

**FINAL AUDIT REPORT:
TONOPAH CONSERVATION CAMP**

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



Name of facility: Tonopah Conservation Camp	
Physical Address: 100 Conservation Road Tonopah, Nevada 89049	
Date report submitted: August 29, 2015	
Auditor Information: Cheyenne Evans	
Address: 919 Ala Moana Blvd. Suite #116, Honolulu, HI 96814	
E-Mail: cheyenne.l.evans@hawaii.gov	
Telephone number: 808-266-9674	
Date of facility visit: 07/09/2015 & 07/10/2015	
Facility Information	
Facility mailing address: (if different from above) HC76 Box 8045 Tonopah Nevada 89049	
Facility Telephone Number: 775-482-6700	
TCC is:	
<input type="checkbox"/> Military	<input type="checkbox"/> County
<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal
<input type="checkbox"/> Private not for profit	<input checked="" type="checkbox"/> State
Facility Type: <input type="checkbox"/> Jail <input checked="" type="checkbox"/> Prison	
Name of PREA Compliance Manager: Larry Wuest	Title: Correctional Caseworker Specialist III
E-Mail Address: lwuest@doc.nv.gov	
Phone Number: 702-879-6884	
Agency Information	
Name of agency: Nevada Department of Corrections	
Governing authority or parent agency: (if applicable) N/A	
Physical address: 550 Snyder Ave. Bldg. 17, Carson City, NV 89701	
Mailing address: (if different from above)	
Telephone Number: 775-887-3285	
Agency Chief Executive Officer	
Name: James "Greg" Cox	Title: Director
E-Mail Address: gcox@doc.nv.gov	Telephone Number: 702-486-9910
Agency-Wide PREA Coordinator	
Name: Pamela Del Porto	Title: Inspector General/PREA Coordinator
E-Mail Address: pdelporto@doc.nv.gov	Telephone Number: 775-887-3395

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

NARRATIVE:

The PREA audit for the Nevada Department of Corrections (NDOC), Tonopah Conservation Camp (TCC) was conducted from July 9, 2015 to July 10, 2015, by this writer, Cheyenne Evans, a Certified Department of Justice (DOJ) PREA Auditor with the assistance of one Support Staff Member, Gail Mircovich, hereafter referred to as the PREA Audit Team. TCC is located in Tonopah, Nevada.

TCC opened in 1991 which is in Nye County, Nevada and is currently a camp dedicated to fire suppression with guidance from the Nevada Division of Forestry (NDF). NDOC/TCC coordinates with the Nevada Division of Forestry (NDF) to train inmates to work with firefighting crews during fire season. The facility design capacity is 152 minimum custody inmates. During the time of audit the population count was 151 inmates. The camp is overseen by High Desert State Prison (HDSP) located in Indian Springs, Nevada where the Warden and Associate Warden do periodic checks at TCC. The camp is managed on a daily basis by one Camp Manager, Temporarily Assigned (TA) Lieutenant, Sergeant Tom Stubbs. There are nine listed security staff members to include another Senior Officer who is Temporarily Assigned as the camp Sergeant and two other Senior Officers 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 of audit the Audit Team arrived mid-day due to the 4 hour drive from Elko to Tonopah. Upon arrival the physical audit began with a "meet and greet" with the Associate Warden Timothy Filson, Facility PREA Compliance Manager Larry Wuest who both come from High Desert State Prison, Camp Manager, Temporarily Assigned Lieutenant Sergeant Tom Stubbs and the PREA Audit Team. The following areas that were toured were one housing unit, within this one unit there are four wings A, B, C and Culinary / Dining room. Other areas toured were the Multipurpose / Gym and recreation areas around the main housing building. Also within the housing unit we toured the Canteen Room, Administrative and Case Management Offices. 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. During the tour it was found that the setup of inmate cabinets and hanging clothing were an issue as it blocked the bunks and created a blind spot. The Camp and PREA Compliance Manager stated that they will take care of it by the end of the next day.

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 and a few specialized staff.

There were no inmates who identified as Lesbian, Gay, Bisexual, Transgender or Intersex (LGBTI), or categorized as inmates who were disabled or with limited English, nor any inmates who reported sexual abuse at TCC. There was 1 inmate who The Audit Team perceived to be LGBTI and was interviewed, after the interview it was clear that the inmate was not LGBTI. The Audit Team interviewed approximately 10 percent or more of the inmate population, 19 inmates out of 151 using the Random Inmate questionnaire.

