# PREA AUDIT: AUDITOR'S SUMMARY REPORT ADULT PRISONS & JAILS





Name of facility:	Stewart Conservation Camp	
Physical Address:	1721 Snyder Ave., Carson City, NV 8	39701
Date report submitted		
<b>Auditor Information:</b>		
Address:	919 Ala Moana Blvd. Suite #116, Hor	nolulu, HI 96814
E-Mail: cheyenne.l		
Telephone number:		
Date of facility visit:	07/16/2015 & 07/17/2015	
Facility Information		
Facility mailing address	ss: (if different from above)	
	PO Box 5005 Carson City, NV 89702	
Facility Telephone Nu		
	775-887-9310	
SCC is:		
☐ Military	☐ County	☐ Federal
☐ Private for profit	☐ Municipal	✓State
☐ Private not for pr	ofit	
Facility Type:	☐ Jail   ☑Prison	
Name of PREA Com	pliance Manager: Shannon Moyle	Title: Correctional Caseworker
E-Mail Address: <b>sm</b>		Specialist III
Phone Number: 775	5-887-9212	•
Agency Information		
	levada Department of Corrections	
Governing authority o	r parent agency: (if applicable) N/A	
Physical address: 5	500 Snyder Ave. Bldg. 17, Carson Cit	y, NV 89701
Mailing address: (if dit	fferent from above)	
Telephone Number: 7	775-887-3285	
Agency Chief Executive	ve Officer	
Name: James "Gre	g" Cox	Title: Director
E-Mail Address:gco	x@doc.nv.gov	Telephone Number: 702-486-9910
Agency-Wide PREA	Coordinator	
Name: Pamela Del I	Porto	Title: Inspector General/PREA Coordinator
E-Mail Address: pd	elporto@doc.nv.gov	Telephone Number: 775-887-3395

### NARRATIVE:

The PREA audit for the Nevada Department of Corrections (NDOC), Stewart Conservation Camp (SCC) was conduct from July 16, 2015 to July 17, 2015, by this writer, Cheyenne Evans, a Certified Department of Justice (DOJ) PREA Auditor with the assistance of one Support Staff Member, Gail Mirkovich, hereafter referred to as the PREA Audit Team. SCC is located in Carson City, Nevada, adjacent to the Northern Nevada Correctional Center.

At SCC approximately 100-120 trained inmates work with the Nevada Division of Forestry (NDF) on fire suppression crews and other community projects. SCC also provides workers for Prison Industries which operates a Ranch that has a Horse Training Program where the inmates train horses for adoption by the public in the Astray Horse Adoption Program. Prison Industries also operates a commercial Dairy, breeds and raises cattle, cares for horses and grows crops of alfalfa in coordination with the Department of Agriculture and the Bureau of Land Management. SCC inmates work alongside civilian and correctional staff to complete their goals and tasks. The facility design capacity is 360 minimum custody inmates. The camp is overseen by Northern Nevada Correctional Center (NNCC) located adjacent to SCC. NNCC Warden and Associate Wardens do periodic checks at SCC. The camp is managed on a daily basis by one Camp Manager, Lieutenant Robert Hartman. There are fifteen security staff members who all maintain the three, eight hour rotating shifts that run 0500-1300 hours, 1300-2100 hours and 2100 hours to 0500 hours.

Day one started with a "meet and greet" at SCC accompanied by NNCC Warden Isidro Baca, Facility PREA Compliance Manager Shannon Moyle, NDOC PREA Program Manager Deborah Striplin and Camp Lieutenant, Robert Harman. The following areas that were toured were 5 housing units open dormitory style, Culinary / Dining room, Canteen, Laundry rooms, Multipurpose / Gym and recreation areas around the main housing buildings. The Audit team also toured the Warehouse, Dairy and Horse Ranch areas which are located further behind SCC. There is a building in close proximity of the facility which sits on the outside of the perimeter fence line that belongs to Nevada Division of Forestry (NDF) where the inmates report for duty on a daily basis with NDF staff.

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

The second day was spent with continuing random staff interviews to include, medical staff and Volunteer/Contractor (NDF), First Responders, Designated Staff member Charged with monitoring retaliation and Intermediate to Higher Level Facility Staff. Staffing from all shifts was interviewed.

At the end of the second day a preliminary assessment of SCC's compliance with the PREA Standards was conducted by discussing each Standard with the Facility PREA Compliance Manager.

The PREA Audit Team held an exit debriefing for both NNCC and SCC in the Conference room located at NNCC Administrative building. The attendees included Inspector General Pamela Del Porto, NDOC PREA Program Manager Deborah Striplin, Warden Isidro Baca, Facility PREA Compliance Manager Shannon Moyle, SCC Camp Manager Lieutenant, Associate Warden of Operations Ron Schreckengost, Associate Warden of Programs Elizabeth Walsh, Correctional Case Worker Ronald Hannah, Lieutenant Matthew Smith, and Lieutenant John Alishio. The exit briefing recapped SCC's compliance.

### **DESCRIPTION OF FACILITY CHARACTERISTICS**

Stewart Conservation Camp (SCC) was newly constructed in 1995 to double the size of the original camp which started operations in 1978 as the Carson Conservation Camp. SCC is located in Carson City, Nevada. SCC has a design capacity of 360 minimum / community security custody beds for general population inmates. The physical plant includes 5 housing units with an open dormitory style, a Culinary / dining room, Laundry, Multipurpose / Gym and Canteen. The main entrance building is to include administrative offices using a total of 34, 350 square feet. Other area such as the Dairy Farm utilizes 46, 820 square feet. The facility uses a total of 82, 170 square feet on 11, 000 acres. NNCC also shares the 11, 000 acres with SCC.

Current inmate population at the time of audit was 352. The facility does not house any segregated or medical needs inmates.

