inquiry Resolution (DOC 2095) will also be utilized to make notifications following an inmate's allegation of sexual abuse by another inmate to advise that the alleged abuser has been indicated on a charge related to sexual abuse within the Department or that the alleged abuser has been convicted of a charge related to sexual abuse within the Department.</p> <p data-bbox="242 1249 1497 1413">The Facility Manager explained the process he would follow when notifying an inmate that the investigation is closed. Either the Facility Manager or the Correctional Caseworker would bring the inmate into their office and inform them of the conclusion of the investigation. If the case was substantiated or unsubstantiated, they would inform the inmate of the work statuses of the employee (if staff-on-inmate) and the statuses of the case with the Attorney General. The conversation would be documented in NOTIS.</p> <p data-bbox="242 1498 1394 1561">CGTH has not housed any inmates who have made a PREA allegation in this past PREA audit cycle. There are no documents to review.</p>

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 453 237">Auditor Discussion</p> <p data-bbox="242 271 1469 465">The State of Nevada defines sexual abuse of a prisoner as a class D Felony. Administrative Regulation 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.14, states that NDOC staff shall be subject to disciplinary sanctions up to and including termination for violating Departmental sexual abuse or sexual harassment policies. All terminations for violations of Departmental sexual abuse or sexual harassment policies, or resignations by staff that would have been terminated if not for their resignation, shall be reported to law enforcement agencies and to any relevant licensing bodies, by the Inspector General's office.</p> <p data-bbox="242 555 1485 613">Administrative Regulation 339, Code of Conduct, defined sexual abuse as a Class 5 disciplinary offence for employees. The AR requires that all Class 5 disciplinary actions result in termination, even for the first offence.</p> <p data-bbox="242 703 1485 864">CGTH OP 421, Prison Rape Elimination Act, section 421.22, states that CGTH staff shall be subject to disciplinary sanctions up to and including termination for violating Departmental sexual abuse or sexual harassment policies. All terminations for violations of Departmental sexual abuse or sexual harassment policies, or resignations by staff that would have been terminated if not for their resignation, shall be reported to law enforcement agencies and to any relevant licensing bodies, by the Inspector General's office.</p> <p data-bbox="242 954 1437 1043">During the interview with the Facility Manager, he stated that it is the expectation that staff be terminated if they sexually assault an inmate, even if the inmate appears to give consent. There were no sexual abuse or sexual harassment allegations against NDOC employees at CGTH during this audit period.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 546">Administrative Regulation 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.15, states that any contractor or volunteer who engages in an activity that could be interpreted as sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The institution/facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of Departmental sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p data-bbox="229 546 1509 703">CGTH OP 421, Prison Rape elimination Act, section 421.23, requires that any contractor or volunteer at CGTH who engages in sexual abuse shall be prohibited contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.</p> <p data-bbox="229 703 1509 860">The Facility Manager stated that he would restrict a volunteer or contractor from grounds (gate stop) if they sexually assaulted or harassed an inmate. Additionally the volunteer or contractor would be removed from the clearance list and no longer allowed in any NDOC facility.</p> <p data-bbox="229 860 1509 958">CGTH did not have any allegations filed against any volunteers or contractors during this audit period.</p>