The second day was spent with continuing random staff interviews to include specialized staff, Warden / Designee, Facility PREA Compliance Manager, Volunteer/Contractor (NDF), First Responders, Designated Staff member Charged with monitoring retaliation and Intermediate to Higher Level Facility Staff. Due to the minimal compliment of staffing all staff members were interviewed. As the interviews were ongoing it was discovered that some staff members have multiple roles because of the staffing compliment therefore, in conjunction with the Random Staff questionnaire they were asked questions from the Specialized section listed above. A review of the TCC PREA information manual that they staff uses was done and found to be outdated. This issue was rectified as the Facility PREA Compliance Manager updated the information in the manual prior to this report. The issues with the blocking of the bunks / sleeping area with the inmate cabinets were taken care of as the cabinets and location to hang clothes were changed around to assure clear view of the bunks / sleeping areas.

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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

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

At the end of the second day a preliminary assessment of TCC's compliance with the PREA Standards was conducted by discussing each Standard with the Facility PREA Compliance Manager. There were some concerns on the process of the screening tool of how the information is stored and followed up on, to verify that the requirement for the screening was being met. The Facility PREA Compliance Manager along with the State PREA Coordinator rectified the issue; fixed their process and a new procedure on how the information is received, recorded and stored has been done. The issue was that TCC staff was unclear as if they needed to retract and update information on the screening once they knew the correct process of the screening tool. Copies of amended screening tools and updates in NOTIS were submitted to this auditor via email.

The PREA Audit Team held an exit debriefing in the staff office. The attendees included Inspector General Pamela Del Porto via telephone, NDOC PREA Program Manager Deborah Striplin, Associate Warden Timothy Filson, Facility PREA Compliance Manager Larry Wuest and Camp Manager TA Lieutenant Tom Stubbs. The exit briefing recapped TCC's compliance and issues that needed resolution with the standards through discussion and documentation.

DESCRIPTION OF FACILITY CHARACTERISTICS

Tonopah Conservation Camp (TCC) was constructed in 1990 and is located in Nye County Nevada. TCC has a design capacity of 152 minimum security custody beds for general population inmates. The physical plant includes 1 housing unit with 3 wings, A, B & C & the Culinary Unit, this main building is to include administrative offices, a canteen / store room using a total of 12, 948 square feet. Other buildings; multipurpose / Gym uses 7, 000 square feet, the pump house, water shed and dump station utilizes a total of 1, 841 square feet. The facility uses a total of 21, 789 square feet on. There are 2 buildings that sit right outside of the facilities perimeter fence line belongs to NDF, administrative and industry that uses a total of 3, 748 square feet.

Current inmate population at the time of audit was 151. The facility does not house any segregated or medical needs inmates.

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

TCC's mission, vision philosophy and goals are to protect and serve the public providing a safe and clean environment and accountability of the inmates. Give the inmates skills necessary to successfully re-enter society and enhancing the safe operation of correctional facilities. They provide man power and support to NDF who is responsible for assisting during disaster relief incidents and community needs. The program will improve relations that may assist in providing a fiscally responsible method for the housing of inmates while generating funds through inmate labor for NDOC. With this mission and vision to provide man power and support to NDF is administered by a Warden Dwight Neven and Associate Warden Timothy Filson located at High Desert State Prison (HDSP) who oversees TCC. The Security or Command Staff on a daily basis located at TCC consists of 1 Lieutenant Camp

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

Manager, 1 Sergeant and 1 Senior Officer. There are 8 custody positions, 1 Correctional Case Worker and 1 Retail Storekeeper.

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

The Audit Team was impressed with how cooperative staff and inmates were during the audit. The information and comprehension of PREA were adequate but needed some follow up with new updated material and a more clear direction must be led by the Facility PREA Compliance Manager. Several staff members have shown initiative and motivational attitudes for compliance with the standards. TA Camp Lieutenant put their best efforts to assure TCC staff was informed about PREA and practices were implemented which were revealed during interviews and the tour. TCC staff at all levels was very professional, efficient, respectful, and willing to aid the Audit Team without questions or commentary. The physical appearance of TCC inclusive of the inmate housing unit was clean, sanitary granted being in a harsh environment.