SCC coordinates with the Nevada Division of Forestry (NDF) to train inmates to work with firefighting crews during fire season; they also participate in community work and clean up. On a daily basis crews "muster" in the Gym for count and when the count clears they are released to their NDF supervisor. At times they are required to camp in the areas of duty if it calls for it. During camp a correctional officer stays with them. SCC not only works with NDF but also with Prison Industries with providing workers for the Dairy, alfalfa crops and Horse Ranch. The inmates gain knowledge on how to care for and train in those areas. The Ranch generates funds through the programs offered at SCC by commercially selling beef, milk and alfalfa through the facility.

SCC's mission, vision, philosophy and goals are to protect and serve the public providing a safe and clean environment and accountability of the inmates. Pursue their missions with integrity and in a professional and ethical manner, raise the department to the highest standards by creating a safer Nevada. SCC will ensure the best use of the Department's resources and educate stakeholders and customers. Improve communications.

The Audit Team was impressed with how cooperative staff and inmates were during the audit. The information and comprehension of PREA were adequate and staff was well versed. SCC staff at all levels was very professional, efficient, respectful, and willing to aid the Audit Team without questions or commentary. The physical appearance of SCC inclusive of the inmate housing unit was clean, sanitary and in order.

### **SUMMARY OF AUDIT FINDINGS**

During the course of the two day on-site audit, the Audit Team interviewed approximately 24 random inmates and 2 LGBTI identified inmates. The Audit Team interviewed staff assigned to all 3 shifts for a total of 8 custody staff, 2 case managers, 1 registered nurse utilizing Random and Specialized staff PREA questionnaires. Additional Supervisory and Specialized staff interviews were done during the Central Office interviews. The Audit Team reviewed about 8+ institutional files and about 8+ medical files. The NOTIS system allows for paperless record keeping of information relevant to NDOC and SCC. SCC was determined to have met 41 of the 43 PREA Standards, as 2 Standards related to Contracting with Other Entities and Youthful Inmates is not applicable to NDOC and SCC. Please see the remaining pages of this report for an assessment of each PREA Standard.

Number of standards exceeded: 0

Number of standards met: 41

Number of standards not met: 0

Number of standards not applicable: 2

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

THE REMAINDER OF THE PAGE INTENTIONALLY BLANK

115.11	ZERO TOLERANCE OF SEXUAL ABUSE AND SEXUAL HARASSMENT; PREA COORDINATOR	
☐ Exceeds Standard (sul	ostantially exceeds requirement of standard)	
✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
period)  ☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		
mandating a zero tolerar for the agency's approac	NDOC policies/procedures AR 421, PREA Manual and SCC OP 421 outlines the agency's written policy mandating a zero tolerance policy toward all forms of sexual abuse, sexual harassment, and sets forth procedures for the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.  NDOC policy AR 421.18 includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment.	
Inspector General, locate	upper-level, agency-wide PREA Coordinator, whose position functions as the NDOC ed within the Inspector General Office. The position has sufficient time and authority to oversee the agency's efforts to comply with PREA in all of its facilities.	
Manager. The position h	ne Correctional Caseworker Specialist III at NNCC as the Facility PREA Compliance has sufficient time and support by the Warden / Department to develop, implement, and orts to comply with PREA in all of its facilities.	
445.40	CONTRACTING WITH CTUED ENTITIES FOR THE CONFINEMENT OF INMATES	
115.12	CONTRACTING WITH OTHER ENTITIES FOR THE CONFINEMENT OF INMATES	
<ul><li>☐ Exceeds Standard (sul</li><li>☐ Meets Standard (subst</li></ul>	CONTRACTING WITH OTHER ENTITIES FOR THE CONFINEMENT OF INMATES ostantially exceeds requirement of standard) antial compliance; complies in all material ways with the standard for the relevant review	
<ul><li>☐ Exceeds Standard (sul</li><li>☐ Meets Standard (subst</li><li>period)</li><li>☐ Does Not Meet Standard</li></ul>	ostantially exceeds requirement of standard)	
<ul><li>☐ Exceeds Standard (sul</li><li>☐ Meets Standard (subst</li><li>period)</li></ul>	ostantially exceeds requirement of standard) cantial compliance; complies in all material ways with the standard for the relevant review	
<ul> <li>□ Exceeds Standard (substitution of the content of t</li></ul>	ostantially exceeds requirement of standard) cantial compliance; complies in all material ways with the standard for the relevant review	
<ul> <li>□ Exceeds Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standar</li></ul>	ostantially exceeds requirement of standard) antial compliance; complies in all material ways with the standard for the relevant review and (requires corrective action)	
<ul> <li>□ Exceeds Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standard (substitute of the period)</li> <li>□ Does Not Meet Standar</li></ul>	estantially exceeds requirement of standard) antial compliance; complies in all material ways with the standard for the relevant review and (requires corrective action)  Inding corrective actions needed if does not meet standard  I through interviews and supporting documentations indicates that NDOC has not entered act for the confinement of inmates on or after August 20, 2012, or since the last PREA not applicable to NDOC and SCC.	
□ Exceeds Standard (substitute of the period) □ Does Not Meet Standard (Substitute of the period) □ Does Not Meet Standar	estantially exceeds requirement of standard) antial compliance; complies in all material ways with the standard for the relevant review and (requires corrective action)  Iding corrective actions needed if does not meet standard  I through interviews and supporting documentations indicates that NDOC has not entered act for the confinement of inmates on or after August 20, 2012, or since the last PREA not applicable to NDOC and SCC.  SUPERVISION AND MONITORING	
<ul> <li>□ Exceeds Standard (substitute of the standard (substitute of the standard (substitute of the standard of the st</li></ul>	postantially exceeds requirement of standard) antial compliance; complies in all material ways with the standard for the relevant review ard (requires corrective action)  Iding corrective actions needed if does not meet standard  I through interviews and supporting documentations indicates that NDOC has not entered act for the confinement of inmates on or after August 20, 2012, or since the last PREA not applicable to NDOC and SCC.  SUPERVISION AND MONITORING astantially exceeds requirement of standard)	
<ul> <li>□ Exceeds Standard (substitute of the period)</li> <li>□ Does Not Meet Standard</li> <li>☑ NOT APPLICABLE</li> <li>Auditor comments, including or renewed a contral audit. This standard is resulted in the period of the period of</li></ul>	estantially exceeds requirement of standard) antial compliance; complies in all material ways with the standard for the relevant review and (requires corrective action)  Iding corrective actions needed if does not meet standard  I through interviews and supporting documentations indicates that NDOC has not entered act for the confinement of inmates on or after August 20, 2012, or since the last PREA not applicable to NDOC and SCC.  SUPERVISION AND MONITORING	
□ Exceeds Standard (substitute of the period) □ Does Not Meet Standard (Substitute of the period) □ Does Not Meet Standard (Substitute of the period) □ Does Not Meet Standard (Substitute of the period) □ Does Not Meet Standard (Substitute of the period) □ Does Not Meet Standard (Substitute of the period)	postantially exceeds requirement of standard) antial compliance; complies in all material ways with the standard for the relevant review ard (requires corrective action)  Iding corrective actions needed if does not meet standard  I through interviews and supporting documentations indicates that NDOC has not entered act for the confinement of inmates on or after August 20, 2012, or since the last PREA not applicable to NDOC and SCC.  SUPERVISION AND MONITORING astantially exceeds requirement of standard)	
<ul> <li>□ Exceeds Standard (substitute of the period)</li> <li>□ Does Not Meet Standard</li> <li>☑ NOT APPLICABLE</li> <li>Auditor comments, included into or renewed a contral audit. This standard is resulted in the period of the period</li></ul>	estantially exceeds requirement of standard) cantial compliance; complies in all material ways with the standard for the relevant review and (requires corrective action)  Inding corrective actions needed if does not meet standard  I through interviews and supporting documentations indicates that NDOC has not entered and the confinement of inmates on or after August 20, 2012, or since the last PREA not applicable to NDOC and SCC.  SUPERVISION AND MONITORING Distantially exceeds requirement of standard) cantial compliance; complies in all material ways with the standard for the relevant review	