115.78	<p data-bbox="229 69 1509 1225">Disciplinary sanctions for inmates</p> <p data-bbox="229 1225 1509 1317">Auditor Overall Determination: Meets Standard</p> <p data-bbox="229 1317 1509 1375">Auditor Discussion</p> <p data-bbox="229 1375 1509 1765">Administrative Regulation 421, Custodial Sexual Misconduct, Inmate Sexual Offenses and Prison Rape Elimination Act, section 421.16, addresses the discipline process for inmates that are charged with sexual abuse/harassment of another inmate. The policy states that inmates shall be subject to disciplinary sanctions pursuant to Administrative Regulation 707, Inmate Disciplinary Process, following a finding that the inmate engaged in inmate-on-inmate sexual abuse, sexual harassment or consensual sexual activity. Inmates shall be subject to administrative disciplinary sanctions. Sanctions shall be 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. The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.</p> <p data-bbox="229 1765 1509 2047">According to Operational Procedure 421, Prison Rape Elimination Act, section 421.24, the agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. CGTH prohibits all sexual activity between inmates and may discipline inmates for such activity. The Hearing Officer may not, however, deem such activity to constitute sexual abuse if he/she determines that the activity is not coerced.</p> <p data-bbox="229 2047 1509 2213">During the interview with the Facility Manager, he stated that the inmate disciplinary process is an objective process that takes all factors into account when determining guilt or innocence of an inmate. Additionally any penalty administrated as a result of a guilty finding is within established policy. All factors, including the inmate's mental health concerns are considered during the disciplinary process.</p> <p data-bbox="229 2213 1509 2240">CGTH did not have any substantiated allegations of inmate-on-inmate sexual abuse/harassment during this audit period.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 451 235">Auditor Discussion</p> <p data-bbox="242 271 1465 331">Medical INP 200, Health Care Services, section II, address how NDOC will provide medical and mental health treatment to an inmate who discloses prior victimization or predatory sexual abuse.</p> <p data-bbox="242 421 1485 613">The policy reads "All inmates will receive screenings upon initial intake (reception) and upon arrival at each institution the inmate may be transferred to during his or her incarceration. The Inmate will be asked if he has experienced prior sexual abuse, whether it occurred in an institutional setting, jail, or in the community. If the inmate answers yes, staff will ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within "14 days" of the intake screening. A specialized binder will be located and maintained in the medical and mental health areas to identify the inmates in need of this follow-up.</p> <p data-bbox="242 703 1458 831">Any information obtained from the inmate related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State or local law.</p> <p data-bbox="242 920 1469 981">Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.</p> <p data-bbox="242 1070 1481 1330">CGTH does not have any medical or mental health staff. There are Medical staff from other institutions in the area who conduct regular weekly visits at the facility. Mental Health Staff come when they are requested. If an inmate discloses that they were a victim of a prior sexual assault, the inmate is offered a mental health consolation. If they accept a mental health consultation, the Mental Health Counselor comes to CGTH to interview the inmate. They are not transferred unless the Mental Health Counselor recommends a transfer for further treatment or evaluation. Female inmates are transferred to Florence McClure Women's Correctional Center and male inmates are transferred to High Desert State Prison. Nine inmates at CGTH disclosed prior victimization upon arrival. Documentation signed by the inmates showed that all nine were offered Mental Health, however they all declined.</p>

115.82	Access to emergency medical and mental health services
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1436 365">NDOC Departmental Policy, Medical INP 200, Health Care Services, states that all inmate victims of sexual abuse will receive timely unimpeded access to emergency medical/mental health treatment which will be determined by the health practitioner's professional judgment.</p> <p data-bbox="242 396 858 425">When an incident is of an Emergent Nature, medical staff will:</p> <p data-bbox="242 510 1294 539">Perform a cursory, visual exam for any signs of injury, without manipulating any of the victims' body parts.</p> <p data-bbox="242 624 1171 654">Injuries will be documented by camera and utilizing NDOC Form 2514 (Unusual Occurrence).</p> <p data-bbox="242 739 1128 768">Victims will be offered immediate medical attention for any injuries that require treatment.</p> <p data-bbox="242 853 1399 916">If SANE exam is requested, treatment can be deferred if it appears it will affect evidence, and the injuries are not life threatening.</p> <p data-bbox="242 1001 1094 1030">Medical staff may assist in the collection of evidence, except for obtaining specimens.</p> <p data-bbox="242 1115 919 1144">When an incident is of an Emergent Nature, Mental Health staff will:</p> <p data-bbox="242 1229 1393 1258">During normal working hours, mental health staff will provide an immediate consultation with the victim if requested.</p> <p data-bbox="242 1344 1433 1406">After hours, in the absence of mental health personnel, medical staff can provide basic counseling and support until the victim can be seen by mental health personnel.</p> <p data-bbox="242 1552 1489 1615">Inmates can be sent to any hospital in the Hometown Health PPO Network that NDOC is a member of. All of the hospitals in this network have emergency rooms.</p> <p data-bbox="242 1700 1425 1762">All services provided for the above related treatments, shall be free of charge regardless whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p data-bbox="242 1848 1399 1877">CGTH did not have any PREA allegations reported during this audit period. There was no documentation to review.</p>