SUMMARY OF AUDIT FINDINGS

During the course of the two day on-site audit, the Audit Team interviewed approximately 19 random inmates and 1 specialized inmate that was perceived to be LGBTI. The Audit Team interviewed all staff assigned to all 3 shifts where the Associate Warden got authorization to bring in the night shift for interview for a total of 8 custody staff, 1 case manager, 1 store keeper, the Facility PREA Compliance Manager and Warden or Designee, all utilizing Random and Specialized staff PREA questionnaires. Additional Supervisory and Specialized staff interviews were done during the Central Office interviews. The Audit Team reviewed about 8+ institutional files and about 8+ medical files. The NOTIS system allows for paperless record keeping of information relevant to NDOC and TCC. TCC 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 TCC. 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**

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

115.11	ZERO TOLERANCE OF SEXUAL ABUSE AND SEXUAL HARASSMENT; PREA COORDINATOR
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>NDOC policies/procedures AR 421 and 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.</p> <p>The agency employs an upper-level, agency-wide PREA Coordinator, whose position functions as the NDOC Inspector General, located within the Inspector General Office. The position has sufficient time and authority to develop, implement, and oversee the agency's efforts to comply with PREA in all of its facilities.</p> <p>NDOC has designated the Associate Warden of Programs as the Facility PREA Compliance Manager. The position has sufficient time and authority to develop, implement, and oversee the agency's efforts to comply with PREA in all of its facilities.</p>	

115.12	CONTRACTING WITH OTHER ENTITIES FOR THE CONFINEMENT OF INMATES
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action) <input checked="" type="checkbox"/> NOT APPLICABLE	
Auditor comments, including corrective actions needed if does not meet standard	
<p>The information received through interviews and supporting documentations indicates that NDOC has not entered into or renewed a contract for the confinement of inmates on or after August 20, 2012, or since the last PREA audit. This standard is not applicable to NDOC and TCC.</p>	

115.13	SUPERVISION AND MONITORING
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>TCC has developed, documented, and made its "best efforts" to comply on a regular basis with a staffing plan that provides for adequate staffing levels. TCC 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</p>	

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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 421 and the PREA Manual require intermediate or higher level supervisors to conduct unannounced rounds and that staff are prohibited from alerting other staff members to these unannounced supervisory rounds. During interviews and observations all supervisors are out in the open and all staff is usually in the "rotunda" area which is located in the center of all of the wings and culinary entrances. The supervisors a working supervisors and is always walking around. If for some reason the supervisor was announced the staff would be counseled. The NOTIS system was accessed where it shows that unannounced rounds were being done by intermediate or higher level supervisors.

115.14 YOUTHFUL INMATES

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

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

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

NDOC policy/procedure AR 421 and the PREA Manual state that the facility prohibits placing youthful inmates in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate.

115.15 LIMITS TO CROSS GENDER VIEWING AND SEARCHES

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

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

NDOC policy/procedure AR 421 and the PREA Manual prohibit non-medical staff from conducting cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances. The policy requires that all exigent cross-gender visual body cavity searches be reported to the Warden and that they are documented in writing in NOTIS. TCC 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 421 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

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

NOTIS. A review of the Daily shift log in NOTIS did substantiate TCC's compliance with this standard.

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

NDOC policy/procedure AR 421 prohibits searches of transgender or intersex inmates for the sole purpose of determining gender status. TCC 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
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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

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

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

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

During staff interviews some reported that they have capable staff that could also translate for Spanish speaking inmates if there were an emergency.

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

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

NDOC policy/procedure AR 300, AR 421, and the PREA Manual address the provision of 115.17(a)-1 by

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

prohibiting the hiring and promoting of anyone, or utilizing the services of any contractor or volunteer, who:

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

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

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

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

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

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

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

- 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/TCC did not do upgrades to the facility or technology since August 20, 2012 or since the last PREA audit. It is recommended that they install video monitoring systems to assist due to minimal staffing compliment. Video monitoring would also assist in deterrence for unauthorized activities that may occur. TCC stated that they will be submitting additional budgetary request to upgrade / add a video technology system.

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

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

NDOC's Inspector General (IG) is responsible for conducting both the administrative and the criminal investigations for sexual abuse and sexual harassment. According to policy/procedure AR 421 Investigations, the IG investigators follow a uniform evidence protocol when conducting sexual abuse investigations and it is based on the most recent edition of DOJ's Office on Violence against Women publication. AR 421 is developmentally appropriate for youth; however the facility has not housed any youth after July 2014.

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

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

115.22	POLICIES TO ENSURE REFERRALS OF ALLEGATIONS FOR INVESTIGATIONS
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- Exceeds Standard (substantially exceeds requirement of standard)
 Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
 Does Not Meet Standard (requires corrective action)

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

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

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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

The NDOC's PREA website includes a link to NDOC policy/procedure AR421 that describes the referral of allegations of sexual abuse or sexual harassment for criminal investigation. PREA standard 115.22(c) is not applicable as the Department is responsible for conducting criminal investigations. NDOC documents all referrals of allegations of sexual abuse or sexual harassment for criminal and administrative investigation by the IG's Office, and there are procedures in place governing the conduct of these investigations.