provides for adequate staffing levels. SCC does not have video monitoring systems but with their physical layout and their staffing plan it considers the factors identified in section a.1-11. According to NDOC policy/procedure AR 326, any deviations from the minimum staffing requirements are reported to the Warden via the Associate Warden.

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

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

115.14	YOUTHFUL INMATES	
☐ Exceeds Standard (sub	ostantially exceeds requirement of standard)	
☐ Meets Standard (substantial compliance; complies in all material ways with the standard		
for the relevant review period)		
☐ Does Not Meet Standard (requires corrective action)		
☑NOT APPLICABLE		
Auditor comments, inclu	ding corrective actions needed if does not meet standard	
SCC does not house you	uthful inmates. This programing is for adult offenders.	
	AR 421 and SCC OP 502 state that the facility prohibits placing youthful inmates in a youthful inmate will have sight, sound, or physical contact with any adult inmate.	

### 115.15 LIMITS TO CROSS GENDER VIEWING AND SEARCHES

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

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

Operational procedure 422 requires that female staff announce their presence when entering the housing unit.

Inmates interviewed indicated that the announcement is normal for the storekeeper as it is a female. During the tour, the staff members were consistent in making this announcement and the announcement was documented in NOTIS. A review of the Daily shift log in NOTIS did substantiate SCC's compliance with this standard.

SCC showers were individual using full length curtains which provided sufficient privacy from possible female staff view. During interviews SCC states that should shower times be needed to allow transgender or intersex inmate's to shower separately they would accommodate their request. During interviews with identified LGBTI inmates they reported that they had no issues with the showers or toilet facilities.

NDOC policy/procedure AR 421 and OP 422 prohibits searches of transgender or intersex inmates for the sole purpose of determining gender status. SCC reports that all security staff has received training on conducting pat down searches of transgender and intersex inmates. The standard requires that it is conducted in a professional, respectful, and least intrusive manner, while balancing the security needs of the facility. Review of Training documentation and training plans/PowerPoint substantiates claim.

	115.16	INMATES WITH DISABILITIES AND INMATES WHO ARE LIMITED ENGLISH PROFICIENT	
	☐ Exceeds Standard (sul	bstantially exceeds requirement of standard)	
	✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
	period)		
	□ Does Not Meet Standa	ard (requires corrective action)	
	A	aller a compared to a contract of the contract	
í	Auditor comments, inclu	uding corrective actions needed if does not meet standard	
	are limited English profic reading skills. NDOC po procedures to provide dis prevent, detect, and resp	AR 421 states that all inmates will be afforded PREA education, including inmates who cient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited slicy/procedure AR 421 and the PREA Manual outline the agency's established sabled inmates equal opportunity to benefit from all aspects of the agency's efforts to bond to sexual abuse and sexual harassment. SCC's comprehensive inmate education ters have been formatted in English and Spanish.	
	NDOC policy/procedure AR 421 and the PREA Manual prohibit the use of inmate interpreters, inmate readers, or other types of inmate assistance.		
	The NDOC / SCC have language bank contacts should they need interpreters.		
	115.17	HIRING AND PROMOTION DECISIONS	
	,	bstantially exceeds requirement of standard)	
	✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
	period)		
	☐ Does Not Meet Standard (requires corrective action)		
4	Auditor comments, including corrective actions needed if does not meet standard		
	. , ,	AR 300, AR 421, and the PREA Manual address the provision of 115.17(a)-1 by promoting of anyone, or utilizing the services of any contractor or volunteer, who:	

- Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution;
- Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
- Has been civilly or administratively adjudicated to have engaged in the activity described above.