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 197 1509 264">Auditor Discussion</p> <p data-bbox="229 264 1509 481">NDOC policy requires that inmates who have been victims of sexual abuse receive medical and mental health treatment as prescribed by a physician. Medical INP 200, PREA, requires that the follow-up treatment provided will be consistent with the community standard level of care. Sexual abuse victims will be offered tests for sexually transmitted infections as deemed medically appropriate. Female inmates will be offered pregnancy tests and provided information about available pregnancy services. Mental health will attempt to conduct mental health evaluations of all known inmate-on-inmate abusers within 60 days of learning of the known abuse.</p> <p data-bbox="229 548 1509 683">CGTH does not have any medical or mental health services on site. In the event that an inmate was the victim of a PREA incident, the inmate would be transferred to High Desert State Prison, Florence McClure Correctional Center or the regional hospital, depending on his medical needs. Upon return from the SAFE/SANE exam, the inmate would first be seen by NDOC Medical Staff at High Desert State Prison or Florence McClure Correctional Center before returning to CGTH.</p> <p data-bbox="229 761 1509 795">CGTH has not had any PREA allegations during this audit period. There is no documentation to review.</p> <p data-bbox="229 873 1509 952">According to NDOC policy all services provided for the above related treatments, shall be free of charge regardless of whether or not the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p data-bbox="229 1019 1509 1106">Policy requires that the facility attempt to conduct a mental health evaluation on all inmate-on-inmate abusers within 60 days of learning of such abuse history.</p>

115.86	Sexual abuse incident reviews
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1481 432">Operational Procedure 421, Prison Rape Elimination Act, section 421.26, states that at the conclusion of every investigation into an allegation of sexual abuse which was determined not to be unfounded, a Sexual Abuse Incident Review (SAIR) will be done. The review will normally be done within 30 days of the conclusion of the investigation, including any administrative and criminal, and will include upper level management officials such as the Facility Manager and or the Lieutenant from the facility and include input from line supervisors, investigators and medical of mental health clinicians.</p> <p data-bbox="242 517 884 546">The SAIR will review each sexual abuse incident to determine if:</p> <p data-bbox="242 631 754 660">Policy or practice needs to be changed or modifies;</p> <p data-bbox="242 745 1035 775">The incident was motivated by race, ethnicity, gender identity or gang affiliation;</p> <p data-bbox="242 860 727 889">If physical barrier in the area enabled the abuse;</p> <p data-bbox="242 974 724 1003">If staffing levels were appropriate and adequate;</p> <p data-bbox="242 1088 866 1117">Or if monitoring technology should be deployed or augmented.</p> <p data-bbox="242 1202 1426 1267">The results of the discussion will be documented. At the conclusion of the SAIR, the Facility Manager is responsible to implement any recommendations.</p> <p data-bbox="242 1352 1469 1417">CGTH did not have any PREA allegations reported during this audit period. There was no reason for the SAIR to convene; therefor there is no documentation to review.</p>