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

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

The lesson plan and the power point dated March 25, 2014 were reviewed and the training materials cover the required subject matter for this Standard. The training logs in 2015 included an affirmation that the employee understood NDOC's zero tolerance policy and the parameters covered in the PREA training.

TCC houses only male inmates and the training is tailored to both male and female inmates, therefore if employees are reassigned to/from facilities housing females, additional training is not required. TCC indicated that all staff received the required PREA training and on "off years," the agency does provide employees with information about current policies regarding PREA sexual abuse and sexual harassment. In addition, staff has access to the PREA policies, posters, and memorandums year round. During the audit tour, each housing wing 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 and training records.

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

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

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

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

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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

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

115.34

SPECIALIZED TRAINING: INVESTIGATIONS

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

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

115.35

SPECIALIZED TRAINING: MEDICAL AND MENTAL HEALTH CARE

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

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. TCC does not have medical personnel located at the facility. All medical and mental health care would be done at HDSP. Transporting of inmates will be scheduled in cooperation between TCC and HDSP. Staff interviews had verified that medical staff at HDSP is qualified.

OP 609.01 SPECIALIZED TRAINING FOR MEDICAL AND MENTAL HEALTH PERSONNEL:

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

The Director of Nursing Services will assure quality and availability of medical and mental health services, and will be responsible for developing and maintaining a written plan for delivery of health services to all inmates.

HDSP shall ensure that all full and part time medical and mental health care practitioners who work regularly in the facility have been trained in;

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 HDSP 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.

115.41	SCREENING FOR RISK OF VICTIMIZATION AND ABUSIVENESS
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- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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

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

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

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

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

115.42	USE OF SCREENING INFORMATION
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FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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

115.43 PROTECTIVE CUSTODY

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

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

NDOC has a policy/procedure, AR 573, that prohibits the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and it has been determined that there are no available alternative means of separation from likely abusers.

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

115.51 INMATE REPORTING

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

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

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

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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

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

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

115.52	EXHAUSTION OF ADMINISTRATIVE REMEDIES
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- 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
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INMATE REPORT

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

- 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

TCC'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.

NDOC and TCC do not house inmates solely for civil immigration purposes, therefore 115.53(a)-1 is not applicable. TCC 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.

115.54 | THIRD-PARTY REPORTING

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

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

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

115.61 | STAFF AND AGENCY REPORTING DUTIES

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

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

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

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

NDOC AR 421 and the PREA Manual require that all staff immediately report any staff neglect or violation of responsibilities that may have contributed to any incident of inmate on inmate or staff/contractor/volunteer on inmate sexual abuse or inmate on inmate or staff/contractor/volunteer on inmate sexual harassment or retaliation for reporting of an allegation by other staff or inmates. It further states that all case records associated with claims of sexual assault, sexual activity, sexual misconduct or any attempt thereof, including written reports, investigation reports, evidence, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are confidential.

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

115.62 AGENCY PROTECTION DUTIES

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

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

NDOC policy/procedure AR 740 requires that immediate action shall be taken once the facility learns that an inmate is subject to a substantial risk of imminent sexual abuse. During staff interviews, it was evident that TCC staff understood the seriousness of a potential substantial risk situation and the need to immediately respond.

115.63 REPORTING TO OTHER CONFINEMENT FACILITIES

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

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

In application, the IG's Office manages PREA allegations received from other NDOC facilities and external correctional agencies and is responsible for notifying the applicable NDOC facility and external correctional agency when a complaint is received at a NDOC facility. According to NDOC policy/procedure AR 421, all agency allegations of sexual abuse and sexual harassment not generated from a facility must be reported to the Inspector General's Office. The PREA Coordinator confirmed that the IG's Office would manage the report of a PREA incident at facility or entity that was not currently housing the inmates. During the past 12 months.

115.64 STAFF FIRST RESPONDER DUTIES

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

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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

OP 421.05 and OP 421.06 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 is not a security staff member. Separation of victim and perpetrators, evidence collection, notification system and forms. Because conservation camps are unique in the correctional system they do not have medical staff and extra security staff on hand and must then rely on the assistance of HDSP to determine appropriate and further course of action to include transports to local or community hospitals.

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

HDSP 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

TCC utilizes OP 421 Sexual Assault Response and Documentation when responding to Incident and Emergencies as the written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership, as required by PREA standard 115.65(a)-1.