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

AR 300, AR 421, and the PREA Manual state that before hiring any new staff member or utilizing the services of a contractor or volunteer, a criminal background records check shall be performed and HR will make its best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. AR 212 Contracts, states that "mandatory background checks on contractors/vendors will be completed no less than every three years in compliance with PREA federal mandates; the Contracts unit is required to maintain tracking documentation for audit purposes."

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

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

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

### 115.18 UPGRADES TO FACILITIES AND TECHNOLOGY

☐ Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review

period)  ☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		
NDOC/SCC has not acquired any new facilities or made any substantial expansions or modifications of existing facilities since August 20, 2012, or since the last PREA audit. SCC has not upgraded and installed a video monitoring system since August 20, 2012 or since the last PREA audit.		
TWO THE PROTOCOL AND CORENOLOMEDICAL EXAMINATIONS		
115.21 EVIDENCE PROTOCOL AND FORENSIC MEDICAL EXAMINATIONS		
Exceeds Standard (substantially exceeds requirement of standard)		
✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
□ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		
NDOC's Inspector General (IG) is responsible for conducting both the administrative and the criminal investigations for sexual abuse and sexual harassment. According to policy/procedure AR 421 Investigations, the IG investigators follow a uniform evidence protocol when conducting sexual abuse investigations and it is based on the most recent edition of DOJ's Office on Violence Against Women Publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents".		
SCC through NNCC offers all inmates who experience sexual abuse access to forensic medical examinations. An MOU with Las Vegas Rape Crisis Center According to policy/procedure INP 200 and AR 421, forensic exams are offered without financial cost to the victim. Forensic exams are conducted by SAFEs or SANEs, and when SAFEs or SANEs are not available, a qualified medical practitioner performs forensic medical exams. Based on a MOU with the Crisis Call Center, Inc. (CCC) a victim advocate from CCC will be made available to the victim during forensic exams.		
According to policy/procedure INP 200, when requested by the victim, a qualified agency staff member shall accompany and support the victim through the forensic exam process and investigatory interviews. NNCC/SCC provided NIC training certificates for the medical or mental health staff, which completed the PREA: Behavior Health Care for Sexual Assault Victims in a Confinement Setting webinar.		
AAS OO DOUGLEO TO ENGLIDE DEFEDRALO OF ALL FOATIONS FOR INVESTIGATIONS		
115.22 POLICIES TO ENSURE REFERRALS OF ALLEGATIONS FOR INVESTIGATIONS  Frequency Standard (substantially exceeds requirement of standard)		
<ul> <li>□ Exceeds Standard (substantially exceeds requirement of standard)</li> <li>☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)</li> </ul>		
□Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective estions peeded if does not most standard		

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

NDOC policy/procedure AR 421 Investigation of Allegations, states that the "NDOC Office of the Inspector General will investigate all allegations of staff on inmate sexual abuse, sexual harassment, and inmate on inmate

sexual abuse." Also, NDOC policy/procedure AR 421 and the PREA Manual state that "investigative staff assigned to the IG's office will conduct investigations into allegations or reports of sexual abuse or suspected sexual abuse of an inmate by a staff member." The language required by PREA standard 115.22(a)-1 is that the "agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment." The PREA Coordinator initiated corrective action by drafting an amendment to add the specific language relevant to sexual harassment. AR 421 and the PREA Manual define inmate on inmate sexual harassment as "repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate directed toward another."

The NDOC's PREA website includes a link to NDOC policy/procedure AR421 that describes the referral of allegations of sexual abuse or sexual harassment for criminal investigation. The NDOC does publish an extensive list of their policies/procedures under the heading "about NDOC: Administrative Regulations Table of Context. PREA standard 115.22(c) is not applicable. NDOC documents all referrals of allegations of sexual abuse or sexual harassment for criminal and administrative investigation by the IG's Office, and there are procedures in place governing the conduct of these investigations.

ļ	115.31	EMPLOYEE TRAINING
•	☐ Exceeds Standard (sub	ostantially exceeds requirement of standard)
	✓ Meets Standard (substa	antial compliance; complies in all material ways with the standard for the relevant review
ı	period)	
	☐ Does Not Meet Standar	rd (requires corrective action)
1	Auditor comments, inclu-	ding corrective actions needed if does not meet standard
	required subject matter for	power point dated March 25, 2014 were reviewed and the training materials cover the or this Standard. Acknowledgement forms provided to the audit tem confirmed that the DOC's zero tolerance policy and the parameters covered in the PREA training.
	employees are reassigne that all staff received the information about current	mates and the training is tailored to both male and female inmates, therefore if ad to/from facilities housing females, additional training is not required. SCC indicated required PREA training and on "off years," the agency does provide employees with policies regarding PREA sexual abuse and sexual harassment. In addition, staff has sies, posters, and memorandums year round. During the audit tour, each housing wing

# | 115.32 | VOLUNTEER AND CONTRACTOR TRAINING | | Exceeds Standard (substantially exceeds requirement of standard) | | Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) | | Does Not Meet Standard (requires corrective action) | | Auditor comments, including corrective actions needed if does not meet standard | | NDOC PREA manual stipulates volunteer and contractor receive training should they have contact with inmates

had a PREA poster. According to policy/procedure AR 421, employees will receive refresher trainings on PREA

every two years and this was verified by staff interviews.

for more than 20 hours a week. All volunteers and contractors will be notified of the departments zero tolerance policy. NDF volunteers / contractors are sent to the same training as the custody staff and receive the same updates. Interviews with NDF staff had verified their training by the knowledge they possessed of PREA. Chapel and re-entry volunteers receive a shorter training curriculum which, after reviewing meets the standard.