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The NDOC PREA handbook requires that the Inspector General (IG), PREA Management Team (PMT), is responsible to collect accurate, uniform data for every allegation of sexual abuse at every institution and facility using a standardized instrument and set of definitions. The incident-based sexual abuse data shall be aggregated, at a minimum, annually. The data shall include all of the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization (SSV-2) conducted by the Department of Justice. The IG PMT shall maintain, review, and collect data as needed from all incident based documents including reports, investigation files and sexual abuse reviews. The PREA Compliance Manager maintains a record of all reports of sexual abuse at the facility.</p> <p>The PREA Coordinator was present during this audit and she explained her agencies role in collecting, reviewing and maintaining the data. A review of the documents provided demonstrated compliance with this standard. The Inspector General's PREA Unit receives all of the PREA incident reports within the NDOC via the Nevada Offender Tracking Information System (NOTIS). This allows for the NDOC to insure that all reports are consistent. The information provided to the PC is sufficient to complete the Department of Justice' Survey of Sexual Violence form. Each Prison within the NDOC uses the same set of definitions when documenting sexual assault and sexual harassment within the corrections system.</p> <p>The aggregated data for 2019 was requested from Nevada Department of Corrections by DOJ on September 25, 2020, with a due date of November 30, 2020. The data was provided to the Department of Justice on November 6, 2020.</p>

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 510">The NDOC PREA Manual requires that the Director, or designee, Deputy Director of Operations, and the IG PREA Coordinator review the data in order to assess and improve, if necessary, the effectiveness of its sexual abuse prevention, detection and response policies practices and training. This review includes identifying problem areas, taking corrective action on an ongoing basis and preparing an annual report of its findings and corrective actions for each facility and the department where inmates may be present.</p> <p data-bbox="229 510 1509 725">The report shall include a comparison of the current year's data and corrective action with those from prior years and shall provide an assessment of the department's progress in addressing sexual abuse. The Department's report must be approved by the Director and made readily available to the public through the Department's public website. Prior to placing any reports on the Department's website, all personal information of the victims and subjects are redacted.</p> <p data-bbox="229 725 1509 911">The 2015 through 2019 reports was reviewed by this auditor. The report contained the PREA data on each of the NDOC facilities, identifying problem areas, any corrective action taken and the effectiveness of the sexual abuse prevention program. The report did not contain any confidential information such as victim's information. The 2015, through 2019 reports are posted on the NDOC, Inspector General's website. The web site is doc.nv.gov. Click on "PREA Management Division" and then select "PREA Incidents and Annual Reports."</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 210 453 237">Auditor Discussion</p> <p data-bbox="244 271 1453 365">All of the PREA data is maintained in the Inspector General's Office. According to policy the data is maintained 10 years. The aggregated data is maintained on the NDOC website. There are no personal identifiers included in the information posted.</p> <p data-bbox="244 454 1465 517">According to the PREA Coordinator, they maintain the documents in their headquarters for over ten years. A review of the data available to the public, there were no personal identifier included in the information.</p>

115.401	Frequency and scope of audits
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1485 398">The NDOC website contains the results of all of the PREA audits conducted since 2013. A review of these audits appears to show that all of the facilities operated by NDOC were audited in a three year period starting in August 2013. The number of audits conducted was approximately one third of their facilities each of the three years. This is the second year of the audit cycle.</p> <p data-bbox="240 546 1493 672">During this audit, the auditor had access to, and toured, the entire facility. This auditor had access to every inmate, staff member, volunteer and contractor that this auditor requested to interview. The interviews were all conducted in the privacy of a staff office either in person or telephonically. Each document that was requested was received, including sensitive documents, such as investigation reports, personnel information, medical/mental health documents and inmate files.</p> <p data-bbox="240 757 1434 819">Inmates were allowed to send confidential correspondence to this auditor, if they wished. No letters were received from inmates prior to the audit.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The NDOC website contains a copy of the previous audit conducted at CGTH. It can be found by going to the NDOC home page and selecting the PREA Management Division under quick links. Once that page loads, select PREA Audits under the Resource tab. All of the PREA audits conducted are listed by facility name. The last audit of Casa Grande Transitional Housing was completed on May 22, 2018, and is posted on the website.</p>

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

115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need 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.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	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 facility does not have female inmates.)	yes
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 with inmates with disabilities including inmates who: Have intellectual disabilities?	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: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	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.)	na
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

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

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

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	no
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

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

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

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

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	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 sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	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 abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	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 evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	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.)	na

115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

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