115.66 PRESERVATION OF ABILITY TO PROTECT INMATES FROM CONTACT WITH ABUSERS

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

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

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

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

115.67	AGENCY PROTECTION AGAINST RETALIATION
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>NDOC policy/procedure AR 421 states that no staff member or inmate who reports sexual abuse or sexual harassment or cooperates with sexual abuse or sexual harassment investigations will be subjected to any form of retaliation from other staff members or inmates of the Department. The Facility PREA Compliance Manager and or Camp Lieutenant monitors the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff. Policy/procedure OP 421 Sexual Assault of Inmates requires that monitoring for retaliation be conducted and documented by the assigned staff member for ninety (90) days after an incident or longer if deemed necessary by the Warden.</p>	

115.68	POST-ALLEGATION PROTECTIVE CUSTODY
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>NDOC policy/procedure AR 573 PREA Screening and Classification prohibits the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing, unless an assessment of all available alternative means of separation from likely abusers has occurred. In the past 12 months, no inmates who alleged to have suffered sexual abuse were held in involuntary segregated housing. According to AR 573, if an involuntary segregated housing assignment is made, the facility affords each inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.</p>	

115.71	CRIMINAL AND ADMINISTRATIVE INVESTIGATIONS
<input type="checkbox"/> Exceeds Standard (substantially exceeds requirement of standard) <input checked="" type="checkbox"/> Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) <input type="checkbox"/> Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions needed if does not meet standard	
<p>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.</p>	

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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)
- Does Not Meet Standard (requires corrective action)

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

NDOC has a policy, AR 457 Investigations, requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. PREA standard 115.73(b)-1 is not applicable as NDOC is responsible for conducting administrative and criminal investigations.

NDOC subsequently informs the inmate, unless the agency has determined that the allegation is unfounded, whenever: the staff member is no longer posted within the inmate's unit; the staff member is no longer employed at the facility; the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility

The IG subsequently informs the alleged victim whenever: the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

115.76 DISCIPLINARY SANCTIONS FOR STAFF

- Exceeds Standard (substantially exceeds requirement of standard)

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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

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

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

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

115.77 CORRECTIVE ACTION FOR CONTRACTORS AND VOLUNTEERS

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

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

NDOC policy/procedure, AR 421, does require that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. AR 421 and the PREA Manual state that any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and reported to any relevant licensing body by the Inspector General's Office with applicable NOTIS entries documented. In the past 12 months, no contractors/volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.

115.78 DISCIPLINARY SANCTIONS FOR INMATES

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

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

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

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

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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

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

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

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

115.82 ACCESS TO EMERGENCY MEDICAL AND MENTAL HEALTH SERVICES

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

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

According to AR 421 states inmate victims of sexual abuse while incarcerated shall be offered timely information about, timely and unimpeded access to emergency medical treatment to include timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

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

115.83 ONGOING MEDICAL AND MENTAL HEALTH CARE FOR SEXUAL ABUSE VICTIMS

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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, TCC / HDSP 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 TCC, because the facility does not house female inmates.

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

115.86

SEXUAL ABUSE INCIDENT REVIEWS

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

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

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

Facility PREA Compliance Manager revealed during interview that he is not included in the SAR meetings. According to OP 421 the compliance manager is part of the review. Forwarded information to IG to assure he is included in TCC's SAR's.

115.87

DATA COLLECTION

- Exceeds Standard (substantially exceeds requirement of standard)

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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

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

According to NDOC policy AR 421 and the PREA Manual, the IG is responsible to collect accurate, uniform data for every allegation of sexual abuse from every institution and facility using a standardized instrument and set of definitions. The PREA Manual states that the data shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization conducted by Department of Justice. The incident based sexual abuse data shall be aggregated, at a minimum, annually. According to the policy, the IG and the Department shall maintain, review and collect data as needed from all incident based documents, including reports, investigation files, and sexual abuse reviews, and the data from the previous calendar year shall be available for production upon a request from the Department of Justice.

115.88 DATA REVIEW FOR CORRECTIVE ACTION

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

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

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

The review will include: identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each institution, facility and the Department where inmates may be present. The policy states that the annual report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the Department's progress in addressing sexual abuse. The Department's report is readily available to the public on the Department's website after it is approved by the Director. The report was located on NDOC's website. If specific material is redacted from the reports, then there must be an indication of the nature of the material redacted.

115.89 DATA STORAGE, PUBLICATION, AND DESTRUCTION

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

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

According to NDOC policy AR 421 and the PREA Manual, all data collected related to incidents that are alleged to be sexual abuse will be securely retained and made readily available to the public through the website, annually.

FINAL AUDIT REPORT: TONOPAH CONSERVATION CAMP

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.



Cheyenne Evans
Certified DOJ PREA Auditor

8/29/15

Date

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