115.33	INMATE EDUCATION	
☐ Exceeds Standard (substantially exceeds requirement of standard)		
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
period)		
□ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		
According to policy/procedure AR 421, all inmates during the initial intake orientation receive information explaining the department's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. SCC is not an initial intake center and is more as a transfer facility for programs. SCC gives an initial orientation upon arrival to include PREA informational pamphlets in English and Spanish, a comprehensive education on PREA through a 3 and 15 min video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation reporting such incidents, and regarding Departmental policies and procedures for responding to such incidents An initial assessment/screening is done on the day of arrival. By the time inmates get to SCC they have seen a given PREA information several times.  The facility also provided records documenting the six month review for all inmates which are located in their institutional files. The inmates sign the PREA orientation acknowledgment form, acknowledging receipt of this		
information and this is er		
information and this is er		
	ntered into NOTIS.	
115.34	SPECIALIZED TRAINING: INVESTIGATIONS	
115.34  ☐ Exceeds Standard (sul	SPECIALIZED TRAINING: INVESTIGATIONS bstantially exceeds requirement of standard)	
115.34  ☐ Exceeds Standard (sul ☐ Meets Standard (substa	SPECIALIZED TRAINING: INVESTIGATIONS	
115.34  ☐ Exceeds Standard (substance)  ☐ Meets Standard (substance)	SPECIALIZED TRAINING: INVESTIGATIONS bestantially exceeds requirement of standard) antial compliance; complies in all material ways with the standard for the relevant review	
115.34  ☐ Exceeds Standard (substance)  ☐ Meets Standard (substance)	SPECIALIZED TRAINING: INVESTIGATIONS bstantially exceeds requirement of standard)	
□ Exceeds Standard (substance)     □ Meets Standard (substance)     □ Does Not Meet Standard	SPECIALIZED TRAINING: INVESTIGATIONS bestantially exceeds requirement of standard) antial compliance; complies in all material ways with the standard for the relevant review	
115.34  ☐ Exceeds Standard (substaperiod) ☐ Does Not Meet Standard  Auditor comments, inclu  Policy/procedure AR 421 investigations in confiner IG's office will conduct in	SPECIALIZED TRAINING: INVESTIGATIONS bestantially exceeds requirement of standard) antial compliance; complies in all material ways with the standard for the relevant review ard (requires corrective action)	
115.34  ☐ Exceeds Standard (substaperiod) ☐ Does Not Meet Standard  Auditor comments, inclu  Policy/procedure AR 421 investigations in confiner IG's office will conduct in	SPECIALIZED TRAINING: INVESTIGATIONS  Instantially exceeds requirement of standard)  Instantial compliance; complies in all material ways with the standard for the relevant review and (requires corrective action)  Indianated Corrective actions needed if does not meet standard  It states that the IG shall ensure that investigators are trained in conducting sexual abuse ment settings. NDOC PREA manual states that only investigative staff assigned to the expression into allegations or reports of sexual abuse or suspected sexual abuse of an err. Through document review confirms specialized training.	
115.34  ☐ Exceeds Standard (substaperiod) ☐ Does Not Meet Standard  Auditor comments, inclu  Policy/procedure AR 42¹ investigations in confiner IG's office will conduct in inmate by a staff member	SPECIALIZED TRAINING: INVESTIGATIONS  Instantially exceeds requirement of standard)  Instantial compliance; complies in all material ways with the standard for the relevant review and (requires corrective action)  Inding corrective actions needed if does not meet standard  It states that the IG shall ensure that investigators are trained in conducting sexual abuse ment settings. NDOC PREA manual states that only investigative staff assigned to the expestigations into allegations or reports of sexual abuse or suspected sexual abuse of an err. Through document review confirms specialized training.  SPECIALIZED TRAINING: MEDICAL AND MENTAL HEALTH CARE	
115.34  ☐ Exceeds Standard (substaperiod) ☐ Does Not Meet Standard  Auditor comments, inclu  Policy/procedure AR 42′ investigations in confiner IG's office will conduct in inmate by a staff member	SPECIALIZED TRAINING: INVESTIGATIONS  Instantially exceeds requirement of standard)  Instantial compliance; complies in all material ways with the standard for the relevant review and (requires corrective action)  Indianated Corrective actions needed if does not meet standard  It states that the IG shall ensure that investigators are trained in conducting sexual abuse ment settings. NDOC PREA manual states that only investigative staff assigned to the expression into allegations or reports of sexual abuse or suspected sexual abuse of an err. Through document review confirms specialized training.	

period)

☐ Does Not Meet Standard (requires corrective action)

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

NDOC has a policy/procedure, AR 421, which states that all full and part time medical and mental health service providers who work regularly in its facilities have received specialized PREA training. SCC has medical personnel located at the facility on a daily basis but is not 24 hour service. All other medical and mental health care would be done at NNCC.

All medical and mental health care practitioners will receive the training mandated for employees in PREA standards 115.31 and 115.32. This training will be coordinated by the NNCC / Central training division and documented in the employees training file. All medical staff will receive training in evidence collection. This will be provided by trained custody staff and documented with a training certificate in the employees supervisor file.

All medical and mental health staff will receive training in detecting and assessing signs of sexual abuse and harassment, and how to respond effectively and professionally to victims of sexual abuse and sexual harassment as provided in the NIC training module entitled

"Behavioral Health Care for Sexual Assault Victims in a Confinement Setting". This training will be documented with a training certificate within the employees supervisor file.

Submission of certificates from NIC confirmed training.

### 115.41 SCREENING FOR RISK OF VICTIMIZATION AND ABUSIVENESS

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

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

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

NDOC has a policy/procedure, AR 573 and SCC OP 573 that requires the facility to reassess each inmate's risk of victimization or abusiveness within 30 days of arrival at the facility, or when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of being sexually victimized or being sexually abusive. AR 573 prohibits the facility from disciplining inmates for refusing to answer, or for not disclosing complete information in response to questions asked during the assessments.

Review of NOTIS notes confirms such practice.

### 115.42 USE OF SCREENING INFORMATION

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review

period)  Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
NDOC has a policy/procedure, AR 573, which states that staff shall use the information from the risk assessment to make informed housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. SCC utilizes NOTIS alerts and all inmates are reviewed every six months at their classification reviews. AR 573 states that "a possible victim and a possible aggressor should not be housed together unless necessary." AR 573 does contain a generalized statement that staff shall make individualized determinations about how to ensure the safety of each inmate.	
NDOC / SCC does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities or units solely on the basis of such identification or status.	
115.43 PROTECTIVE CUSTODY	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
☐ Does Not Meet Standard (requires corrective action)	
,	
Auditor comments, including corrective actions needed if does not meet standard	
NDOC has a policy/procedure, AR 573 and SCC OP 573 that prohibits the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and it has been determined that there are no available alternative means of separation from likely abusers.	
According to NDOC policy/procedure AR 573, inmates placed in segregated housing for protective custody shall have access to programs, privileges, education, and work opportunities to the extent possible.	
115.51 INMATE REPORTING	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review	
period)  Does Not Meet Standard (requires corrective action)	
Boos Not West Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
NDOC has a policy AR 421 and SCC OP 421 that establishes procedures allowing for multiple internal ways for inmates to report privately to agency officials about PREA allegations. NDOC policy/procedure AR 421 states that reporting can include verbal complaints to any department employee, written complaints by inmate grievances or	

inmate kites, calling or emailing the NDOC Family Services Office, or writing to the Nevada Attorney General's Office. NDOC does not house inmates solely for civil immigration purposes and the U.S. Marshals would manage

these inmates at the relevant federal facility.

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

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

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

A memorandum was generated by Deborah Striplin, PREA Program Manager notifying NDOC staff of an anonymous reporting website and instructions on how staff can report anonymously.

### 115.52 EXHAUSTION OF ADMINISTRATIVE REMEDIES

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

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

AR 740 also states that all time frames are waived for allegations of sexual abuse, regardless of when the incident is alleged to have occurred, allegations of sexual abuse will not be referred to a staff member, who is the subject of the accusation of sexual abuse, inmates are not required to use an informal grievance process, or to otherwise attempt to resolve with staff an alleged incident of sexual abuse, and that a final decision on the merits shall be made within 90 days of the initial filing of the grievance. AR 421 and the PREA Manual state that third parties shall be permitted to assist and/or file on behalf of an inmate's request for administrative remedies. NDOC policy/procedure AR 740 outlines the agency's procedure for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. The grievance shall be immediately forwarded to the highest ranking staff member on duty so that corrective action may be taken immediately, the inmate shall receive an initial response within 48 hours, and the final decision shall be issued within five calendar days. AR 740 limits the agency's ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith.

115.53 INMATE ACCESS TO OUTSIDE CONFIDENTIAL SUPPORT SERVICES	INMATE REPOR
<ul> <li>□ Exceeds Standard (substantially exceeds requirement of standard)</li> <li>☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review</li> </ul>	
period)	
□ Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	,
SCC's inmate education PREA poster does provide inmates with the contact information for outside emotional support services but it don't list a 24 hour toll free hotline; the PREA Coordinator submitted a new MOU between	
NDOC and Crisis Call Center, Inc. Sexual Assault Support and Direct Services Program effective July 13, 2015.	
11200 and ones can content the content court capper and broad contest to any 10, 2010.	
NDOC and SCC do not house inmates solely for civil immigration purposes, therefore 115.53(a)-1 is not	
applicable. SCC informs the inmates, prior to giving them access to outside support services, the extent to which communications will be monitored. AR 421 and the PREA Manual outline the confidentiality of the communication	
between inmates and the outside advocacy or rape crisis center.	
,	
Recommended that all posters and information given to the inmates be revised with the new information and	
posted.	
	Ш
115.54 THIRD-PARTY REPORTING	$\prod$
☐ Exceeds Standard (substantially exceeds requirement of standard)	
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review	
period)	
☐ Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
NDOC provides a method to receive third-party reports of inmate sexual abuse or sexual harassment.	
Policy/procedure AR 421, which is available on NDOC's PREA website, outlines ways that visitors, inmate family members or associates, and other community members can privately report sexual abuse or sexual harassment.	
members of associates, and other community members can privately report sexual abase of sexual narassment.	
	_
115.61 STAFF AND AGENCY REPORTING DUTIES	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
□ Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	1
<u> </u>	Ш
115.62 AGENCY PROTECTION DUTIES	П
☐ Exceeds Standard (substantially exceeds requirement of standard)	1

	☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
	period)  ☐ Does Not Meet Standard (requires corrective action)		
	Auditor comments, including corrective actions needed if does not meet standard		
	NDOC policy/procedure AR 740 requires that immediate action shall be taken once the facility learns that an inmate is subject to a substantial risk of imminent sexual abuse. During staff interviews, it was evident that SCC staff understood the seriousness of a potential substantial risk situation and the need to immediately respond.		
Γ	145.62 DEPORTING TO OTHER CONFINEMENT FACILITIES		
	115.63 REPORTING TO OTHER CONFINEMENT FACILITIES		
	<ul> <li>□ Exceeds Standard (substantially exceeds requirement of standard)</li> <li>☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review</li> </ul>		
	period)		
	□ Does Not Meet Standard (requires corrective action)		
	Auditor comments, including corrective actions needed if does not meet standard		
	Addition comments, moldaring corrective actions needed in does not meet standard		
	SCC OP 421 In application, the IG's Office manages PREA allegations received from other NDOC facilities and external correctional agencies and is responsible for notifying the applicable NDOC facility and external correctional agency when a complaint is received at a NDOC facility.		
	According to NDOC policy/procedure AR 421, all agency allegations of sexual abuse and sexual harassment not generated from a facility must be reported to the Inspector General's Office. The PREA Coordinator confirmed that the IG's Office would manage the report of a PREA incident at a facility or entity that was not currently housing the inmates.		
Γ	AAF CA		
	<ul> <li>115.64 STAFF FIRST RESPONDER DUTIES</li> <li>□ Exceeds Standard (substantially exceeds requirement of standard)</li> </ul>		
	✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
	period)		
	☐ Does Not Meet Standard (requires corrective action)		
	Auditor comments, including corrective actions needed if does not meet standard		
	PREA manual for Sexual Assault Response articulates the steps and procedures for first responders 'duties within 72 hours and after 72 hours, to include duties of first responders that are not a security staff member. Separation		
	of victim and perpetrators, evidence collection, notification system and forms. Because conservation camps are		
	unique in the correctional system they normally do not have medical staff and extra security staff on hand and		
	must then rely on the assistance of NNCC to determine appropriate and further course of action to include		
	transports to local or community hospitals.		
١	If the first staff responder is not a security staff member, the responder shall be required to request that the		

alleged victim not take any actions that could destroy physical evidence, and then notify security staff, Shift

Commander/	SII	nervisor
Commanden	Οu	pei visoi.

NNCC will be contacted for assistance for transport. Secure the incident area and treat it as a crime scene until released by the Warden, Inspector General or designee. Evidence (if any) shall be collected with an appropriate chain of evidence form attached.

115.65	COORDINATED RESPONSE	
☐ Exceeds Standard (substantially exceeds requirement of standard)		
✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		
incident and emergencie sexual abuse among sta	me Scene Preservation and Investigation when responding to reports of Sexual Assault is as the written institutional plan to coordinate actions taken in response to an incident of first responders, medical and mental health practitioners, investigators, and facility y PREA standard 115.65(a)-1.	

115.66	PRESERVATION OF ABILITY TO PROTECT INMATES FROM CONTACT WITH ABUSERS	
☐ Exceeds Standard (substantially exceeds requirement of standard)		
✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		
requirements related to d	ot deal with Unions or Collective Bargaining Agreements, however there are statutory disciplinary action based on the Peace Officer's Bill of Rights. It is perceived that this d by the mandates of State or Local laws.	

L		
-		
115.67	AGENCY PROTECTION AGAINST RETALIATION	
☐ Exceeds Standard (su	bstantially exceeds requirement of standard)	
☑Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
period)		
☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		
	45 404 · · · · · · · · · · · · · · · · · ·	
NDOC policy/procedure	AR 421 states that no staff member or inmate who reports sexual abuse or sexual	

harassment or cooperates with sexual abuse or sexual harassment investigations will be subjected to any form of retaliation from other staff members or inmates of the Department. The Facility PREA Compliance Manager and

or Camp Lieutenant monitors the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff. SCC OP 421 Protection against retaliation requires that monitoring for retaliation be conducted and documented by the assigned staff member for ninety (90) days after an incident or longer if deemed necessary by the Warden.

115.68 POST-ALLEGATION PROTECTIVE CUSTODY		
☐ Exceeds Standard (substantially exceeds requirement of standard)		
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
period)		
☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		
NDOC policy/procedure AR 573 PREA Screening and Classification prohibits the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing, unless an assessment of all available alternative means of separation from likely abusers has occurred. In the past 12 months, no inmates who alleged to have suffered sexual abuse were held in involuntary segregated housing. According to AR 573 and PREA manual, if an involuntary segregated housing assignment is made, the facility affords each inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.		
115.71 CRIMINAL AND ADMINISTRATIVE INVESTIGATIONS		
☐ Exceeds Standard (substantially exceeds requirement of standard)		
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
period)		
☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		
NDOC is obligated to comply with the Peace Officer's Bill of Rights, which has stringent time requirements for criminal and administrative investigations related to staff. The IG Investigators have been trained as required by this Standard. NDOC AR 421 and the PREA Manual state that the IG Criminal Investigators will refer all substantiated criminal violations to the Attorney General's Office for criminal prosecution.  The IG's office retains all written reports pertaining to administrative or criminal investigations of alleged sexual assault or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus		
an additional five years.		
115.72 EVIDENTIARY STANDARDS FOR ADMINISTRATIVE INVESTIGATIONS		
☐ Exceeds Standard (substantially exceeds requirement of standard)		
☑Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
period)  ☐ Does Not Meet Standard (requires corrective action)		

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

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

115.73	REPORTING TO INMATES	
☐ Exceeds Standard (substantially exceeds requirement of standard)		
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
period)		
' '	ard (requires corrective action)	
	,	
Auditor comments, inclu	uding corrective actions needed if does not meet standard	
suffered sexual abuse in determined to be substar	457 Investigations, requiring that any inmate who makes an allegation that he or she an agency facility is informed, verbally or in writing, as to whether the allegation has been intiated, unsubstantiated, or unfounded following an investigation by the agency. PREA not applicable as NDOC is responsible for conducting administrative and criminal	
whenever: the staff mem at the facility; the agency	orms the inmate, unless the agency has determined that the allegation is unfounded, other is no longer posted within the inmate's unit; the staff member is no longer employed y learns that the staff member has been indicted on a charge related to sexual abuse agency learns that the staff member has been convicted on a charge related to sexual	
indicted on a charge rela	orms the alleged victim whenever: the agency learns that the alleged abuser has been ated to sexual abuse within the facility; or the agency learns that the alleged abuser has arge related to sexual abuse within the facility.	

### 115.76 DISCIPLINARY SANCTIONS FOR STAFF

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

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

AR 339 states that staff members will be subject to internal discipline to include termination as defined in NDOC policy AR 339 Code of Ethics Employee Conduct Prohibitions and Penalties. AR 339 indicates that staff penalties

for prohibited activities should be assessed based upon criteria established in the Chart of Corrective/Disciplinary Sanctions, which describes an available range of disciplinary action for each class of prohibited activity. According to the policy, sexual misconduct is in Class 5 which would warrant dismissal on the first offense.

115.77 CORRECTIVE ACTION FOR CONTRACTORS AND VOLUNTEERS		
☐ Exceeds Standard (substantially exceeds requirement of standard)		
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
period)		
☐ Does Not Meet Standard (requires corrective action)		
,		
Auditor comments, including corrective actions needed if does not meet standard		
<b>3</b>		
NDOC policy/procedure, AR 421, does require that any contractor or volunteer who engages in sexual abuse be		
reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing		
bodies. AR 421 and the PREA Manual state that any contractor or volunteer who engages in sexual abuse shall		
be prohibited from contact with inmates and reported to any relevant licensing body by the Inspector General's		
Office with applicable NOTIS entries documented. In the past 12 months, no contractors/volunteers have been		
reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.		
115.78 DISCIPLINARY SANCTIONS FOR INMATES		
☐ Exceeds Standard (substantially exceeds requirement of standard)		
✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
period)		
☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		
Addition Commission, including Controller decision included in account included changed		
AR 421.16 states "facility offer therapy, counseling, or other interventions designed to address and correct		
underlying reasons or motivations for the abuse and shall consider whether to require the offending inmate to		
participate in such interventions."		
participate in cucir interventione.		
AR 421 and PREA Manual articulate the standard for disciplinary sanction for inmates in the Offenses in Custody		
(OIC) section numbers 1 to 7.		
NDOC prohibits all sexual activity between inmates and consensual sexual activity between inmates is a criminal		
offense in Nevada. The inmates will be subject to administrative discipline and criminal prosecution.		
, , , , , , , , , , , , , , , , , , , ,		
115.81 MEDICAL AND MENTAL HEALTH SCREENINGS; HISTORY OF SEXUAL ABUSE		
☐ Exceeds Standard (substantially exceeds requirement of standard)		
✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review		
period)		
□ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		

SCC OP 613 for Intake / Reception Screening states that if the intake screening indicates that an inmate has experienced prior sexual victimization and or has previously perpetrated sexual abuse, whether it occurred in an institutional or jail setting or in the community, staff shall ensure the inmate is offered a follow up with medical and or mental health within 14 days of the intake.

Although information related to sexual victimization or abusiveness that occurred in an institutional setting is not strictly limited to medical and mental health practitioners, the information shared with other staff is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignment, or as otherwise required by federal, state, or local law.

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

115.82	ACCESS TO EMERGENCY MEDICAL AND MENTAL HEALTH SERVICES
113.02	I ACCESS TO LIVIENGENCT WILDICAL AND WILNTAL HEALTH SERVICES

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

SCC OP 613 states inmate victims of sexual abuse while incarcerated shall be offered timely information about, timely and unimpeded access to emergency medical treatment to include timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

According to NDOC policy procedure INP 200 Contraception, inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

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

# 115.83 ONGOING MEDICAL AND MENTAL HEALTH CARE FOR SEXUAL ABUSE VICTIMS AND ABUSERS

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

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

According to NDOC policy/procedure INP 200, SCC / NNCC offers medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or

juvenile facility. The policy outlines the procedure by stating that all inmates will be assessed during the intake process, inmates will be offered a follow-up within 14 days of intake screening, and treatment will be provided by practitioners when applicable, and referrals to community services if needed.

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

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

	115.86	SEXUAL ABUSE INCIDENT REVIEWS	
	☐ Exceeds Standard (substantially exceeds requirement of standard)		
✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review			
period)			
☐ Does Not Meet Standard (requires corrective action)			

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

NDOC policy/procedure OP 421 Sexual Assault of Inmates outlines the facility's Sexual Abuse Incident Review process. The SAIR, conducted by a Multi-Disciplinary Team, shall be held at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. According to OP 421, the PREA Compliance Manager will notify the review team (Warden, Lieutenant, Investigator and Medical/Mental Health staff) upon learning of the completion of any sexual abuse investigation, the review shall ordinarily occur within thirty (30) days of the conclusion of the investigation, and it will be documented using the Committee Review for Sexual Abuse Investigation form located in NOTIS (under the Incident IR Number). The policy states that the review team shall document their findings and the facility shall implement the recommendations for improvement or document its reasons for not doing so.

115.87	DATA COLLECTION	
☐ Exceeds Standard (substantially exceeds requirement of standard)		
✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		

According to NDOC policy AR 421 and the PREA Manual, the IG is responsible to collect accurate, uniform data for every allegation of sexual abuse from every institution and facility using a standardized instrument and set of

for every allegation of sexual abuse from every institution and facility using a standardized instrument and set of definitions. The PREA Manual states that the data shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization conducted by Department of Justice. The incident based sexual abuse data shall be aggregated, at a minimum, annually. According to the policy, the IG and the Department shall maintain, review and collect data as needed from all incident based documents, including reports, investigation files, and sexual abuse reviews, and the data from the previous calendar year shall

be available for production upon a request from the Department of Justice.

115.88	DATA REVIEW FOR CORRECTIVE ACTION	
☐ Exceeds Standard (sul	ostantially exceeds requirement of standard)	
✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
☐ Does Not Meet Standard (requires corrective action)		
Auditor comments, including corrective actions needed if does not meet standard		
According to NDOC policy AR 421 and the PREA Manual, the data collected and aggregated shall be reviewed by the Director, or designee, Deputy Director of Operations, and the IG PREA Coordinator in order to assess and improve, if necessary, the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training.		
The review will include: identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each institution, facility and the Department where inmates may be present. The policy states that the annual report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the Department's progress in addressing sexual abuse. The Department's report is readily available to the public on the Department's website after it is approved by the Director. The report was located on NDOC's website. If specific material is redacted from the reports, then there must be an indication of the nature of the material redacted.		
115.80	DATA STORAGE PURLICATION AND DESTRUCTION	

115.89	DATA STORAGE, PUBLICATION, AN	D DESTRUCTION

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

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

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

### **AUDITOR CERTIFICATION:**

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

Chevenne Evans

Certified DOJ PREA Auditor

8/29/15

Date

THE REMAINDER OF THE PAGE INTENTIONALLY BLANK